



We present a 14-year-old adolescent with a history of acute leukemia and central line-related complications, including SVC thrombosis with subsequent formation of downhill esophageal varices” Yeung et al (2014).

Reference:

Yeung, A.K., Guilcher, G.M. and deBruyn, J.C. (2015) Conservative Management of Downhill Esophageal Varices Secondary to Central Line-related Thrombosis After Hematopoietic Stem Cell Transplant. Journal of Pediatric Hematology/Oncology. June 5th. .

Central line-related thrombosis after hematopoietic stem cell transplant [#ivteam](http://ctt.ec/kd56l+@ivteam)

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Abstract:

Occlusive central line-related complications are not infrequent in children undergoing cancer therapy, but are generally not associated with life-threatening complications. Thrombosis of the superior vena cava (SVC) is rarely described in such patients, and downhill esophageal varices have been described in children and adults as a complication of altered SVC blood flow. The management of patients with SVC thrombosis and associated varices is complicated by the need to treat the thrombus weighed against bleeding risk. We present a 14-year-old adolescent with a history of acute leukemia and central line-related complications, including SVC thrombosis with subsequent formation of downhill esophageal varices. Conservative



management consisting of anticoagulation alone resulted in resolution of the varices with no bleeding complications.

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