

Blockage of Large Veins

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Iliofemoral area (*phlegmasia alba et coerulea dolens*), v. cava inferior, axillary subclavicular region, v. cava superior – *Perthes's syndrome (blue mask)*.

Blockage of v. cava inferior

Causes

Ongoing thrombosis from the Iliac region (high risk for pulmonary embolism). Also venous stasis during of right heart failure. continued thrombosis of hepatic veins (Budd-Chiari syndrome). Tumor ingrowth -Grawitz tumor – Grawitz tumor, hepatocellular carcinoma. Complications of catheterization. Post-operative (liver transplantation...).

Clinical Manifestations

Abdominal pain, pain in the hypogastrium, lumbar region, sometimes the pain radiates to the lower limb. Liver venous stasis (hepatomegaly), ascites, swelling of both lower limbs. Renal Insufficiency.

Diagnostics

Cavography.

Treatment

Dilation, eventually establish stent. The surgery is very risky (circulatory arrest is needed in deep hypothermia).

Occlusion of Axillo-Subclavian region

Causes

Mostly as a complication of the insertion of CRC, pacemaker, during TOS or after excessive exertion or sport (tennis...), pulmonary embolism (very rare).

Clinical Manifestations

Swelling, slight cyanosis, filling of superficial veins of upper limb.

Diagnostics

Sonography.

Treatment

Conservative treatment (elevation, cold compresses, antiphlogistics for milder forms). Local fibrinolysis followed by heparinization is optimal. Surgical treatment - thrombectomy.

Superior Vena Cava Syndrome

Causes

Malignant mediastinal tumors (bronchogenic carcinoma, Non-Hodgkin's lymphoma), eventually as a complication of establishing CVC, infectious etiology in the past (mediastinal adenopathy due to tuberculosis, syphilitic aortic aneurysms).

Clinical signs

Neck, face and upper extremities swelling, cyanosis, changes due to cerebral edema (change in behavior and consciousness, nausea, vomiting, mood changes, papillary edema, seizures), often dyspnea.

Diagnostics

Phlebography (search for the cause after managing the acute condition – tumor).

Treatment

- Thrombosis – remove the catheter, fibrinolysis with further anticoagulation therapy.
- Sign of cerebral edema – corticoids, mannitol.
- Tumor –mostly small-cell lung cancer; treatment: radiotherapy, chemotherapy.
- Surgical treatment – *bypass*, establishing of stent.

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- BENEŠ, Jiří. *Otázky z chirurgie* [online]. ©2007. [cit. 28.6.2010]. <jirben2.chytrak.cz/materialy/chira/cevni.doc>.