

# 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-Hodgking'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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## Links

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- Ischemic Heart Disease
- Acute Arterial Occlusion

### Source

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