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ACUTE SUBCLAVIAN ARTERY OCCLUSION WITH ASSOCIATED CLAVICLE FRACTURE MANAGED WITH BYPASS GRAFT ALONE

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Subclavian artery injury is a rare consequence of clavicle fracture. It most often results from penetrating trauma but can result from blunt trauma with adjacent bone fragments causing rupture, pseudoaneurysm, dissection or thrombosis of the artery. If flow through the subclavian artery is compromised there is a risk of ipsilateral upper limb ischaemia. Life threatening haemorrhage may result in cases of laceration, and cerebral haemorrhage may be caused by dissection. Vascular injury in association with clavicle fracture is typically regarded as an indication for internal fixation of the fracture. We present a case of subclavian artery thrombosis in associated with a comminuted mid-shaft

clavicle fracture causing limb ischemia managed by carotid to brachial artery bypass without internal fracture fixation. The fracture united at six weeks and there was no sustained vascular or neurological impairment at follow-up. We advocate urgent vascular intervention in subclavian artery injury. There is little discussion in the literature regarding non-operative management of clavicle fractures with subclavian artery injury. We suggest that select clavicle fractures with subclavian artery injury can be safely managed non-operatively.

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