

EMBOLISM

Dr. Deepak K. Gupta

Introduction

- process of partial or complete obstruction of some part of the cardiovascular system by any mass carried in the circulation;
- transported intravascular mass detached from its site of origin is called an *embolus*
- emboli (90%) are thromboemboli



Classification

- Depending upon the matter in the emboli
 - Solid: detached thrombi (thromboemboli), atheromatous material, tumour cell clumps, tissue fragments, parasites, bacterial clumps, foreign bodies.
 - Liquid: fat globules, amniotic fluid, bone marrow.
 - Gaseous: air or other gases.
- Depending upon whether infected or not: Sterile or Septic
- Depending upon the source of the emboli:
 - Cardiac emboli: left atrium and atrial appendages, infarct in the left ventricle, vegetations of endocarditis.
 - Arterial emboli: systemic arteries in the brain, spleen, kidney, intestine
 - Venous emboli: pulmonary arteries.
 - Lymphatic emboli can also occur.

Thromboembolism

- A detached thrombus or part of thrombus constitutes the most common type of embolism.
- It may be either Arterial (systemic) or Venous

Arterial thromboembolism Venous thromboembolism HEART (most common) SYSTEMIC Mural thrombi Deep vein thrombosis (left atrium, left ventricle) (most common) Vegetative mural endocarditis Pelvic veins Valvular endocarditis Cavemous sinus Prosthetic heart valve Cardiomyopathy LUNGS HEART Pulmonary veins Right side of heart SYSTEMIC LUNGS Aortic atherosclerosis Pulmonary artery Carotid atherosclerosis Aortic aneurysm

Systemic Thromboembolism

- refers to emboli in the arterial circulation
- Most (80%) arise from intracardiac mural thrombi,
 - two-thirds of which are associated with left ventricular wall infarcts
 - Another quarter with dilated left atria
- The remainder originate from aortic aneurysms, thrombi on ulcerated atherosclerotic plaques, or fragmentation of valvular vegetations
- A very small fraction of systemic emboli appear to arise in veins but end up in the arterial circulation, through interventricular defects - paradoxical emboli

Systemic Thromboembolism

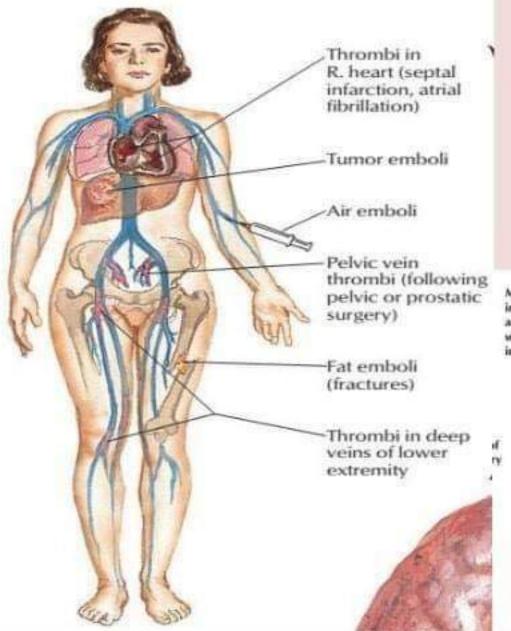
- Can travel to a wide variety of sites as compared to venous emboli
- Site of arrest depends on the point of origin of the thromboembolus and the relative blood flow through the downstream tissues
 - lower extremities (75%)
 - brain (10%),
 - Rest: intestines, kidneys, and spleen affected to a lesser extent
- The consequences of embolization in a tissue depend on
 - vulnerability to ischemia,
 - caliber of the occluded vessel,
 - collateral blood supply
- In general, it causes infarction

Pulmonary Thromboembolism

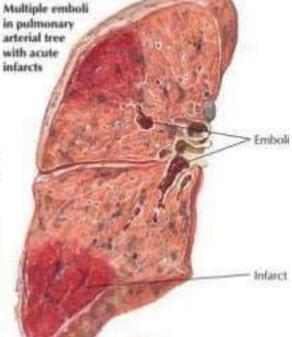
 Most common and fatal form of venous thromboembolism in which there is occlusion of pulmonary arterial tree

