

Central Venous Catheter Fracture

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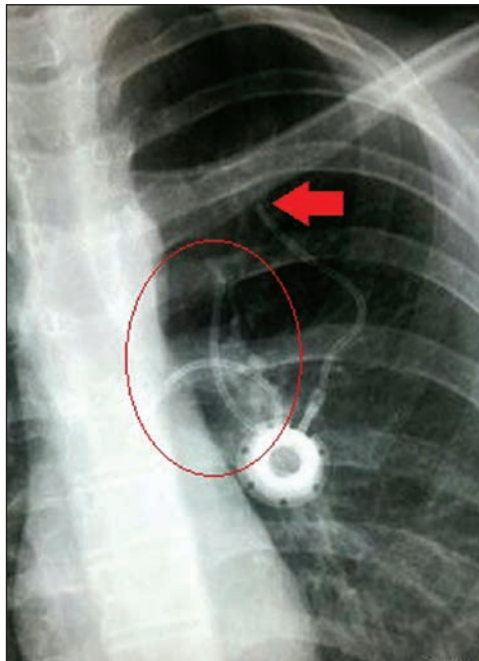
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An 18-year-old woman presented with a 1-day history of edema and erythema associated with a port central venous access device of the anterior left chest wall. The patient reported difficulty with catheter flushing for 2 days. Medical history included severe gastroparesis requiring placement of the catheter 2 months earlier for routine intravenous hydration. Single-view plain-film radiograph of the chest (pictured) suggested a fractured catheter (arrow) with embolization to the left pulmonary artery (circle). The patient received a diagnosis of pinch-off syndrome (POS), or shearing forces between the clavicle and first rib. An endovascular retrieval of the catheter fragment was performed, and the patient recovered with no complications.



Central venous catheter fracture with embolization is a rare but potentially serious complication.^{1,2} Proximal fracture is most common and may be associated with POS.³ Current management for POS includes more lateral replacement of the catheter in the subclavian vein or into the internal jugular vein.⁴ With the increasing use of long-term catheters, physicians should monitor for these complications. (doi:10.7556/jaoa.2014.133)

References

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