



## Pulmonary Thromboembolism after Varicose Vein Surgery

Kim KW\*

Department of Thoracic and Cardiovascular Surgery, CHA Bundang Medical Center, South Korea

### Clinical Image

The patient, a 43-year-old male, presented with a severely dilated and thrombosed varicose vein with bilateral leg pain. A CT scan of the lower extremity showed marked dilatation with multifocal thrombi of both Greater Saphenous Veins (GSV) without evidence of deep vein thrombosis. Extensive resection of both GSV and division of both saphenofemoral junctions with high ligation was performed (Figure 1). The patient's condition was stable after surgery. However, a significantly elevated D-dimer (11208 ng/mL) was detected on postoperative routine blood testing. Although rare, venous thromboembolism after varicose vein surgery can be serious, therefore, early detection is important [1]. Pulmonary Thromboembolism (PTE) was confirmed by an additional chest CT scan (Figure 2A) and systemic anticoagulation with intravenous heparin was administered. After an uneventful recovery, he was discharged with oral anticoagulation on postoperative day 6, and complete resolution of the PTE was observed on the follow-up CT (Figure 2B).



Figure 1: Pathological specimens. Greater saphenous veins after extensive resection of varicose veins.

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#### \*Correspondence:

Kwan Wook Kim, Department of Thoracic and Cardiovascular Surgery, CHA Bundang Medical Center, 59, Yatap-ro, Bundang-gu, Seongnam-si, Gyeonggi-do, 13496, South Korea, Tel: +82-31-780-6120; Fax: +82-31-780-5857;

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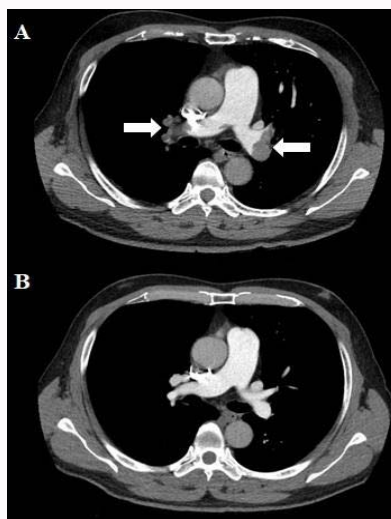


Figure 2: A) Immediate postoperative chest CT - Bilateral pulmonary thromboembolism (arrows); B) Postoperative six-month follow-up chest CT - Unremarkable pulmonary arteries without evidence of thrombus.

### References

1. Hagmüller GW. [Complications in surgery of varicose veins]. *Langenbecks Arch Chir Suppl Kongressbd.* 1992;470-4.