



## Image of the month

# Iatrogenic chylous fistula after total thyroidectomy for papillary thyroid cancer



## Fístula quilosa iatrogénica tras tiroidectomía total por cáncer papilar de tiroides

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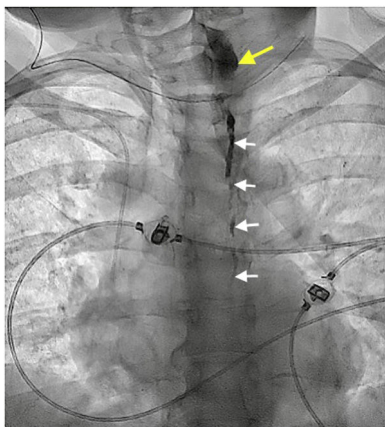


Fig. 1

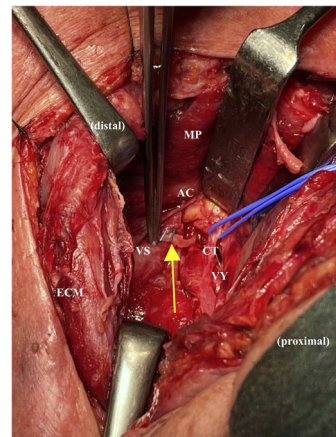


Fig. 2

The patient is a 53-year-old woman treated with total thyroidectomy and central and left dissection due to papillary thyroid carcinoma with level IV lymphadenopathy. On the 2nd postoperative day, she presented 500 mL of lymph discharge through the drain tube. After 2 weeks with parenteral nutrition and somatostatin yet no improvement, lymphography was indicated (Fig. 1), where the contrast rose (white arrows) from the inguinal nodes, towards a cervical collection (yellow arrow), without locating the leak point. Surgery was decided upon, during which we observed (Fig. 2), after medializing the prethyroid muscles (PM) and the carotid artery (CA), the leak orifice in the thoracic duct (TD) between the left jugular vein (JV) and subclavian vein (SV), which was closed with clips (arrow). The patient progressed satisfactorily and was discharged ten days later.

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