

TRAUMA CASE OF THE WEEK

Case Four

A 47 year old man presents to the ED with a swollen right arm of 1 days duration. He woke the day before with discomfort in the arm, which was noted to be swollen and discoloured, but all sensori- motor function is intact, and he has pulses present. The only significant feature in history is that he has just commenced a new job, delivering newspapers from his car in the early morning.

- What do you think is going on?
- What is the link to his new job?
- What treatment is required?



This is an axillary vein thrombosis. Because of proximal occlusion of venous drainage, the limb becomes suffused with blood and is swollen, oedematous, and 'blue'. There may be prominence of the superficial veins over the chest on the affected side, as these veins 'take up the load' of draining the limb. The risk factors for this (essentially a DVT of the upper limb) are the same as for lower limb DVT, with added risk from new vigorous muscular activity...such as throwing newspapers! This particular cause of axillary thrombosis has the title 'Paget Schroetter syndrome', and probably relates to pressure on the draining vein by aberrant ligaments in the base of the neck. Another subset is linked to use of long term central venous lines, which you might see on the State Trauma Unit. It was felt for some time that axillary vein thrombosis was of much lower risk than lower limb DVT... but it is now recognized that there is significant risk of Pulmonary Embolism, and long-term problems from limb swelling and discomfort. They are now treated more aggressively including consideration of thrombectomy and thrombolysis, as well as standard treatment anticoagulants.