



Herein, we present a rare case of a 69-year-old woman, with a history of hepatic flexure tumor and an indwelling central venous port, presenting with acute signs and symptoms of SVCS due to thrombosis of the catheter” Lianos et al (2018).

Abstract:

Superior vena cava syndrome (SVCS) represents undoubtedly a rare life-threatening condition. Herein, we present a rare case of a 69-year-old woman, with a history of hepatic flexure tumor and an indwelling central venous port, presenting with acute signs and symptoms of SVCS due to thrombosis of the catheter. The patient was treated with intravenous anticoagulation and fibrinolytic therapy and showed regression of symptoms. It is reported that central venous catheters are routinely used in clinical practice mainly in oncological cases for chemotherapy, parenteral nutrition or dialysis. However, complications related to implantation technique, care, or maintenance of these catheters may arise. High index of suspicion for SVCS should always arise when a patient presents with common symptoms and long-term central catheters, in order to avoid unfavorable outcomes. Local thrombolysis appears to be a safe and effective therapy for port catheter-associated thrombosis.

Reference:

Lianos, G.D., Hasemaki, N., Tzima, E., Vangelis, G., Tselios, A., Mpailis, I. and Lekkas, E. (2018) Superior vena cava syndrome due to central port catheter thrombosis: a real life-threatening condition. *Il Giornale di Chirurgia*. 39(2), p.101-106.

