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Registration number: 383

Title of the presentation:

Effectiveness Of Lymphangiography And Lymphatic Interventions In Lymphatic Leaks.

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Introduction/ Review of Literature:

- Lymphatic leaks are a challenging medical condition that can lead to significant morbidity.
- Understanding the efficacy of lymphangiography and lymphatic interventions in their management is of paramount importance.
- This poster provides an overview of the study's objectives, methods, and major outcomes, offering a glimpse into the promising advances in the field of lymphatic medicine.

Aims/ Objectives:

- Evaluation of the outcome of lymphangiography and lymphatic interventions in patients with lymphatic leak & role in management of such patients.
- To evaluate clinical success in patients with lymphatic leaks by performing intranodal lymphangiography +/- other related interventional procedures.

Methodology:

- 44 patients underwent lymphangiography for suspected chyle leak during the span of last 10 year (January 2014 to December 2023). Male :Female::28:16(mean Age 50.6 years).
- Lymphangiography was combined with various other interventions such as intranodal glue, retrograde thoracic duct cannulation, sclerotherapy etc. Surgical management was performed in 39 patients. Non-surgical management was done in 5.
- Retrospectively results were analyzed to evaluate the outcomes in terms of efficacy and clinical success in resolution/decrease in the chyle leak output.

Results:

- Intranodal lymphangiography was performed in patients (44 in no.) to begin with.
- Leak was noted in 18 out of 44 patients.
- Embolization procedures were clinically successful in 15 out of 18 patients who had technically successful TDE.
- 77.3% patients had resolution/improvement in chylous output (clinically successful).
- There was no procedure related mortality or any major complications

COMPARISON

Articles	No of patients	Clinical success
Itkin et al (2012)- Uni. Of Pennsylvania	109	71%(77/109)
Pamarthi et al(2014)- Harvard- Boston	120	79%(95/120)
TMH	44	77% (34/44)

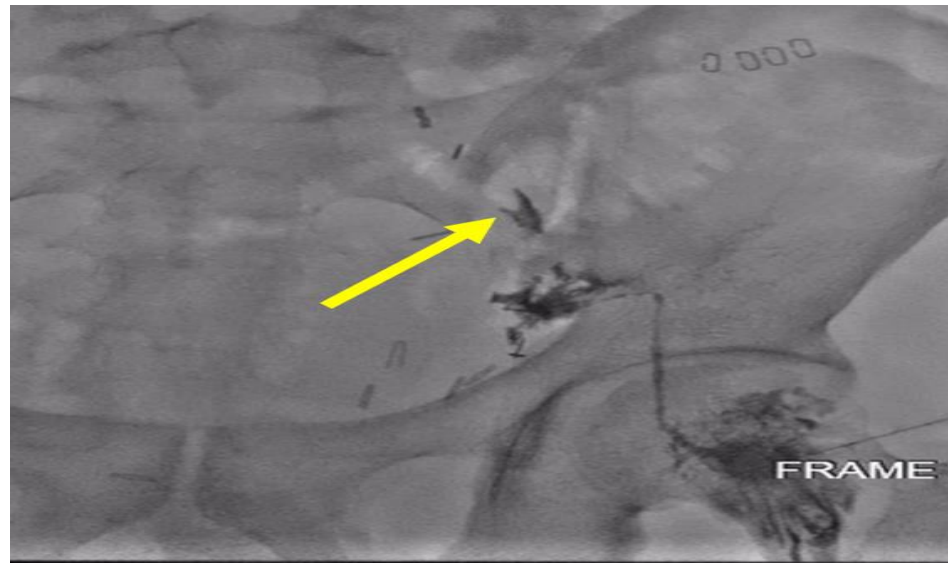
Representative images:

Case- chylous ascites

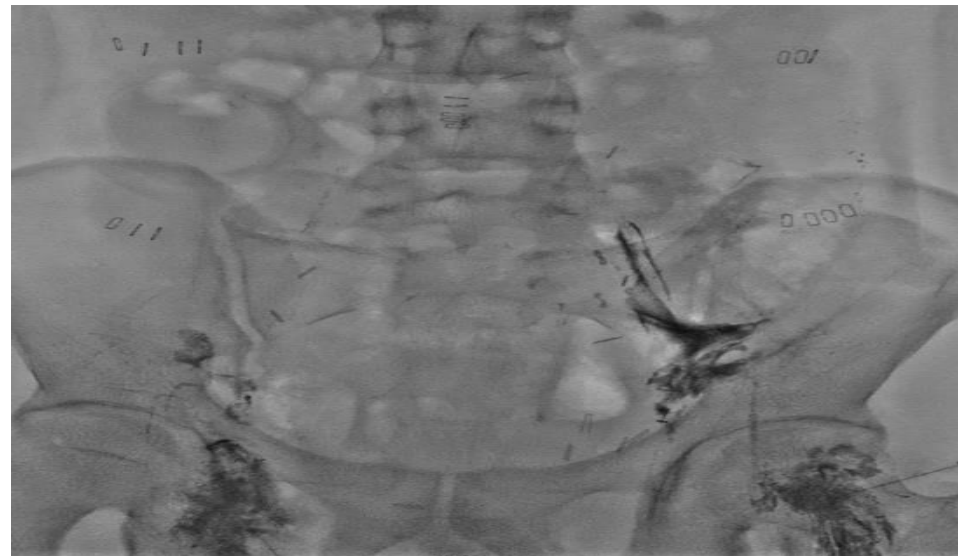
- 35 Years old male k/c/o ca colon ,
- Surgery – Total colectomy + hepatic metastatectomy.
- On POD 3, chylous ascitic fluid started draining through the previously placed drain.



Intranodal lymphangiography with injection of Lipiodol from bilateral inguinal lymph node



Leak of lipiodol in left iliac fossa



Embolized using 10% NBCA through left iliac lymphnode. Significantly decreased chylous fluid post-embolization and stopped after 5 days.

Conclusion:

- Lymphangiography and Lymphatic interventions are minimally invasive, safe and viable technique in patients who are poor surgical candidates or whose leaks are not responding to conservative measures.

References:

- Weiss CR, Liddell RP. Bringing Lymphangiography into the 21st Century. *Radiology*. 2020;294(1):230-231. doi:10.1148/radiol.2019192368
- Kim PH, Tsauo J, Shin JH. Lymphangiography with or without Embolization for the Treatment of Postoperative Chylous Ascites. *Ann Vasc Surg*. 2020;68:351-360. doi:10.1016/j.avsg.2020.04.063
- Pamarthi V, et al. Thoracic duct embolization and disruption for treatment of chylous effusions: experience with 105 patients. *J Vasc Interv Radiol*. 2014 Sep;25(9):1398-404. doi: 10.1016/j.jvir.2014.03.027. Epub 2014 May 14. PMID: 24837980.
- Itkin M, et al. Nonoperative thoracic duct embolization for traumatic thoracic duct leak: experience in 109 patients. *J Thorac Cardiovasc Surg*. 2010 Mar;139(3):584-89; discussion 589-90. doi: 10.1016/j.jtcvs.2009.11.025. Epub 2009 Dec 29. PMID: 20042200.