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**Title:** Bronchial artery aneurysm with hemothorax – A case report

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**Body:** Bronchial artery aneurysm (BAA) is a rare condition (fewer than 40 cases have been reported in the literature), observed in less than 1% of all cases of selective bronchial arteriography. BAA is often diagnosed when it ruptures, with the most common symptoms being acute dyspnea, severe chest/back pain, hemoptysis / hematemesis (rupture into the lung/esophagus), symptoms of shock and sometimes hemothorax. The authors report a case of a 65-year-old male patient, suffering of hypertension and permanent atrial fibrillation (treated with warfarin 5mg/day), with no previous history of pulmonary pathology, who presented with fever, wheezing, cough and hemopurulent sputum 4 days before. The chest radiography showed middle lobe (ML) and lower right lobe (LRL) consolidation leading to the diagnosis of community acquired pneumonia. About 48 hours after the admission the patient had an episode of massive hemoptysis, severe dyspnea, wheezing and signs of shock, with a chest radiography showing a total right lung opacification. The bronchoscopy showed multiple clots in the ML and LRL, the right thoracentesis drained 2000cc of hematic fluid and the thoracic angio-computerized tomography documented an aneurysm of the right bronchial artery (8mm) and a contained rupture of a huge aneurysm of the intra-pulmonary branch of that artery (2.4cm) with intra-pulmonary hematoma and right hemothorax. Accordingly to the situation the patient was immediately submitted to surgery. A massive hemothorax from a ruptured BAA is very rare. Though, this possibility must be considered in the absence of trauma history or other more common causes of hemothorax.