

# **EMBOLIZATION OF UNUSUAL CHYLOTHORAX**

Pradeep Goyal, MD, Ahmad Alomari, MD  
Boston Children's Hospital

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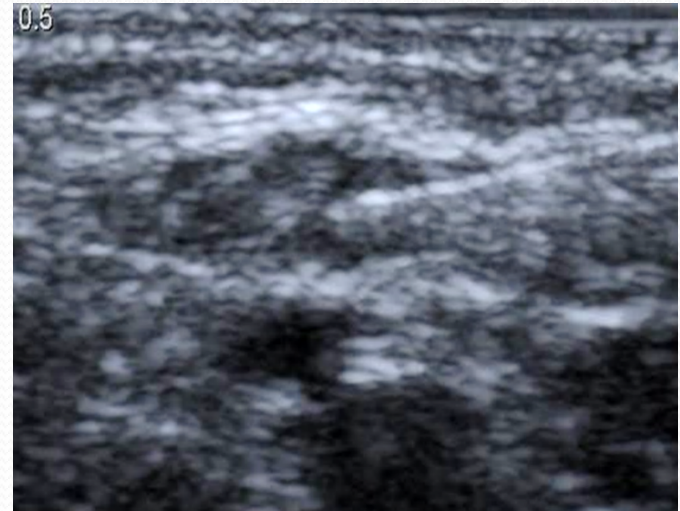
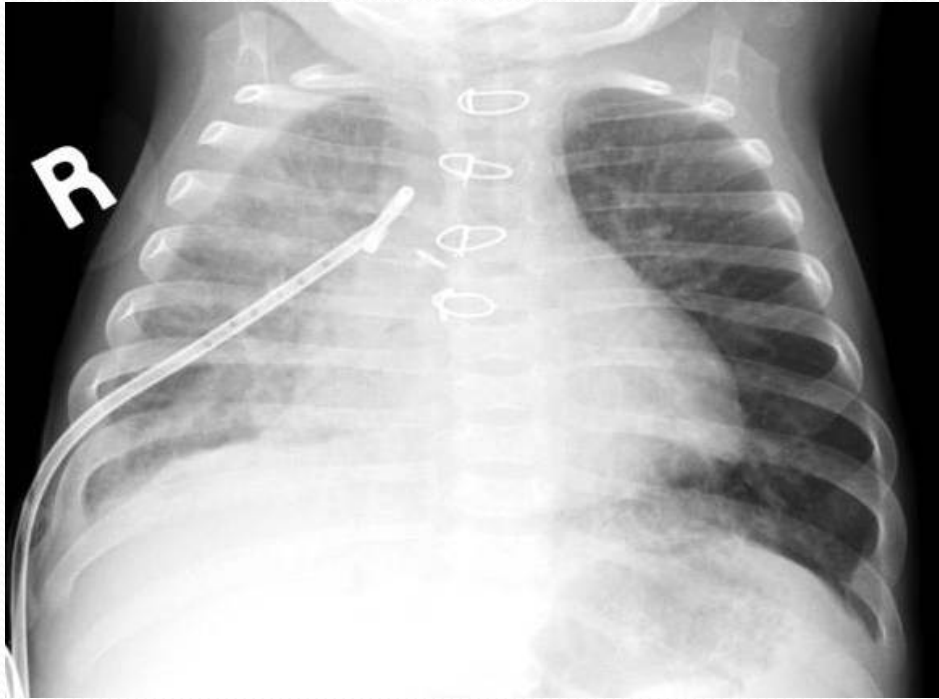
# HISTORY

