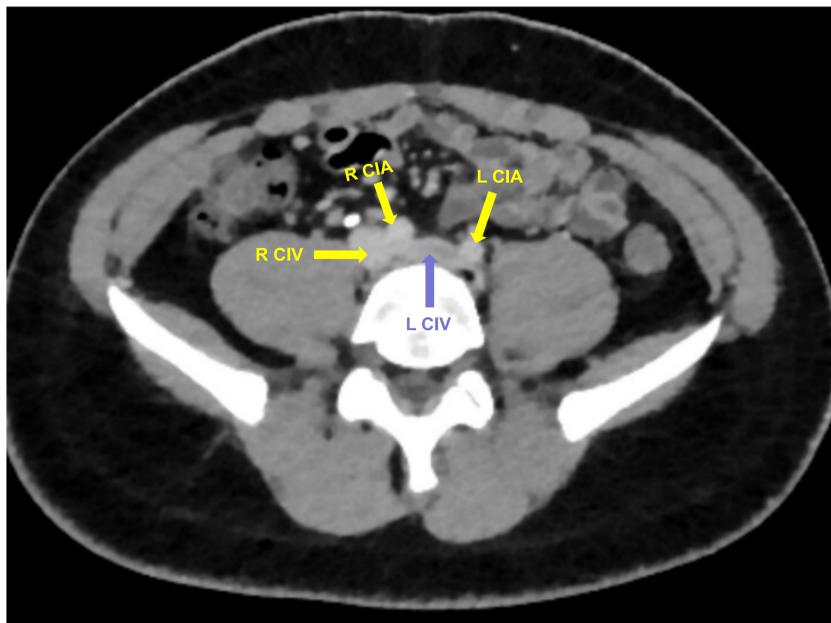


Introduction

- May Thurner syndrome (also known as Cockett syndrome or iliac vein compression syndrome) is a rare condition in which there is external venous compression of the left lower extremity
- Although there are multiple anatomical and pathological variants, the most commonly encountered is that of left common iliac vein compression between the right common iliac artery and the fifth lumbar vertebrae
- It has been found to be more prevalent in women with a female to male incidence ratio of approximately 2:1
- Of note, MTS is also known to present later in men than women (average age of 46 in men vs 39 in women)
- We hereby present an unusual case of May Thurner syndrome (MTS) in an 18-year-old male with no predisposing risk factors

CT Venogram



Case

- **Presentation:**
 - An 18-year-old African American male with no past medical history presented with left lower extremity pain, redness and edema of four-day duration without any provocative factors
- **History:**
 - The patient denied any recent travel, trauma, surgeries, or hospitalizations
 - No alcohol, drug, or tobacco use
 - Family history was significant for thromboembolic disease without clear etiology in his mother
- **Lab Results:**
 - Hypercoagulable states - (Beta2glycoprotein and AntiCardiolipin studies were negative)
- **Imaging:**
 - Venous doppler showed extensive occlusive acute deep venous thrombosis extending from the left external iliac through the posterior tibial and and peroneal veins in the left lower extremity
 - CT venogram Abdomen and Pelvis was done and showed deep venous thrombosis extending from the visualized portion of the left femoral vein to the left common iliac vein where the right common iliac artery crosses, raising the likelihood of May Thurner syndrome
- **Treatment:**
 - Started on heparin drip
 - Pt underwent a suction thrombectomy and balloon angioplasty of the left iliac stenosis
 - Ultimately, he was discharged on Eliquis anticoagulation

Discussion

- The existing literature on MTS in young males with no risk factors is scant
- The case described is one such case and highlights the importance of maintaining a high index of suspicion for MTS in atypical populations
- While only 2-5% of all DVTs are said to be caused by MTS, studies have estimated that the prevalence in the general population is greater than 20%
- A commonly proposed theory for the underdiagnosis of MTS, is the high prevalence of other provocative factors for DVTs, and their overlap with the risk factors for symptomatic MTS
- Studies have found that men tend to present with more severe pain and swelling compared to women, who usually present with pulmonary emboli
- Although a large number of patients with MTS remain clinically silent throughout their lifetime, physicians must remain cognizant of the possibility of this diagnosis in young men, the typical presentation findings seen in men, and how they might differ from that of women

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