

## 미세변화신증에서 발생한 간문맥, 상장간막정맥, 비장정맥의 혈전증

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### Minimal Change Nephrotic Syndrome Complicated with Portal, Splenic and Superior Mesenteric Vein Thrombosis: A Case Report

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Thromboembolism is known as a major complication of nephrotic syndrome. Renal vein and deep venous thrombosis have been reported to develop in approximately 25% and 15% of patients with the nephrotic syndrome, respectively. However, the incidence of portal vein and superior mesenteric vein (SMV) thrombosis in patient with nephrotic syndrome is very rare. Only 5 cases of portal vein thrombosis have been reported as a complication of nephrotic syndrome. Here, we report a case of portal, splenic and SMV thrombosis occurred in steroid dependent minimal change nephrotic syndrome. A 31-year-old man presented with severe abdominal pain. CT scan revealed diffuse portal, splenic and SMV thrombosis accompanied with bowel edema probably due to ischemia. Thrombolytic therapy was performed by local urokinase infusion indirectly via superior mesenteric artery (SMA). Catheter was placed with the tip in the SMA, and then continuous thrombolytic therapy was started with urokinase 50,000 IU/h. Unfractionated heparin infusion was given simultaneously via a peripheral vein. During the prolonged infusion of thrombolytics, the follow-up SMV venography via the infusion catheter was performed every 24 hours for 4 days. And then, abdominal pain was gradually improved and collateral vessel formation was observed in follow-up venography. Thrombolytics therapy was stopped and heparin therapy was switched to warfarin. The follow-up CT scan was performed two months later, and revealed that all portal, splenic thrombi had disappeared.

**Key Words:** 미세변화신증, 정맥혈전증, 혈전용해술

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