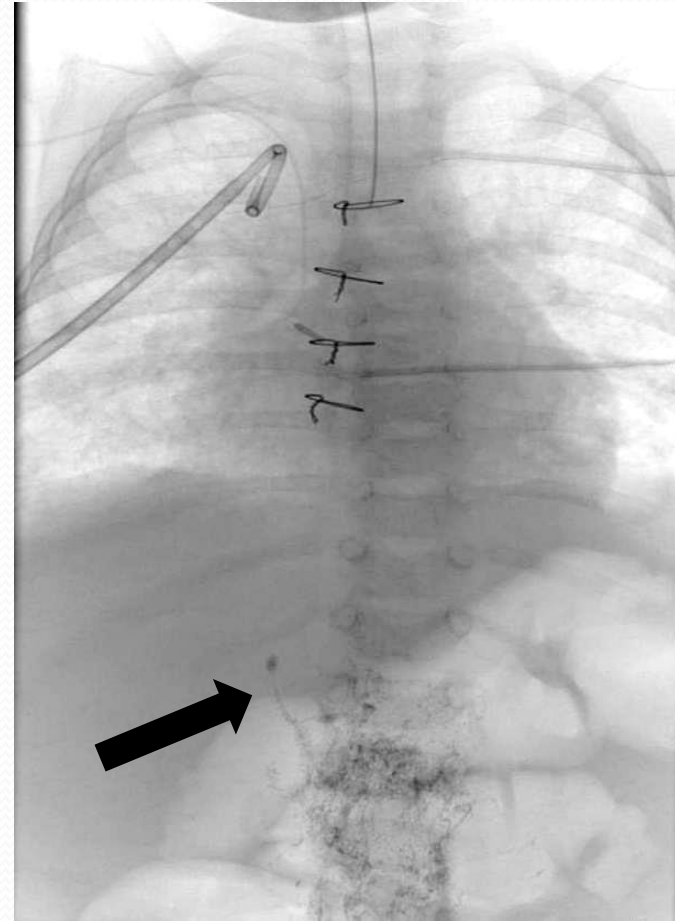
- 5 month old girl with pulmonary stenosis, multiple ASDs, VSD, dysplastic aortic valve, left coronary ostial stenosis.
- S/P patch plasty of aortic and pulmonary valve sinuses and left main coronary artery ostium, pulmonary valvotomy, and fenestrated atrial septal defect closure on 9/6/13
- Complicated by right pleural effusion (9/24)
- Medical management and drainage failed

# Dynamic Intranodal Lymphangiography

## FINDINGS:

- Slow progress of the contrast
- Increase number of channels
- Excessive non-central channels
- Reflux
- Upper abdominal vertical lymphatic trunk measuring 2.5 mm x 3.5 cm
- Extends into the medial aspect of the diaphragm and terminates in multiple phrenic lymphatic channels
- Likely the etiology of the right pleural chylous leak.

