

Inferior vena cava

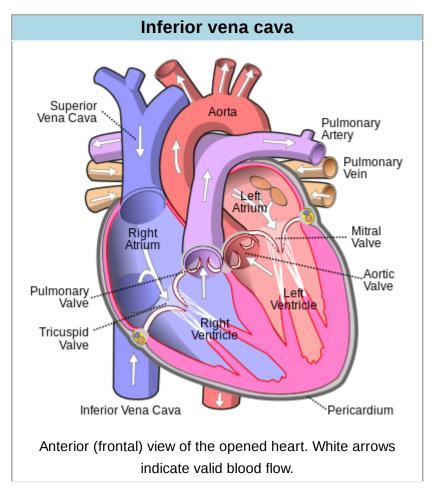
The **inferior vena cava** is a large vein that carries the deoxygenated <u>blood</u> from the lower and middle body into the <u>right atrium</u> of the <u>heart</u>. It is formed by the joining of the right and the left <u>common iliac veins</u>, usually at the level of the fifth lumbar vertebra. [1][2]

The inferior vena cava is the lower ("inferior") of the two venae cavae, the two large veins that carry deoxygenated blood from the body to the right atrium of the heart: the inferior vena cava carries blood from the lower half of the body whilst the superior vena cava carries blood from the upper half of the body. Together, the venae cavae (in addition to the coronary sinus, which carries blood from the muscle of the heart itself) form the venous counterparts of the aorta.

It is a large <u>retroperitoneal</u> vein that lies <u>posterior</u> to the <u>abdominal cavity</u> and runs along the right side of the <u>vertebral column</u>. It enters the right auricle at the lower right, back side of the heart. The name derives from <u>Latin</u>: *vena*, "*vein*", *cavus*, "*hollow*".

Structure

The IVC is formed by the joining of the left and right <u>common iliac veins</u> and brings collected blood into the <u>right atrium</u> of the heart. [1] It also <u>joins</u> with the <u>azygos vein</u> (which runs on the right side of the vertebral column) and venous plexuses next to the spinal cord.



The inferior vena cava begins as the left and right common iliac veins behind the abdomen unite, at about the level of $\overline{L5}$. It passes through the thoracic diaphragm at the caval opening at the level of $\overline{T8}$ - $\overline{T9}$. It passes to the right of the descending aorta.

Tributaries

The specific levels of the tributaries are as follows:

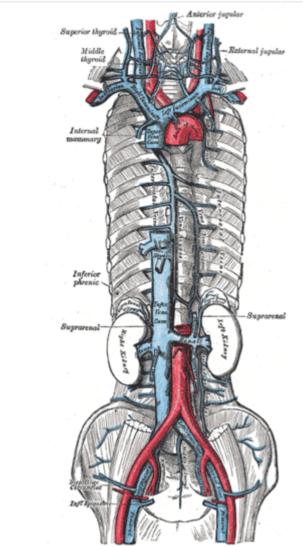
Level	Vein
Т8	hepatic veins, inferior phrenic vein
L1	right suprarenal vein, renal veins
L2	right gonadal vein
L1– L5	lumbar veins
L5	common iliac veins

Because the inferior vena cava is located to the right of the midline, drainage of the tributaries is not always symmetrical. On the right, the gonadal veins and suprarenal veins drain into the inferior vena cava directly. On the left, they drain into the renal vein which in turn drains into the inferior vena cava. By contrast, all the lumbar veins and hepatic veins usually drain directly into the inferior vena cava.

Development

In the <u>embryo</u>, the inferior vena cava and right auricle are separated by the <u>valve</u> of the inferior vena cava, also known as the *Eustachian valve*. In the adult, this valve typically has totally regressed or remains as a small fold of endocardium. [4]

Variation



Superior vena cava, inferior vena cava, azygos vein and their tributaries

	Details	
Source	Common iliac vein lumbar veins testicular vein renal vein suprarenal vein hepatic vein	
Drains to	Right atrium	
Artery	Abdominal aorta	
Identifiers		
<u>Latin</u>	vena cava inferior	
Acronym(s)	IVC	
MeSH	D014682 (https://meshb.nlm.nih.gov/record/ui?ui =D014682)	
<u>TA98</u>	A12.3.09.001 (https://ifaa.unifr.ch/Public/EntryPa ge/TA98%20Tree/Entity%20TA98%20EN/12.3.0 9.001%20Entity%20TA98%20EN.htm)	

Rarely, the inferior vena cava may vary in its size and position. In <u>transposition</u> of the great arteries the inferior vena cava may lie on the left.

In between 0.2% to 0.3% of people, the inferior vena cava may be duplicated beneath the level of the renal veins.

TA2	4991 (https://ta2viewer.openanatomy.org/?id=49 91)
<u>FMA</u>	10951 (https://bioportal.bioontology.org/ontologies/FMA/?p=classes&conceptid=http%3A%2F%2Fpurl.org%2Fsig%2Font%2Ffma%2Ffma10951)
	Anatomical terminology

Function

The inferior vena cava is a <u>vein</u>. It carries deoxygenated blood from the lower half of the body to the <u>right</u> atrium of the heart. [6]

The corresponding vein that carries deoxygenated blood from the upper half of the body is the <u>superior</u> vena cava.

