

Iatrogenic haemothorax due to contralateral subclavian catheterization

Kontralateral subklavian kateterizasyonu nedeniyle iatrojenik hemotoraks

Mehmet Salih Aydın¹, Emin Can Ata²

¹Harran University Medical Faculty, Department of Cardiovascular Surgery, Sanliurfa/Turkey

²Bagcilar Training and Research Hospital, Department of Cardiovascular Surgery, Istanbul/Turkey

Corresponding author: Mehmet Salih Aydın, Harran University Medical Faculty, Department of Cardiovascular Surgery, Morfoloji Binasi, Yenisehir Kampusu, TR-63300, Sanliurfa, Turkey, Tel: +90(414) 318 3028 Fax: +90(414) 313 91 32, E-mail: salihaydn@mynet.com

Subclavian vein catheterization offers a quick and safe method that is performed for acute or short term hemodialysis. The technique has been associated with very many complications (1). A 44-year-old female patient suffering from chronic renal failure was admitted for urgent haemodialysis catheter access due to haemodialysis graft infection. After left subclavian vein catheterization, haemodialysis was initiated. Immediately after the haemodialysis onset, the patient felt chest pain and shortness of breath, and for this reason haemodialysis was discontinued. Chest X-ray was revealed large right pleural effusion and abnormal position of catheter tip. Contrast media was given through left subclavian catheter to make sure regarding the catheter tip perforated into right thorax. Upon chest X-ray was taken after contrast injection, we found contrast image in the right thorax. After withdrawing the left subclavian vein catheter, we inserted chest tube through right thorax and approximately 2200 cc blood was drained. Contralateral haemothorax was revealed and the patient was haemodynamically stabilized.

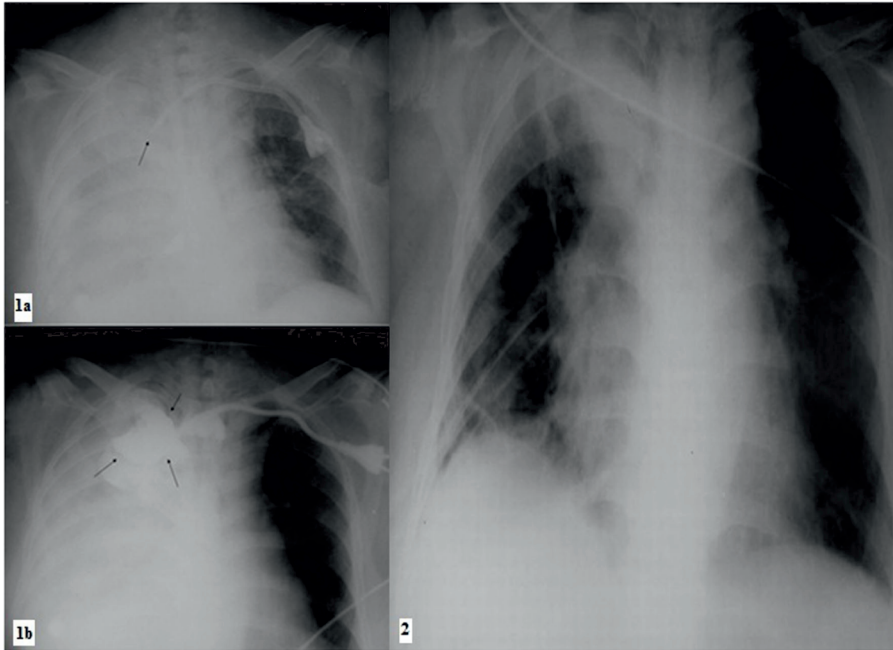


Figure 1: Chest X-ray pleural effusion and abnormal position of catheter (1a), contrast image in the right thorax (1b)

Figure 2: Chest tube through right thorax and approximately 2200cc blood was drained
This study was presented in 7th International Congress of Update in Cardiology and Cardiovascular Surgery, 25 March 2011/Antalya

Yazarlarla ilgili bildirilmesi gereken konular (Conflict of interest statement) : Yok (None)

Reference

1. Kozeny GA, Bansal VK, Vertuno LL, Hano JE. Contralateral hemothorax secondary to chronic subclavian dialysis catheter. Am J Nephrol. 1984; 4(5):312-4.