Dual (Mixed and Bland) Thrombus in Inferior Vena Cava: A Rare Presentation of Hepatocellular Carcinoma

Anil Arora, Pankaj Tyagi, Praveen Sharma, Naresh Bansal, Vikas Singla, Vinit Shah, Rinkesh Kumar Bansal, Vijendra Kirnake, Kishan S Rawat, Ashish Kumar

ABSTRACT

Budd-Chiari syndrome (BCS) is defined as hepatic venous outflow obstruction at any level from the small hepatic veins to the junction of the inferior vena cava (IVC) and the right atrium. Hepatocellular carcinoma (HCC) is the complication of chronic liver disease and it usually presents as decompensation of the known chronic liver disease. HCC rarely present as BCS. Here, we present a rare case of HCC presenting first time with BCS with involvement of hepatic veins and dual thrombus in the IVC.

Keywords: Liver cancer, Inferior vena cava thrombosis, Budd-Chiari syndrome, Tumor thrombus, Hepatocellular carcinoma.

How to cite this article: Arora A, Tyagi P, Sharma P, Bansal N, Singla V, Shah V, Bansal RK, Kirnake V, Rawat KS, Kumar A. Dual (Mixed and Bland) Thrombus in Inferior Vena Cava: A Rare Presentation of Hepatocellular Carcinoma. Euroasian J Hepato-Gastroenterol 2013;3(1):81-82.

Source of support: Nil
Conflict of interest: None

INTRODUCTION

Budd-Chiari syndrome (BCS) was first described in 1845 with triad of abdominal pain, ascites and hepatomegaly by George Budd and is defined as hepatic venous outflow obstruction at any level from the small hepatic veins to the junction of the inferior vena cava (IVC) and the right atrium. Hepatocellular carcinoma (HCC) is the complication of chronic liver disease and it usually presents as decompensation of the known chronic liver disease. HCC rarely present as BCS. Here, we present a rare case of HCC presenting first time with BCS with involvement of hepatic veins and dual thrombus in the IVC.

CASE REPORT

A 62-year-old male a known case of diabetes mellitus type II presented with history of abdominal pain, ascites and hepatomegaly by George Budd and is defined as hepatic venous outflow obstruction at any level from the small hepatic veins to the junction of the inferior vena cava (IVC) and the right atrium. Hepatocellular carcinoma (HCC) is the complication of chronic liver disease and it usually presents as decompensation of the known chronic liver disease. HCC rarely present as BCS. Here, we present a rare case of HCC presenting first time with BCS with involvement of hepatic veins and dual thrombus in the IVC.

Discussion

HCC is fifth common cancer in the world. Common organs of metastasis in HCC are lung, brain, adrenal glands. Though microinvasion in hepatic veins are common in large HCC but BCS is found in less than 1% of all HCC patients. There are diverse manifestations of the HCC with invasion to the main vessels starting from asymptomatic to abdominal pain, anorexia, leg swelling, dyspnea and syncope. HCC usually presents as a decompensation in a known case of cirrhosis; however, HCC can also be the first presentation without previous history of chronic liver disease. HCC presenting...
with extensive disease with metastasis to distant organ does not merit curative treatment and such patients should be offered palliative treatment.

Our patient presented with many interesting findings that include: First time presentation with HCC, extensive involvement of IVC at first presentation, and IVC with the involvement of dual thrombus, tumor and bland thrombus, in the supra- and intrahepatic IVC.

REFERENCES


ABOUT THE AUTHORS

Anil Arora
Chairperson, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Pankaj Tyagi
Consultant, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Praveen Sharma
Consultant, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Naresh Bansal
Consultant, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Vikas Singla
Consultant, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Vinit Shah
Senior Resident, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Rinkesh Kumar Bansal
Senior Resident, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Vijendra Kirnake
Senior Resident, Department of Gastroenterology and Hepatology
Sir Ganga Ram Hospital, New Delhi, India

Kishan S Rawat
Consultant, Department of CT Scan and MRI, Sir Ganga Ram Hospital
New Delhi, India

Ashish Kumar (Corresponding Author)
Consultant, Department of Gastroenterology and Hepatology, Sir Ganga Ram Hospital, New Delhi, India, e-mail: ashishk10@yahoo.com