Unusual Case of May-Thurner Syndrome and Varicose Veins

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Clinical Image

May-Thurner syndrome is a rare condition resulting from the compression of the left common iliac vein between the right common iliac artery and the spine potentially leading to venous outflow obstruction [1]. This images illustrates the case of a 66-year-old woman with two months history of left leg varicose veins (Figure1) and a previous history of hypertension. At physical examination sensitivity of the right lower quadrant of the abdomen was found and a pulsatile mass could be palpated.

Duplex ultrasound revealed a left common femoral vein (CFV) with continuous flow, suggesting proximal obstruction, and was less compressible than the controlateral one. She also had severe reflux in the left CFV and the great saphenous vein, measuring 9.5 mm at the saphenous-femoral junction, with no signs of deep veins thrombosis.

The Inferior vena cava sonogram revealed extrinsic compression of the Left common iliac vein by the right common iliac artery aneurysm, which was confirmed by performing an angiography (Figure 2).

Figure 1: Pre-operative view showing the varicose veins

Figure 2: Angiography demonstrating the compression of the left common iliac vein
Computed tomography demonstrated a 4.3 cm aneurysm of the right common iliac artery (Figure 3).

Open surgery was performed through a Medline incision and the aneurysm sac was opened then an end-to-end anastomosis was performed (Figure 4). The post-operative course was uncomplicated, and the patient was discharged from hospital on day 8 after surgery. At one month follow-up we noticed a manifest regression of the leg varicosity.

Reference