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**CLINICAL VIGNETTE**

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**Braid-like appearance of the coronary artery in Kawasaki disease: typical computed tomography and angiography findings****Young Jin Kim, Hye-Jeong Lee, Jin Hur, Ji Eun Nam, Kyu Ok Choe, Yangsoo Jang, and Byoung Wook Choi\***

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A 19-year-old man was admitted due to exertional chest pain. He had been diagnosed with Kawasaki disease when he was 4 months old. He underwent coronary angiography, which showed total occlusion of the proximal left anterior descending coronary artery and 85% luminal narrowing of the proximal left circumflex coronary artery. His right coronary artery (RCA) demonstrated a typical 'braid-like appearance' on coronary angiography. The braid-like appearance of the RCA was subsequently excellently visualized in 3D volume rendering images, curved multiplanar reformation images, and axial images of coronary computed tomography and angiography.

In Kawasaki disease, panarteritis occurs in the acute phase and coronary artery aneurysms develop in the subacute phase. In the chronic phase, aneurysms undergo regression or remodelling. Intramural collateral arteries may develop in occluded segments of the coronary arteries, and they appear as 'arteries within the artery' and show a braid-like appearance.

Panel A–B. Coronary angiography (A) and 3D volume rendering image of CT (B) show the braid-like appearance of the right coronary artery.

Panel C–D. Curved multiplanar (C) and axial (D) CT images demonstrate new small collateral arteries braided together within the confines of the original artery. This phenomenon of arteries within an artery is pathologically unique to Kawasaki disease.

