

About a clinical case of secondary groin lymphocele to ECMO

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Summary

The Authors describe the clinical case of O.S., aged 45, who came to their observation for the appearance of lymphocele in left groin region after ECMO procedure. The patient, suffering from idiopathic pulmonary fibrosis with very serious impairment of lung function, waiting to receive bilateral lung transplantation, underwent the extracorporeal membrane oxygenation procedure to the worsening of his clinical condition and the appearance of an ingravescent breathlessness, which put his life in serious danger. After undergoing a lung transplant the postoperative course took place regularly with the patient's discharge and resumption of her normal daily activities after an adequate period of convalescence. In April 2018, about two months after the surgery, a clinical check highlights the presence of a lymphocele of the approximate size of 8 x 5 cm in the left groin region. The common femoral vein is unscathed by endoluminal thrombosis with negative CUS, but the caliber is reduced likely by compression of the lymph accumulated in the subcutaneous tissue of the inguinocrural region. It is decided not to intervene surgically in the removal of the lymphocele, but to treat it more conservatively with multiple evacuative punctures of the lymph, followed by endocavitary injection of lauromacrogol 400 to 3% and then compressive bandage left inguinocrural region. After 3 sessions of endocavitary sclerosis 15 days apart, the lymphocele gradually decreased in volume until its total disappearance after 3 months of treatment. In conclusion in our experience, as in that similar of other Authors, the non-aggressive treatment of the post ECMO groin lymphocele, using in consecutive sessions the endocavite injection of lauromacrogol 400 to 3% after insuction of the lymph and subsequent local compression of the inguinocrural region, proved to be an effective and safe method in achieving the patient's healing without resorting to surgical treatment of the lymphocele itself.

Key word: extracorporeal membrane oxygenation, lymphocele, sclerotherapy.