ETIOLOGY

- more common in hospitalised or bed-ridden patients,
- though they can occur in ambulatory patients as well
 - originating from large veins of lower legs
 - Less common varicosities of superficial veins of the legs, and pelvic veins



Sources of Pulmonary Embolism



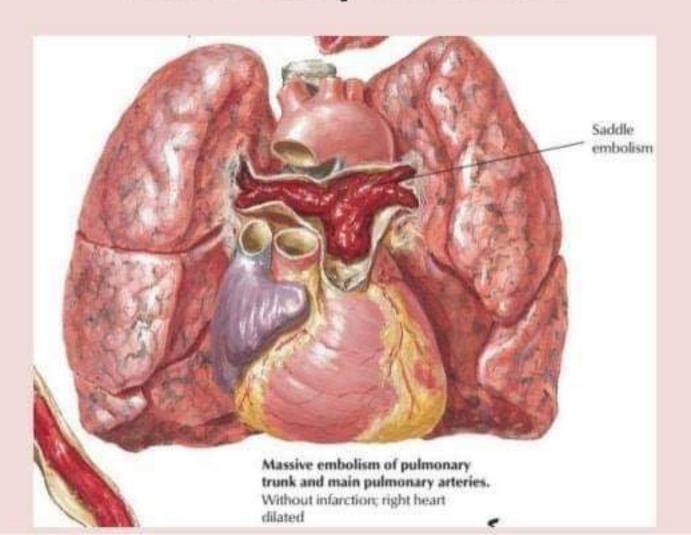
Pulmonary Thromboembolism: Consequences

 Resolution: Vast majority of small pulmonary emboli (60-80%) are resolved by fibrinolytic activity

Acute cor pulmonale

- Numerous small emboli may obstruct most of the pulmonary circulation resulting in acute right heart failure.
- Release of vasoconstrictor substances from platelets
- Reflex vasoconstriction of pulmonary vessels

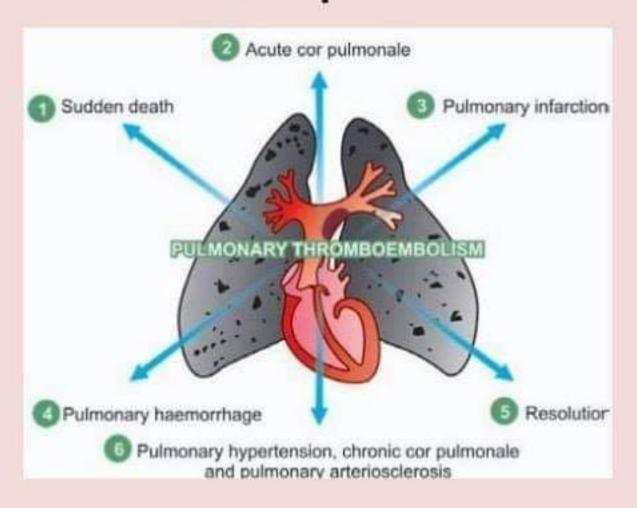
Acute cor pulmonale



Pulmonary Thromboembolism: Consequences

- Pulmonary infarction: Obstruction of relatively small sized pulmonary arterial branches may result in pulmonary infarction
- Pulmonary haemorrhage
- Pulmonary hypertension, chronic cor pulmonale and pulmonary arteriosclerosis.
- Sudden death

Pulmonary Thromboembolism: Consequences



Air Embolism

Air embolism occurs when air is introduced into venous or arterial circulation.

VENOUS AIR EMBOLISM

- Operations on head and neck, and trauma
- Obstetrical operations and trauma
- Intravenous infusion of blood and fluid
- Angiography.

ARTERIAL AIR EMBOLISM

- Cardiothoracic surgery and trauma
- Paradoxical air embolism
- Arteriography