

## Abstract

Superior vena cava syndrome (SVCS) is a rare entity which results from an obstruction to the blood flow in SVC. This commonly happens due to an extrinsic compression of the SVC by a mediastinal tumor. Patient can present with non-lethal symptoms such as face, neck and upper extremity swelling or as a medical emergency with laryngeal edema and cerebral edema.

Here we present a case of a 26-year-old female who presented with face and neck swelling associated with mild shortness of breath and cough having SVCS due to a primary mediastinal B cell lymphoma compressing the SVC.

Upon initial presentation to our unit she was evaluated mainly for face and neck swelling. In chest x ray it was found that she is having a mediastinal mass which warranted further evaluation with contrast enhanced CT of the chest. Imaging was suggestive of a mediastinal lymphoma causing near total obstruction in the superior vena cava. Ultrasound guided trucut biopsy was done and histology confirmed primary mediastinal B cell lymphoma. There was no evidence of distant metastasis.

After initial symptomatic treatments, definitive treatments were started targeting underlying cause for SVCS with chemotherapy and local radiotherapy which resulted in an excellent clinical recovery.

This case study demonstrates that the prompt recognition, diagnosis and treatment of SVC syndrome will result in good prognostic outcomes.

Key words – Superior vena cava (SVC) syndrome, mediastinal