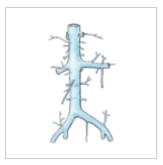
Clinical significance

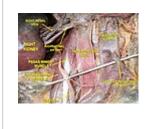
Health problems attributed to the IVC are most often associated with it being compressed (ruptures are rare because it has a low <u>intraluminal pressure</u>). Typical sources of external pressure are an enlarged <u>aorta</u> (abdominal aortic aneurysm), the <u>gravid uterus</u> (aortocaval compression syndrome) and abdominal malignancies, such as <u>colorectal cancer</u>, <u>renal cell carcinoma</u> and <u>ovarian cancer</u>. Since the inferior vena cava is primarily a right-sided structure, unconscious pregnant women should be turned on to their left side (the <u>recovery position</u>), to relieve pressure on it and facilitate venous return. In rare cases, straining associated with <u>defecation</u> can lead to restricted blood flow through the IVC and result in <u>syncope</u> (fainting). [7]

Blockage of the inferior vena cava is rare and is treated urgently as a life-threatening condition. It is associated with <u>deep vein thrombosis</u>, <u>IVC filters</u>, <u>liver transplantation</u> and <u>surgical procedures</u> such as the insertion of a catheter in the femoral vein in the groin. [8]

Trauma to the vena cava is usually fatal as unstoppable <u>excessive</u> blood loss occurs.

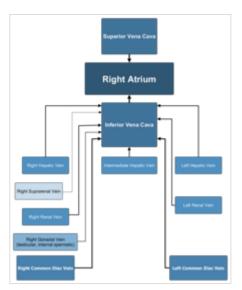
Additional images





Inferior vena cava

Inferior vena cava front view



Branches of Inferior Vena Cava





Image of an <u>inferior</u> vena cava filter

Image showing an inferior vena cava filter in its position

See also

- Atriocaval shunt
- Inferior vena cava syndrome
- Recovery position

References

- Mozes, GEZA; Gloviczki, PETER (January 1, 2007), Bergan, John J. (ed.), "CHAPTER 2 Venous Embryology and Anatomy" (http://www.sciencedirect.com/science/article/pii/B97801 23695154500053), The Vein Book, Burlington: Academic Press, pp. 15–25, doi:10.1016/b978-012369515-4/50005-3 (https://doi.org/10.1016%2Fb978-012369515-4%2 F50005-3), ISBN 978-0-12-369515-4, retrieved November 22, 2020
- Dardis, Ronan M.; Saxena, Amar; Shad, Amjad; Chitnavis, Bhupal; Gullan, Richard (January 1, 2012), Quiñones-Hinojosa, Alfredo (ed.), "Chapter 154 Disc Replacement Technologies in the Cervical and Lumbar Spine" (http://www.sciencedirect.com/science/article/pii/B978141 6068396101546), Schmidek and Sweet Operative Neurosurgical Techniques (Sixth Edition), Philadelphia: W.B. Saunders, pp. 1777–1788, doi:10.1016/b978-1-4160-6839-6.10154-6 (htt ps://doi.org/10.1016%2Fb978-1-4160-6839-6.10154-6), ISBN 978-1-4160-6839-6, retrieved November 22, 2020

- 3. Blumgart, Leslie H.; Schwartz, Lawrence H.; DeMatteo, Ronald P. (January 1, 2017), Jarnagin, William R. (ed.), "Chapter 2 Surgical and radiologic anatomy of the liver, biliary tract, and pancreas" (http://www.sciencedirect.com/science/article/pii/B97803233406250000 29), Blumgart's Surgery of the Liver, Biliary Tract and Pancreas, 2-Volume Set (Sixth Edition), Philadelphia: Elsevier, pp. 32–59.e1, doi:10.1016/b978-0-323-34062-5.00002-9 (htt ps://doi.org/10.1016%2Fb978-0-323-34062-5.00002-9), ISBN 978-0-323-34062-5, retrieved November 22, 2020
- 4. Turhan Yavuz; Nazli, C; Kinay, O; Kutsal, A (2002). "Giant Eustachian Valve: with Echocardiographic Appearance of Divided Right Atrium" (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC140300). Texas Heart Institute Journal. 29 (4): 336–8. PMC 140300 (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC140300). PMID 12484622 (https://pubmed.ncbi.nlm.nih.gov/12484622).
- Stavropoulos, S. William; Solomon, Jeffrey A. (January 1, 2011), Pretorius, E. Scott; Solomon, Jeffrey A. (eds.), "Chapter 30 - Inferior Vena Cava Filters" (http://www.sciencedirec t.com/science/article/pii/B9780323067942000304), Radiology Secrets Plus (Third Edition), Philadelphia: Mosby, pp. 223–227, doi:10.1016/b978-0-323-06794-2.00030-4 (https://doi.or g/10.1016%2Fb978-0-323-06794-2.00030-4), ISBN 978-0-323-06794-2, retrieved November 22, 2020
- 6. Susan Standring; Neil R. Borley; et al., eds. (2008). *Gray's anatomy: the anatomical basis of clinical practice* (40th ed.). London: Churchill Livingstone. ISBN 978-0-8089-2371-8.
- 7. Brophy, CM; Evans, L; Sumpio, BE (1993). "Defecation syncope secondary to functional inferior vena caval obstruction during a Valsalva maneuver" (https://doi.org/10.1007%2FBF0 2002893). Annals of Vascular Surgery. 7 (4): 374–7. doi:10.1007/BF02002893 (https://doi.org/10.1007%2FBF02002893). PMID 8268080 (https://pubmed.ncbi.nlm.nih.gov/8268080). S2CID 42135883 (https://api.semanticscholar.org/CorpusID:42135883).
- 8. Geehan DM, Inferior Vena Caval Thrombosis, emedicine.com, URL: http://www.emedicine.com/med/topic2718.htm, Accessed: August 3, 2005.

External links

- Anatomy photo:40:13-0101 (http://ect.downstate.edu/courseware/haonline/labs/l40/130101.htm) at the SUNY Downstate Medical Center "Posterior Abdominal Wall: Tributaries to the Inferior Vena Cava"
- Cross section image: pembody/body12a (https://www.meduniwien.ac.at/plastination/pembod y/body12a-text.html)—Plastination Laboratory at the Medical University of Vienna

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