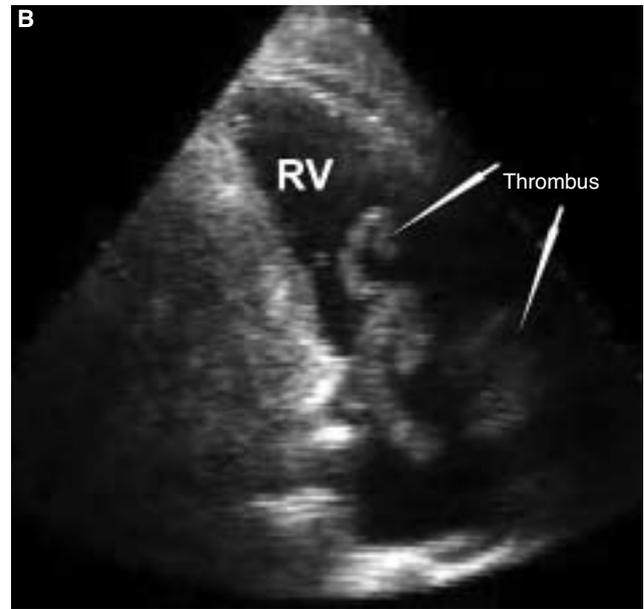
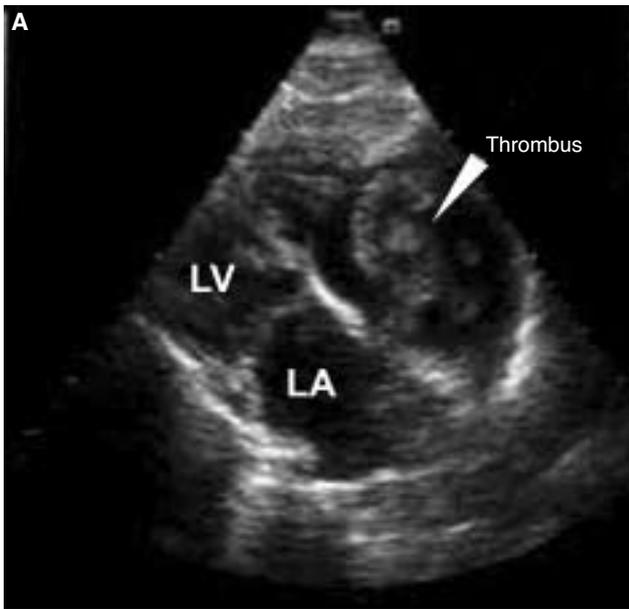


Görüntülü olgu örnekleri

Case images

Pulmonary thromboembolism caused by a giant free-floating right atrial thrombus

Pulmoner tromboemboliye neden olan serbest yüzen dev sağ atriyal trombüs



Gürkan Acar
Sedat Köroğlu
Abdullah Sökmen
Cemal Tuncer

Department of
Cardiology,
Medicine Faculty of
Sütçü İmam University,
Kahramanmaraş

A 71-year-old male patient was referred to our cardiology department with a diagnosis of bilateral deep venous thrombosis of two-day history. He had complaints of progressive dyspnea and bilateral leg pain. His past medical history was unremarkable. On physical examination, his respiratory

rate was 32/min, pulse was 123/min (irregular), and blood pressure was 100/70 mmHg. There were swellings and redness in both legs. Electrocardiography

revealed atrial fibrillation with a ventricular rate of 130/min, incomplete right bundle branch block, and nonspecific ST-segment and T-wave abnormalities. Transthoracic echocardiography was performed immediately, whereby a giant, mobile, free-floating thrombus was detected passing through the tricuspid valve in the right atrium (Fig. A and B). There was severe tricuspid regurgitation, right cardiac chambers were dilated, and systolic pulmonary arterial pressure was 65 mmHg. Left ventricular systolic functions were found normal. Based on physical and echocardiographic findings, a diagnosis of acute pulmonary embolism was made. Unfortunately, the patient's hemodynamic status deteriorated in a few minutes and he was lost due to cardiopulmonary arrest before initiation of thrombolytic therapy.

Figures. (A) Transthoracic echocardiography showing a mobile, giant thrombus freely floating inside the right heart. (B) Transthoracic echocardiographic view of the thrombus crossing through the tricuspid valve.