Migration of a ‘cut’ central venous catheter

Central venous catheters (CVCs) are commonly used for haemodialysis in patients with renal failure. It is rare for the dialysis catheter tip to thrombose, rupture and embolize to the right atrium. Catheter tip thrombus carries a mortality risk of 18% in patients undergoing haemodialysis and >40% in other patients. Different pathogenic mechanisms have been postulated for the development of CVC thrombosis, which include mechanical irritation of the myocardial wall, propagation of the intraluminal clot, hypercoagulopathy and haemodynamics of the right atrium. CVC thrombosis may be asymptomatic or associated with complications such as pulmonary embolism, systemic embolism, infected thrombi or haemodynamic compromise. We did an off-pump retrieval of the embolized indwelling portion of a CVC (Fig. 1) following an inadvertent cut to both the retaining suture and catheter. The catheter had been placed in the right internal jugular vein and after it was cut it made its way into the right atrium by the weight of a large thrombus that had formed on its tip. The surgical removal of the catheter remnant by an off-pump approach was uneventful (Fig. 2).

REFERENCES

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