

Reconstruction followed by extended resection for a thymoma invading the superior vena cava

Objective: To investigate the surgical treatment of thymoma invading the superior vena cava.

Case Video Summary: Median sternotomy was performed to access the chest cavity, separate the tissue around the tumor, open the pericardium and fully expose the right atrium. The left innominate vein was separated and divided away from the tumor. Its proximal end was ligated, and the distal end was clamped with atrial appendage forceps. During the operation, heparin was given for anticoagulation (1 mg/kg), and the artificial blood vessel (with a diameter based on the diameter of the left innominate vein) was anastomosed to the distal end of the left innominate vein. The right atrial appendage was clamped by the atrial appendage forceps, and part of the right atrial appendage was removed. The orifice of the atrial appendage was anastomosed to the other end of the artificial blood vessel. The superior vena cava was separated and divided above the right atrium, and the right innominate vein was separated and divided above the tumor. The arch of the azygos vein was separated and divided. The specimen was separated and completely removed.

Conclusions: Extended resection of thymoma combined with artificial bypass between innominate vein and right atrial appendage can be used to treat patients with thymoma invading the superior vena cava.

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