Acute Aortic Occlusion in a Patient with Atrial Fibrillation and Aortic Dissection

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A 50-year-old man with a medical history of atrial fibrillation and type B aortic dissection presented with sudden...
onset of dyspnea, diaphoresis and weakness in his legs. Chest CT revealed the acute total occlusion of the abdominal aorta with thrombus formation and mesentery ischemia (Picture 1, arrow). Thrombi were observed in the left atrial appendage and left ventricle (Picture 2, arrows). Maximum intensity projection CT depicted a comparison of the prior dissection and the current occlusion (Picture 3, arrows, left: prior dissection; right: current occlusion). Although emergent aortic thrombectomy (Picture 4) was performed, the patient died due to multiple organ failure two days later.

Atrial fibrillation leads to thrombus formation due to a stagnant blood flow in the left atrium, while false lumens occurring in aortic dissection narrow the lumen. Both of these phenomena increase the possibility of acute aortic thromboembolic occlusion; however, they have so far only rarely been reported. Making a timely diagnosis and providing appropriate surgical intervention as soon as possible are important factors when encountering such patients.

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