

中文題目：上肢深部靜脈血栓症合併巨大 Eustachian 瓣疑似併發右心房血栓

英文題目：Upper-Extremities Deep Vein Thrombosis with Giant Eustachian Valve Mimicking a Right Atrial Thrombus

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Background: Although once considered rare, upper-extremity deep vein thrombosis (UEDVT) has become more common in recent years. This is directly related to the increasing use of central venous catheters. Other risk factors for UEDVT include strenuous upper extremity exercise, anatomic abnormalities causing venous compression, venous stasis from heart failure, acquired hypercoagulable states including pregnancy, oral contraceptive use and cancer, and inherited thrombophilia. Up to one third of patients with UEDVT have pulmonary emboli. Transthoracic echocardiography (TTE) is necessary for identifying intra-cardiac involvement of UEDVT.

Case report: A 33-year-old female with heavy smoker and 12 weeks' gestation presented with painful swelling of right upper extremity involved right neck and face. She received 10 days' heparinization for subsidence. Left shoulder swelling involved left axilla and left supraclavicular area with tenderness occurred to her 2 weeks later. She denied history of trauma to these extremities or swelling of low extremities. TTE showed a hyperechoic and highly mobile nodule lay adjacent to postero-superior wall of right atrium mimicking a flail thrombus. Transesophageal echocardiography (TEE) confirmed a giant Eustachian valve. We performed emergent bilateral venography and found bilateral occlusion of subclavian, axillary and distal cephalic veins with poor collateral circulations. Heparinization was given and termination of pregnancy was done. After termination, we overlapped heparin with warfarin for 5 days and subsequent warfarin therapy for 6 months.

Discussion and Conclusion: It is imperative that physicians understand UEDVT risk factors, diagnostic options, treatment alternatives, and prophylaxis regimens. TTE-subcostal view may be an alternative regimen for invasive TEE for clarifying the nature of intra-cardiac thrombus like echo in a case of UEDVT.