



Technique of cavoatrial tumor thrombectomy without cardiopulmonary by-pass

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ABSTRACT

Introduction: Open surgery for tumor thrombi in atria is very challenging and are associated with significant morbidity and mortality rates. Here, we explore safety of foleys catheter assisted-technique, obviating the need for open surgery.

Material and Methods: We performed Radical nephrectomy via the midline incision for renal cell carcinoma with tumor thrombus extending into the right atrium. CTVS team was kept in standby all the time. Intra-operative ECHO was used for monitoring any migration of thrombi into pulmonary. Vessels.

Results: Mean duration of surgery was roughly 4 hours. The time of total IVC occlusion was 2 minutes. The total blood loss was 2350 ml. Intraoperative ECHO showed complete removal of tumor thrombi.

Conclusions: This procedure can be performed in high risk patients with solitary large tumor thrombi.

CONFLICT OF INTEREST

None declared.

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