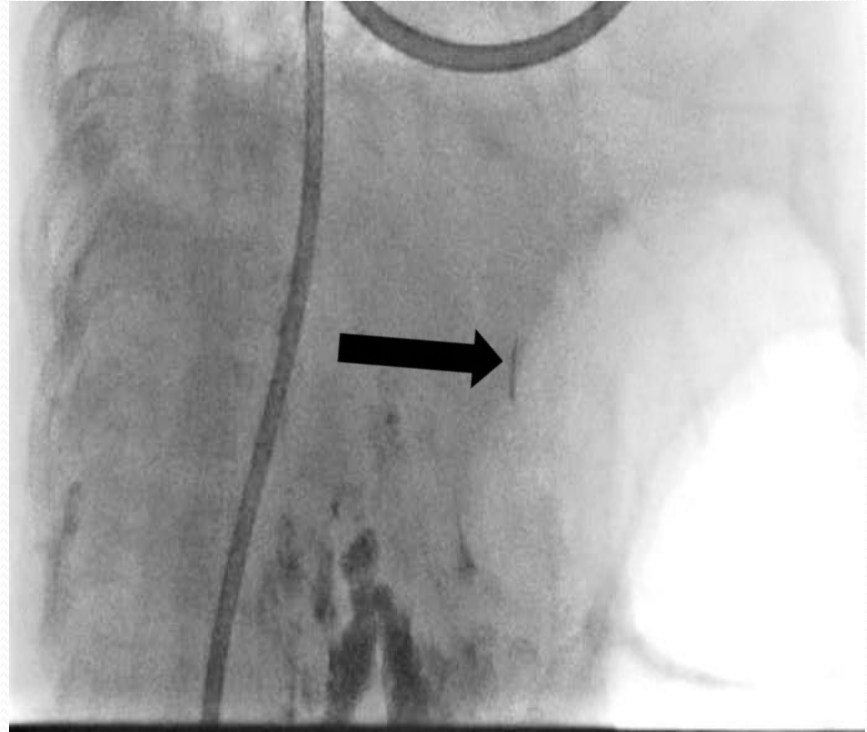


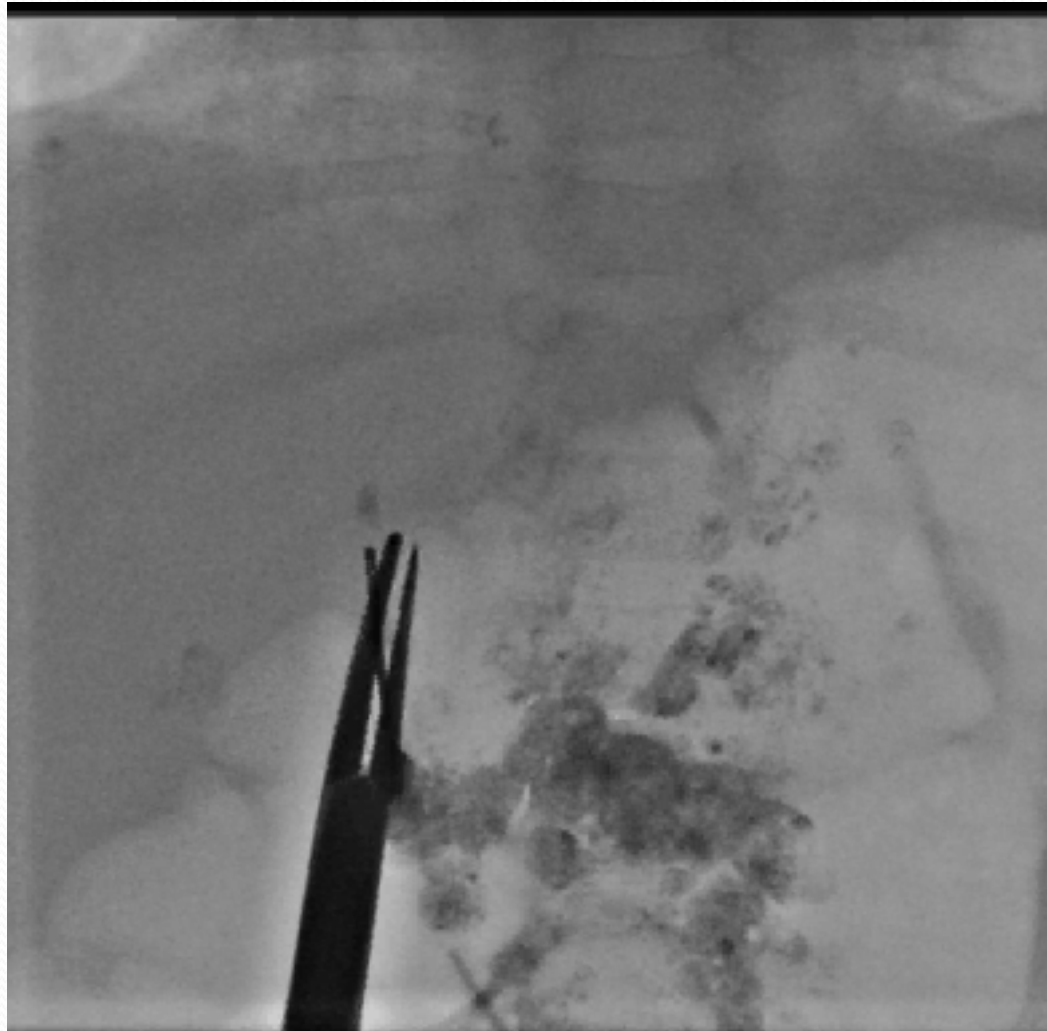






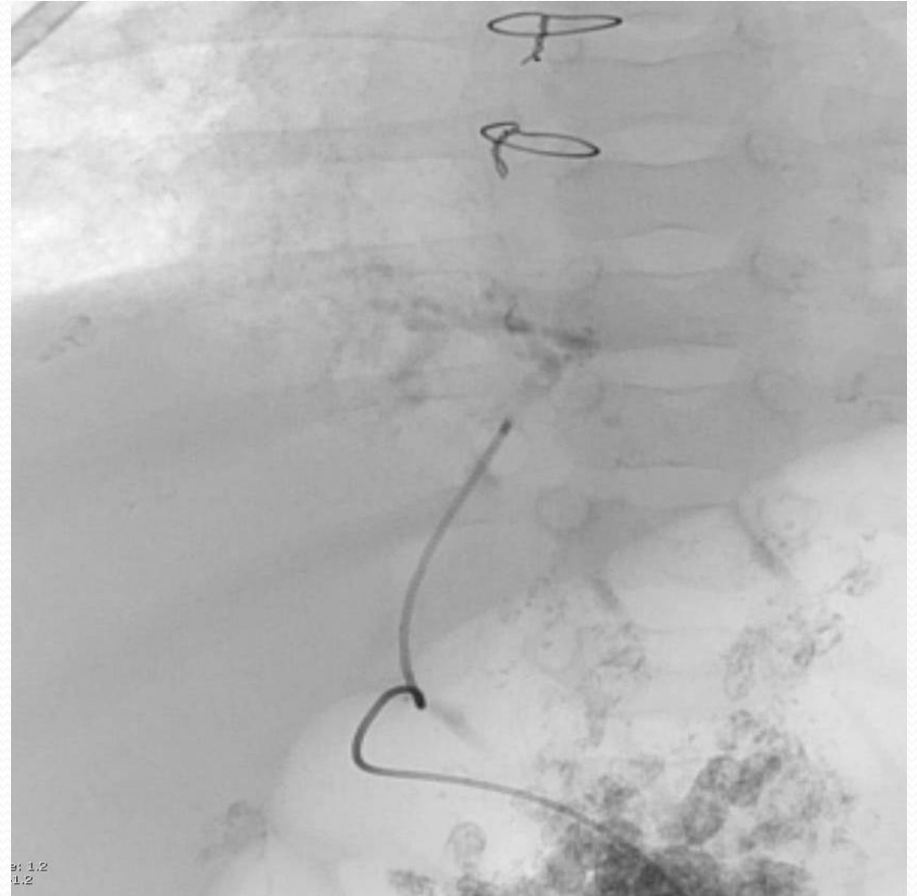
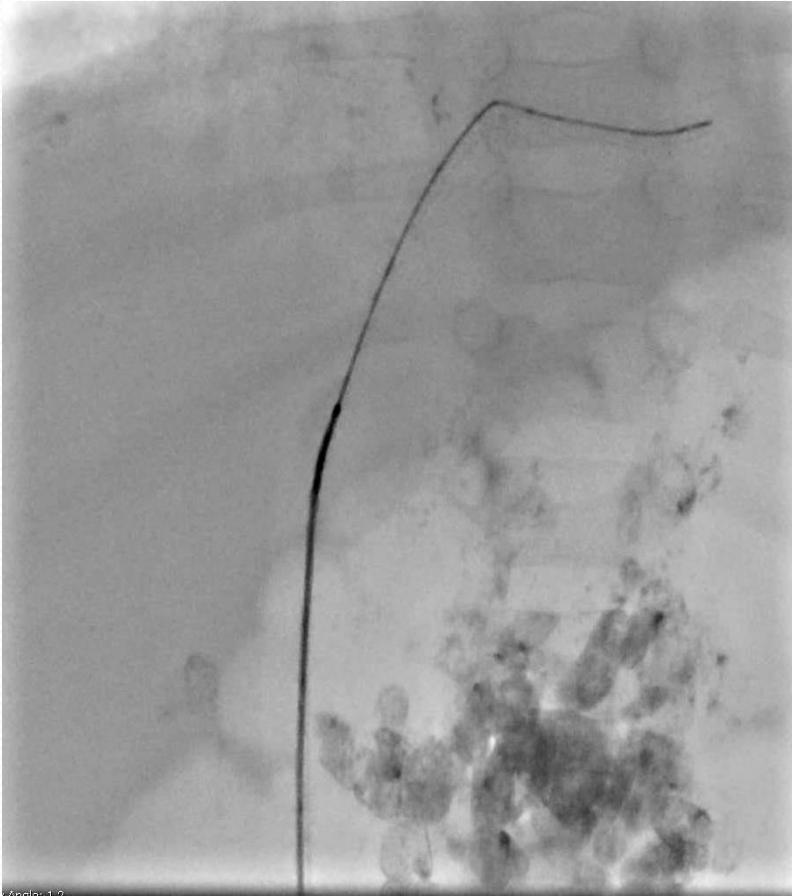
Anteroposterior (AP) radiograph of a lumbar vertebra. A black arrow points to a fracture line in the vertebral body. The fracture is a compression fracture, characterized by a wedge-shaped deformity of the vertebral body. The fracture line is visible as a dark, irregular line across the anterior portion of the vertebral body.



