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Aortic mural thrombosis in non-atherosclerotic aorta; review of two patients

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Aortic mural thrombosis is a clinical entity usually seen in atherosclerotic or aneurysmal aorta but rarely could occur in normal aorta as a result of thrombophilia, malignancies or even without any definable etiology. We present two cases with extensive thrombus formation in non-atherosclerotic and non-aneurysmal aorta that present with peripheral embolization. The first patient had left hand ischemia and once evaluated, was found to have extensive thrombosis in left subclavian artery, aortic arch with embolization to left renal artery. The second patient presented with severe pain in right lower extremity that also turned out to have a large hypermobile echogenic mass in proximal section of descending aorta. Investigations to establish the probable underlying aetiology including; coagulation factors, malignancies and vasculitis were all negative. Both were treated with anticoagulation, which resulted in clot size reduction and in one case thrombus resolution. The aim of the present study is to report the clinical characteristics and evaluation of two patients who suffered from extensive aortic thrombosis associated with distal arterial emboli and also highlights the fact that it could occur without any identifiable etiology. It is crucial to note that clinical management of these patients could be challenging due to the risk of developing clot and involvement of vital organs.

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