

Use of Intraoperative TEE to Aid in Endovascular Removal of an Aortic Thrombus: A Case Report

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Clinical Image

Aortic thrombosis is a rare but potentially life-threatening event. The AngioVac Cannula and Circuit is a device that has been increasingly used to remove undesirable intravascular material in the right atrium, right ventricle, vena cava, and iliofemoral veins. We present a case where the AngioVac device, under Transesophageal Echocardiography (TEE) and fluoroscopy guidance, was successfully used to remove a free-floating intra-aortic thrombus in the descending aorta of a patient with acute COVID-19 pneumonia [1-6]. This case demonstrates the utility of TEE in providing real-time visual guidance of catheter placement and confirmation of thrombus evacuation (Figure 1).

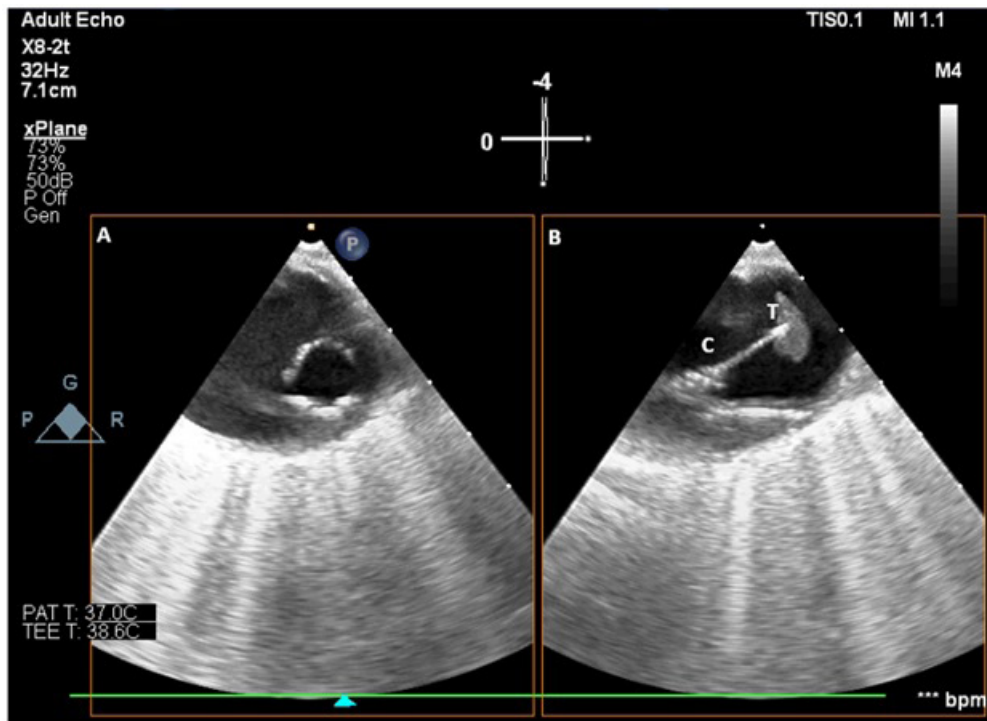


Figure 1: TEE image of the descending aorta showing capture and evacuation of intra-aortic thrombus using flared cannula advanced under transesophageal ultrasound guidance. (A) Descending thoracic aorta short axis view, (B) Descending thoracic aorta long axis view, (C) AngioVac flared cannula, (T) aortic thrombus.

References

1. Al-Ani F, Chehade S, Lazo-Langner A. Thrombosis risk associated with COVID-19 infection. A scoping review. *Thrombosis Research*. 2020; 192: 152-60.
2. Del Rosario T, Basta M, Agarwal S. AngioVac Suction Thrombectomy Complicated by Thrombus Fragmentation and Distal Embolization Leading to Hemodynamic Collapse. A & A Case Reports. 2017; 8: 206-9.
3. Enezate TH, Kumar A, Aggarwal K, Balla S, Omran J. Non-surgical extraction of right atrial mass by AngioVac aspiration device under fluoroscopic and transesophageal echocardiographic guidance. *Cardiovascular Diagnosis and Therapy*. 2017; 7: 331-5.
4. Gerlach RM, Ramzy D, Lubin L, Conte AH. Transesophageal Echocardiogram-Guided Percutaneous AngioVac™ Extraction of a Right Atrial Embolus. *Anesthesia & Analgesia*. 2016; 122: 651-3.
5. Gomez-Arbelaez D, Ibarra-Sanchez G, Garcia-Gutierrez A, Comanges-Yeboles A, Ansuategui-Vicente M, Gonzalez-Fajardo JA. COVID-19-Related Aortic Thrombosis: A Report of Four Cases. *Annals of Vascular Surgery*. 2020; 67: 10-3.
6. Wickham H, Tam JCH, Chan XH, George MJ, Levi M, Brown M. Aortic thrombosis in COVID-19. *Clinical Infection in Practice*. 2021; 9: 100059.