

## **Spontaneous Migration of a Central Line Catheter into the Heart**

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**Background:** Spontaneous migration of central line catheter into the heart is extremely rare complication after initial placement.

**Objective:** To present two cases with unusual central venous line-related complication.

**Design:** Retrospective review.

**Setting:** Surgical and Pediatric Oncology Departments, Salmaniya Medical Complex, Kingdom of Bahrain.

**Method:** The charts of two patients with spontaneous migration of port-a-cath catheter into the heart presented to the surgical department (between January 2006 to March 2007) were reviewed.

**Result:** The first patient is 12 years old female, a known case of acute lymphoblastic leukemia (ALL) and Down's syndrome, presented with failure to aspirate the central line after 3 months of port-a-cath catheter insertion. The second patient is 7 years old male, known case of acute lymphoblastic leukemia presented with non-functioning line after 5 months of insertion of port-a-cath catheter. Chest x-rays of both patients confirmed the migration of the catheter into the heart. The catheter in the first case was removed by percutaneous retrieval by loop-snare technique, and in the second case the catheter was removed by open neck surgery.

**Conclusion:** Spontaneous migration of port-a-cath catheter into the heart is a rare complication. Chest x-ray is essential to provide early detection and management of migrated catheter. Early diagnosis and removal of the catheter is the rule in all cases.

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