

# LETTERS TO THE EDITOR

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## Illustrations of clinically relevant celiacomesenteric trunk anatomic variants

I read the case report by Ritenour and Mousa<sup>1</sup> with keen interest because it emphasizes that a detailed understanding of celiacomesenteric trunk (CMT) variants is paramount to surgical problem solving in acute splanchnic ischemia. I would like to complement their work by providing a full illustration of the endovascular technique used and to visually illuminate the intricate vascular anatomy of this region and its variations. Furthermore, the presentation of a clear visual reference could assist in the widespread adoption and didactic dissemination of the classification system outlined by Tang et al<sup>2</sup> and others.<sup>3,4</sup>

The five CMT types are categorized in Fig 1 as follows. Type I is a common hepatosplenic-gastric mesenteric trunk. Subtype IA can be further described as short or long, depending on the length of the CMT before the second-order division of the arterial branches. Subtype IB is a variant of the long CMT but with a proximal, independent takeoff from the gastric artery. Type II is hepatosplenic mesenteric trunk with a separate left gastric artery originating from the aorta. Type III is a gastrosplenic mesenteric trunk with a common hepatic artery originating from the aorta. Type IV is hepatogastric-splenic mesenteric trunk with the splenic artery emanating from the aorta. Type V is a single CMT trunk with a second order gastrosplenic trunk originating from the common hepatic artery. Fig 2 shows an illustration of how the authors successfully treated a patient

with an occluded type IV CMT with a balloon expandable stent.

I hope that this visual addition to this timely case report will enhance medical education and provider communication about this important and highly variable anatomy.

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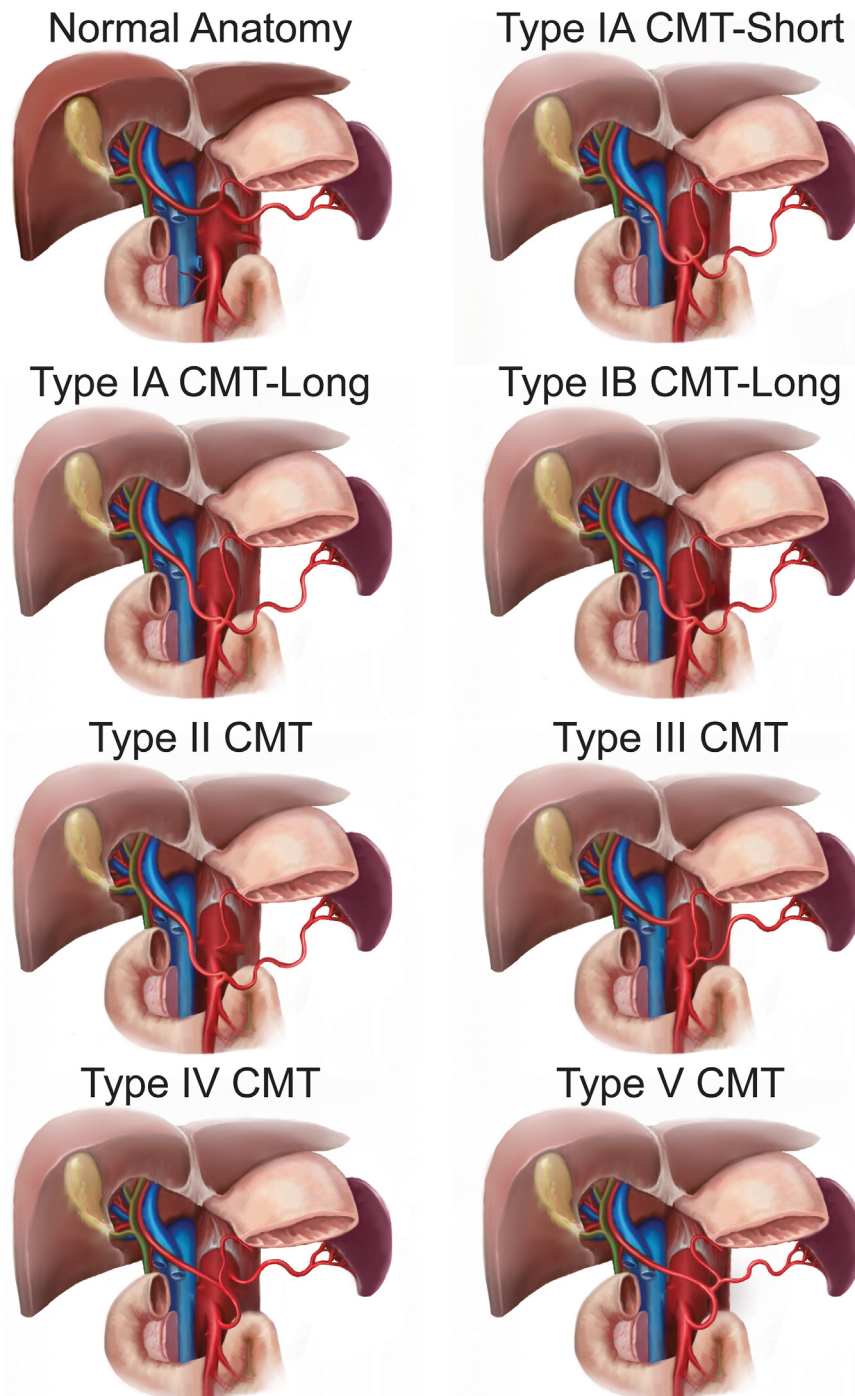
Jerry M. Wallace School of Osteopathic Medicine  
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College of Medicine  
Drexel University  
Philadelphia, PA

