

Image in cardiology

Leriche's Syndrome and Thoracic Aortic Mural Thrombus

Síndrome de Leriche y trombo mural de aorta torácica

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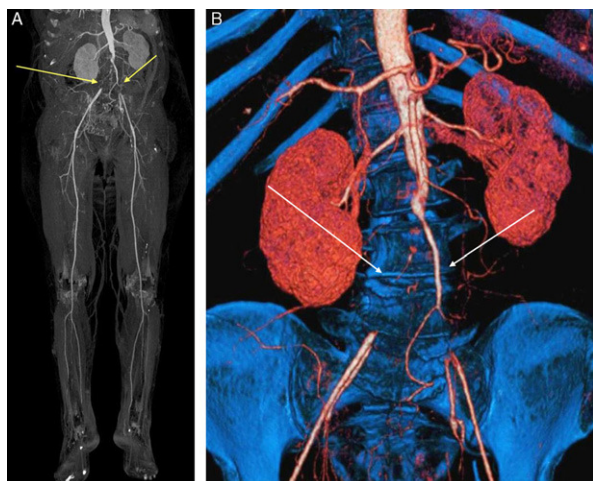


Figure 1.

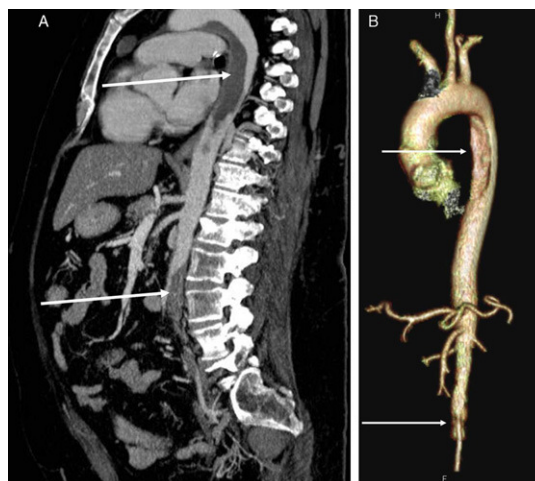


Figure 2.

A 63-year-old female presented with proximal bilateral lower extremity pain that occurred after walking and was resolved by resting in the standing position. Her past medical history was significant for obesity, hypertension, and dyslipemia. On physical examination, the bilateral pedal and posterior tibial pulses were absent, the bilateral popliteal pulses and the left femoral pulse were weak, and the right femoral pulse was not palpable. The computed tomography angiogram revealed diffuse atherosclerotic disease involving the infrarenal abdominal aorta, causing an occlusion of distal aorta and both primitive iliac arteries with posterior spontaneous revascularization (Figs. 1A, 1B); a mobile thrombus originated from the inner curve of the isthmic aorta and extended over 10 cm, occluding 65% of the lumen of the descending aorta (Figs. 2A, 2B).

Laboratory tests, including those for thrombophilia and autoimmune diseases, were normal. The patient refused surgery and acenocumarol was started.

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