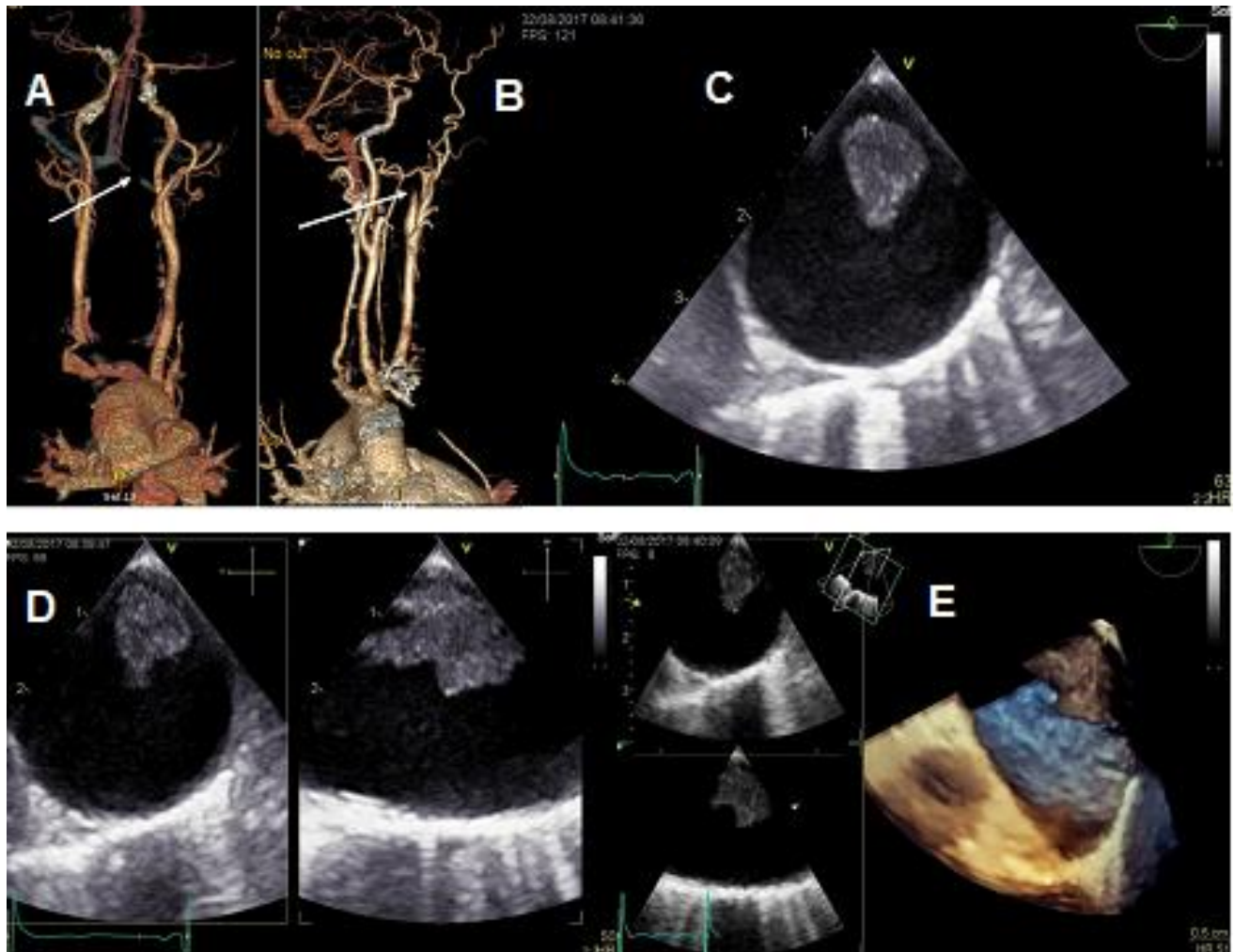


CARDIOLOGY IMAGES**Primary aortic thrombus causing recurrent acute stroke**Ali Raza Rajani¹, Anas Mahmoud Abbas², Juwairia Yousif Mohamed³,

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A 39-year-old male with past history of hypertension, dyslipidemia, peripheral vascular disease presented with sudden onset of loss of consciousness and left hemiplegia. On examination, the patient had a Glasgow Coma Scale of 11/15, bilateral cerebellar signs lateralized to right side. His initial brain CT and CT cerebral angiography revealed left thalamic, right occipital lobe infarcts and basilar artery thrombus (Panel A arrow). He was treated by embolectomy. The following day, he developed right hemiplegia and left facial nerve palsy. His repeat imaging showed left internal carotid thrombus (Panel B arrow) with new left middle cerebral artery infarcts. He underwent a second embolectomy following.

Transesophageal echocardiography ((Panel C, D. E 3D TOE) demonstrated a large sessile mobile thrombus measuring 1.5 x 1.1 x 0.7 cm seen near the junction of arch and descending aorta. He was managed with anti-coagulation and his condition improved gradually. His recurrent stroke was attributed to emboli from the aortic arch thrombus.