## REFERENCES

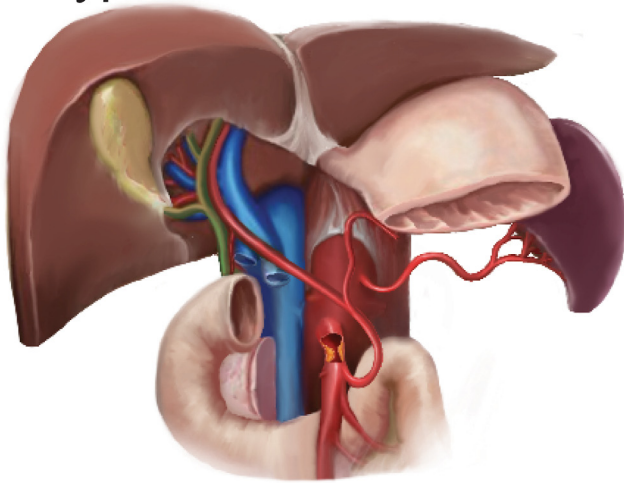
1. Ritenour A, Mousa A. Successful endovascular treatment of acute mesenteric and hepatic ischemia in patient with celiacomesenteric trunk occlusion. *J Vasc Surg Cases Innov Tech.* 2023;9:101314.
2. Tang W, Shi J, Kuang LQ, Tang SY, Wang Y. Celiacomesenteric trunk: new classification based on multidetector computed tomography angiographic findings and probable embryological mechanisms. *World J Clin Cases.* 2019;7:3980–3989.
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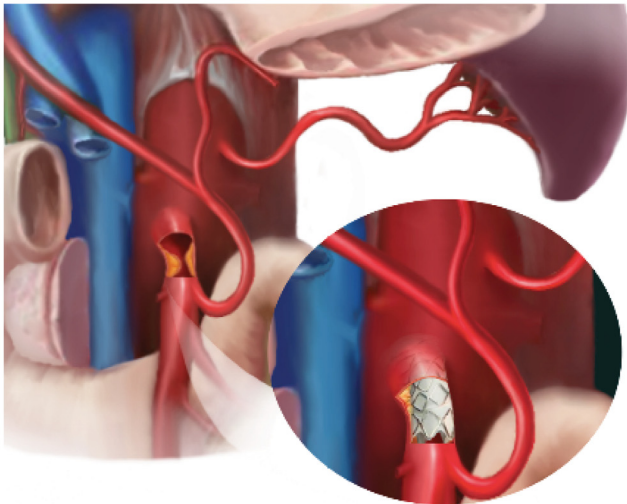


**Fig 1.** Illustrations of common celiacomesenteric trunk (CMT) anatomic variants and related classification.

## Type IV CMT Occlusion



## Type IV CMT Treated



**Fig 2.** Endovascular treatment a patient with an occluded type IV celiacomesenteric trunk (CMT) with a balloon expandable stent. Illustration based on a case described by Ritenour and Mousa.<sup>1</sup>