Study of the veins of the cubital fossa by helical computed tomography and its clinical application [Estudio de las venas de la fosa cubital a través de la tomografía computada helicoidal y su aplicación clínica]

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The superficial veins of the cubital fossa, is one of the most important sites of venipunctures. There are many variations in the arrangement of these veins. Their anatomy has not been studied using technology available in the field of medicine such, as helical computed tomography. The vein formation of the cubital fossa in 60 Chilean subjects of both sexes, between 10 and 86 years of age of the IX Region of Araucania, Chile, were analyzed by helical computed tomography. The study was realized on a General Electric scanner, model CT / e, belonging to the Imaging Center of the Hospital del Trabajador, Temuco, Chile, in ambulatory subjects. Based on the classification of del Sol et al. (1988) for the vein formation of the cubital fossa, we obtained the following results: Type I (46.7%), the cephalic vein of forearm (CVF), is divided into median basilic vein (MBV) and median cephalic vein (MCV), then anastomosis the basilic vein of forearm (BVF) and cephalic vein accessory (CVA), respectively. Type II (13.3%), the CVA originates at the median cubital vein (MCuV), which anastomoses to the BVF. Type III (20%), there is no communication between BVF and CVF at the cubital fossa. Type IV (8.3%), CVF drains into the BVF. Type V (11.7%) - Other disposition, which include the "M" classical, resulting from the division of the median antebrachial vein. Using the MCV or CVF, is recommended, since there are risks of puncture of other important anatomical structures such as the anterior branch of the medial antebrachial cutaneous nerve.

Clinical application

Cubital fossa

Helical computed tomography

