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Acute Leriche syndrome due to the thrombus in the left ventricle

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A 50-year-old patient with acute paresis, paralysis and the absence of femoral pulses in both legs was admitted to emergency. Computed tomography (CT) scan revealed a total occlusion of infrarenal abdominal aorta and of the iliac arteries (Fig. 1). Thrombus in the left ventricle as the source of embolus (Fig. 2) was identified.

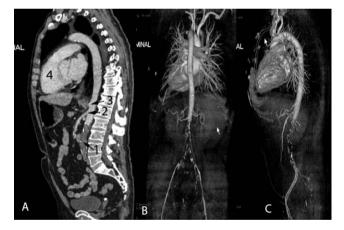
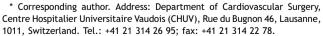
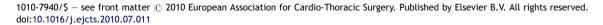


Fig. 1. CTscan, in early arterial phase, shows a total occlusion of the infrarenal aorta including, both left and right common iliac arteries. Superior mesenteric artery and celiac trunk were not occluded. (A) The 3D reconstruction of the late arterial phase of CTscan shows from the posterior (B) and lateral (C) view the occlusion of the abdominal aorta. 1: Embolus in infrarenal aorta, 2: superior mesenteric artery, 3: coeliac trunk and 4: right ventricle.



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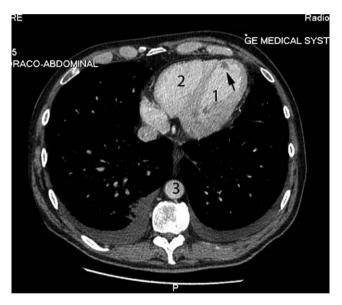


Fig. 2. Contrast CT scan, of late arterial phase, shows a cross-section image at the level of the left ventricle. The arrow indicates the thrombus in the apex of the left ventricle. 1: Left ventricle, 2: right ventricle and 3: thoracic aorta.