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Late period dual chamber pace maker lead thrombus in a patient shortly after the onset of atrial fibrillation

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Seventy four years old, caucasian female patient brought in to emergency department for an acute onset and deteriorating dyspnea. A DDD-R pacemaker was implanted seven years ago because of complete AV block. Previous routine follow-up exams and pacemaker technical values were within normal limits in all 7 years. But she was in atrial fibrillation in last follow up which was one month ago before detecting thrombus in pacemaker lead. Transthoracic echocardiography revealed a 1.5 x3.0 cm thrombus in the right atrium attached to the lead. Patient was admitted to cardiovascular surgery intensive care unit with a plan for surgery because of large thrombus.

Electrode-associated Right Atrial (RA) thrombus appears to be relatively common in acute period after pacemaker implantation and it's usually asymptomatic. Patient's previous follow-ups were within normal limits in 7 years. Probably an electrode-associated RA thrombi in this case has been happened after atrial fibrillation started and she has been taking no anticoagulant medicine. The important point which makes this case novel is there wasn't thrombus formation before the patient was in AF in 7 years. According to best of our knowledge, there is no previous case presented as atrial fibrillation associated pace maker lead thrombus in late period after lead implantation. It's important to initiate anticoagulation as soon as the AF is detected, in patients with pacemakers. It is important that thrombus can occur in right chambers of heart because of pacemaker electrodes.

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