This study aims to determine the incidence of Horner’s syndrome in patients admitted to intensive care unit that have undergone internal jugular CVC insertion...” Butty et al (2015).

Abstract:

Purpose: Central venous catheterization (CVC) is estimated to be performed in millions of patients per year. Swan-Ganz catheters used for CVC are most often inserted into the internal jugular vein and during this procedure they may come into contact with the sympathetic chain. This study aims to determine the incidence of Horner’s syndrome in patients admitted to intensive care unit that have undergone internal jugular CVC insertion during their admission and to determine whether ultrasonography-assisted insertion has decreased the frequency of this complication.

Patients and methods: A total of 100 prospective patients admitted to the ICU were examined for the presence of anisocoria and ptosis after undergoing recent CVC. Presence of Horner’s syndrome was confirmed by testing with 0.5% apraclonidine and looking for the reversal of anisocoria.

Results

Frequency of Horner’s syndrome after CVC was 2% in a sample of 100 prospectively examined patients.
Conclusion: Horner’s syndrome remains a relatively rare but definitive complication of CVC. ICU physicians should be educated about its existence and prevalence and ophthalmologists should inquire about any history of ICU admission necessitating CVC insertion in any patient presenting with Horner’s syndrome.

Reference: