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A Rare Late Complication of Port Catheter Implantation: Embolization of the Catheter

Nadir Görülen Bir Port Kateter Geç Komplikasyonu: Kateter Embolizasyonu

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Ezgi Uysalol
To the Editor,

Children with cancer need long-term venous access due to the long duration of therapy. Long-term totally implantable port devices (TIPDs) are widely used in these patients for administration of chemotherapeutic agents, parenteral nutrition, fluids, and blood products [1,2]. Fracture and embolism of TIPDs are rare complications but may cause serious results and mortality, including pulmonary artery embolism, sepsis, arrhythmias, and perforation of the caval vein [3,4,5]. Herein, we present a 9-year-old male patient with pre-B acute lymphoblastic leukemia who was admitted to the outpatient pediatric hematology and oncology clinic at the 13th month of maintenance therapy due to new onset of non-flushing catheter. The patient had no other complaints. On posterior anterior chest X-ray, the catheter was found to be disconnected from its reservoir (Figure 1). Echocardiography and thorax computed tomography angiography of the patient revealed the embolization of the catheter to the left pulmonary artery (Figure 2). The embolized catheter was removed using an interventional endovascular procedure under general anesthesia through the femoral vein by an interventional cardiologist (Figure 3). Our case report highlights a rarely encountered complication of TIPDs, which may be undiagnosed due to its rarity and lack of symptoms in some patients, leading to serious complications.

Keywords: Acute lymphoblastic leukemia, Catheter, Complication

Anahtar Sözcükler: Akut lenfoblastik lösemi, Kateter, Komplikasyon

References

Figure 1. Chest X-ray showing disconnection of the catheter from its reservoir.
Figure 2. Thorax computed tomography angiography of the patient showing the embolization of the catheter to the left pulmonary artery.

Figure 3. Removal of the catheter with an interventional endovascular procedure.