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Spectrum of Congenital Anomalies of the Inferior ;

Vena Cava and their Clinical Manifestation

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Aim. An analysis of the features of clinical symptoms hypoplasia and aplasia of the inferior vena cava (IVC) in the acute and long-term periods of the disease was the purpose of the research.

Methods. Analyzed survey contains findings obtained by following an examination and dynamic observation (from 2003 to 2012) of twenty one 15-to-55-year-old male patients (average age 25.9±2.6 years) with congenital abnormalities of the IVC. The diagnosis was verified in 19 patients by means of the spiral i non-enhanced and contrast-enhanced computed tomography with using of axial sections and their three-dimensional reconstructions. Two patients had the MRI-phlebography data.

Results. In 16 patients the disease first manifested as peripheral thrombosis; fever, chill and subsequent edema of both ; legs first appeared in 5 patients. The unilateral iliofemoral thrombosis appeared in 9 patients (right - 6, left - 3) and bilateral in 4. In 1,5-12 months after the acute period of disease the signs of the IVC syndrome had appeared in every patient. Extensive collateral flow was observed in all our patients. The azygos and hemiazygos, ascending lumbar veins and left gonadal vein were the most dilated.

Conclusions. Conclusion. Congenital anomalies of the IVC first appear clinically as deep vein thrombosis (usually by the right iliofemoral thrombosis). An anomaly of this vessel should be suspected if thrombosis involves the right iliac veins in 30-year- old patients or younger. For the diagnosis these anomalies need to perform SCT- or MRI-phlebography.