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[Diagnostic approach and management of left intraventricular thrombus complicated by unexpected embolism : A case report]

[Article in French]

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Abstract

Left ventricular thrombus (LVT) is a serious complication of both ischemic and non-ischemic cardiomyopathies, with a high risk of morbidity and mortality due to systemic embolism. We present the case of a 73-year-old man with a history of myocardial infarction who subsequently developed an apical thrombus. Seven years after the initial event, this thrombus caused a splenic infarction complicated by an abscessed hematoma. This case underlines the critical role of advanced medical imaging in the diagnosis of LVT and highlights the emerging therapeutic potential of direct oral anticoagulants. It also highlights the challenges of diagnosing and managing LVT and the importance of reviewing the latest evidence to refine and optimize therapeutic strategies.

Keywords: Acute lower-limb pain; Anticoagulant oral direct, Antagonistes de la vitamine K; Direct oral anticoagulant, Vitamin K antagonists; Douleur aiguë du membre inférieur; Embolie artérielle systémique; Infarctus du myocarde; Infarctus splénique; Left ventricular thrombus; Myocardial infarction; Splenic infarction; Systemic arterial embolism; Thrombus intraventriculaire gauche.

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