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Clinical Image

Bilateral Intracardiac Thrombus

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2. Key words

Intracardiac thrombus; Atrial fibrillation; Ischaemic cardiomyopathy.

1. Case

A 76 years-old male patient was referred in January 2020 to our institution for an acute heart failure. The patient suffered from ischaemic cardiomyopathy after an anterior myocardial infarction, and persistent atrial fibrillation treated by ablation twice in 2017 (CHA2DS2-VASc score = 5).

In 2017, Transthoracic Echocardiographic (TTE) revealed a Right Atrial (RA) mass (30 x 40 mm), associated with an apical Left Ventricular (LV) mass (20 x 15 mm): most likely clots. LVEF was 45. An MRI (Figure 1) confirmed the two thrombi. Patient was treated with vitamin K antagonist (Fluindione) with target INR between 2 and 3. Recently the patient came back for acute heart failure (January 2020). TTE now revealed a LVEF at 30% with a persistence although smaller RA thrombus. The LV thrombus was no longer seen on TTE. MRI found a small residual LV thrombus (1 mm), while the RA thrombus which was now 34 x 20 mm was attached to the RA posterior wall. A non-injected CT scan showed calcification inside the RA thrombus. Fluindione was continued.

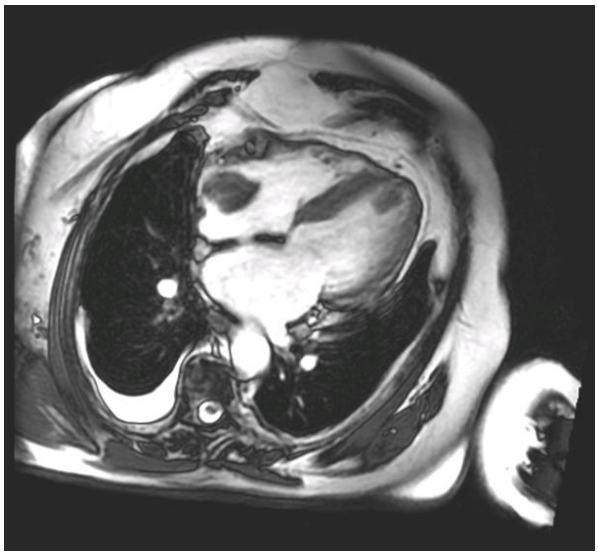

Figure 1: MRI FIESTA 4 chambers view (performed in 2017) showing a bilateral right atrial (34 x 20 mm) and left ventricular (18 x 13 mm) thrombus. Moderate right pleural effusion associated.

3. Abbreviations: INR: International Normalized Ratio; LV: Left Ventricular/Ventricle; MRI: Magnetic Resonance Imaging; PFO: Patent Foramen Ovale; RA: Right Atrial/Atrium; TEE: Trans-Esophageal Echocardiography; TTE: Trans-Thoracic Echocardiography

4. Discussion

On the one hand, LV apical thrombus complicates 3 to 4% of acute anterior myocardial infarction. On the other hand, atrial arrhythmias ablation can be complicated by big RA thrombi. The combination of both is exceptional and gives unusual images on MRI. The thrombotic nature of both images was demonstrated by the subtotal disappearance of the LV apical thrombus and the partial resolution of the RA thrombus, which is currently calcified.

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