

## **Abstract**

**Introduction:** Posterior mediastinal tumours have varied presentations due to local effects or systemic symptoms according to its constituent cells. Rarely, these mediastinal tumours have an arterial supply from a coronary artery could causing flow reversal and reduced perfusion to the myocardium resulting in ischaemia, which is termed as coronary steal syndrome.

**Case presentation:** We report a case of a 71-year-old female with diabetes mellitus, who presented with new onset progressively worsening angina, which was eventually diagnosed to be due to a posterior mediastinal tumour with an aberrant vasculature arising from the right coronary artery, resulting in coronary steal syndrome and myocardial ischaemia. She underwent thoracic aortography and arterial embolization of the tumour which led to symptom resolution.

**Conclusion:** Coronary steal syndrome is an atypical cause of angina and should be considered in the context of a non-obstructive coronary arteries in angiography.