



#IVTEAM #Intravenous literature: Sahin, M.S. Aktu Rk, S.L., Bulut, M. and Kirma, C. (2014) Percutaneous treatment of superior vena cava syndrome caused by chronic thrombosis. *Türk Kardiyoloji Derneği Arşivi*. 42(1), p.76-9.

Abstract:

Chronic upper extremity deep vein thrombosis (UEDVT) and superior vena cava syndrome (SVCS) are becoming increasingly common due to the use of indwelling catheters and implantable central venous access devices. Hypercoagulable syndromes, malignancy, extrinsic compression, and tumor invasion are other causes. Endovascular management of chronic UEDVT and SVCS is accepted as an important first-line treatment given its high overall success rate and low morbidity as compared with medical and surgical treatments. In this case, we present successful management with stenting of superior vena cava obstruction syndrome as a result of chronic thrombosis. A 48-year-old woman was diagnosed with SVCS one year ago. Despite the use of warfarin therapy, her symptoms (swelling of the face and both upper extremities) progressively increased. It was thus decided to treat the patient with percutaneous angioplasty and stenting. Details of the occlusion were evaluated with computed tomography and venography. The right femoral vein and right jugular vein were used for the intervention. The occlusion was passed with a Miracle 12-g guidewire. After balloon pre-dilatation, two self-expandable stents were implanted. After stent placement, her clinical symptoms improved and she was discharged without complication.

Other intravenous and vascular access resources that may be of interest (External links -

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Guide for intravenous chemotherapy and associated vascular access devices from Macmillan.
An example of peripheral cannulation OSCE from OSCE Skills.

