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Image of the month

Surgical management of adrenal carcinoma with inferior vena cava tumor thrombus☆

Manejo quirúrgico de carcinoma suprarrenal con trombo tumoral en vena cava inferior

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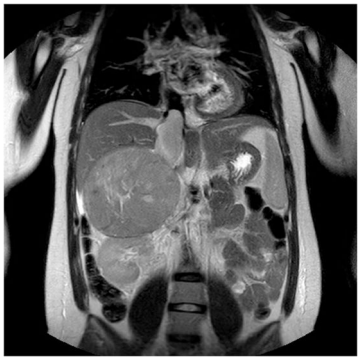

Fig. 1

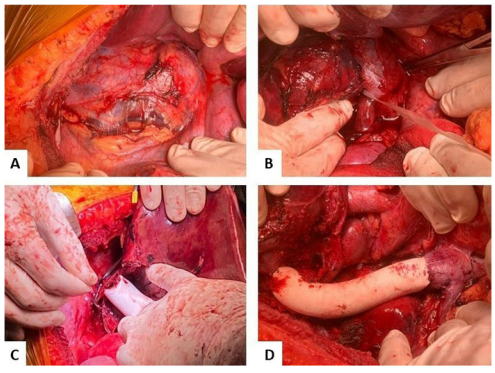

Fig. 2

A 27-year-old female patient presented with Cushing's Syndrome, cortisol in blood 28 mg/dL, ACTH < 2 pg/mL and cortisol in urine 2565 μg/24 h.

MRI showed a right adrenal mass measuring 14 cm and a tumor thrombosis in the IVC measuring 9 cm (Fig. 1).

Intraoperatively, a large hypervascularized mass was observed, and *en bloc* resection was performed (Fig. 2A,B). Clamping of the suprahepatic IVC led to rupture of the IVC and right suprahepatic vein (RSV), requiring IVC resection, reconstruction of the RSV by means of patch angioplasty of the resected IVC, and anastomosis of the IVC to the prosthesis (Fig. 2C,D). The patient was discharged on the 9th postoperative day.

Diagnosis: adrenal carcinoma with inferior vena cava tumor thrombus

Conflicts of interest

None of the authors declare conflicts of interest.

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