Ultra-Rapid and Massive Thrombus Formation in Cardiac Chambers

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A 40-year-old man was transported to our hospital due to refractory ventricular fibrillation. We introduced percutaneous cardiopulmonary support (PCPS), which resulted in the restoration and maintenance of the sinus rhythm, and induced therapeutic hypothermia. Coronary angiography showed no significant coronary stenosis.

On the second day of his hospitalization, transthoracic echocardiography revealed a newly-formed massive thrombus occupying the left atrium and the left ventricle with subtle mobility despite the continuous infusion of heparin with an activated clotting time >220 seconds (Picture). The patient died of embolization of the ascending aorta, and an autopsy revealed the typical pathological findings of fulminant myocarditis.

Although the formation of a left ventricular thrombus during PCPS has been documented in several previous reports (1, 2), this is a rare case with a rapidly growing, massive thrombus formation in the cardiac chambers that occurred within one day, despite the administration of standard anticoagulation therapy and no prior coagulopathy in the patient’s medical history.

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References

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