Venous thromboembolism (VTE) is a serious complication that can be seen after hip and lower extremity fractures associated with high morbidity and mortality. While VTE risk of multiple trauma and after hip fracture are quite high, the risk is very low in the distal lower extremity fracture. VTE can be caused by often the case after fracture in the acute period of immobilization and rarely by vasculopathy may occur due to fracture. In this report, a case one year after the left distal tibia fracture detected the left superficial femoral, popliteal, thrombus in renal and portal vein will be discussed.

Thirty-three-years old male patient applied to the clinic complaints with swelling on the left leg and abdominal pain. Swelling in the left leg and decreasing pain was available in story since three weeks. In his story after traffic accident out of motor-vehicle which happened a year ago, fracture in left distal tibia was available. During the application process of the patient vital signs were stable, on physical examination there were no abnormal findings except swelling on his left ankle. In laboratory tests, routine biochemistry, hemogram, hemostasis parameters were normal, D-dimer detected twice as high. Finding compatible with left superficial femoral in lower extremity doppler and chronic deep vein thrombosis in popliteal vein detected. All abdominal ultrasound was normal but in portal and renal vein doppler, thrombus in portal and left renal vein was found, these findings were confirmed by computed tomography angiography. Thrombus in the tests aimed at the etiology thrombophilia, lymphoproliferative disorder, rheumatic disease and malignancy were excluded by available laboratory and clinical situations. Anticoagulant therapy started to the patient and discharged.

Unknown origined venous thromboembolisms were mentioned in the literature. It has been stated in unknown origined cases of thromboembolism that either vasculopathy or in following-up malignancies are developing. In a study it has been observed that in following-up some of the cases that de-
tected thrombus, pancreas, ovary, liver, and brain malignancies are developing. In some cases, it is emphasized that thrombus is developing after vasculopathies. In our case, findings that make thinking of vasculopathy were not encountered. Our patient followed up for potential risk of malignancy.