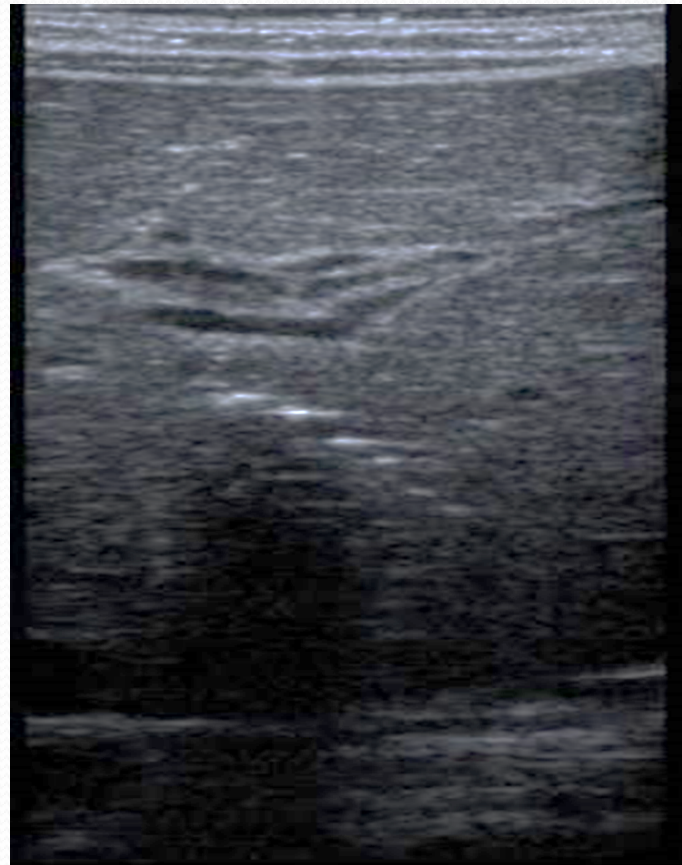








3: 1.2  
1.2





# Drain output

Date	Drain output (ml)
10/20	160
10/21	220
10/22	298
10/23	182
10/24	110
10/25	230
10/26	92
10/27	180
10/28	50
10/29	35
10/30	13

# Take home message

- Unusual leak can happen from other collateral pathway.

