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IMAGE IN CARDIOLOGY

A rare aortic wall vegetation

Uma localização rara de vegetação na parede da aorta

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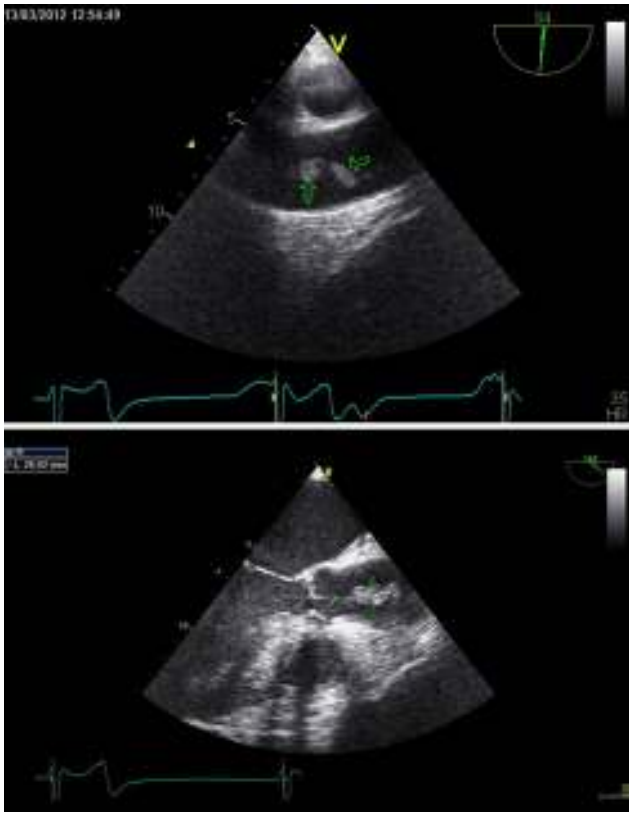
A 69-year-old man was admitted to the emergency room due to acute pulmonary edema. He had no known history of cardiovascular disease. The physical exam was notable for a harsh, grade IV/VI aortic systolic murmur and diffuse lung crackles. A transthoracic echocardiogram showed severe aortic stenosis, with normal biventricular systolic function. Coronary angiography was performed, as aortic valve surgery was envisioned. The next day the patient presented with fever and no other symptoms. Empirical antibiotic therapy was started. Blood cultures were drawn and methicillin-sensitive *Staphylococcus aureus* was identified, prompting a change in antibiotic therapy to vancomycin and gentamicin. Endocarditis was suspected and a transesophageal echocardiogram was performed. The exam showed a 14 mm pedunculated and highly mobile mass attached to the intima, protruding from the posterior wall of the ascending aorta, at the level of the sinotubular junction (Figures 1 and 2). Given the high embolic risk and to avoid the development of a mycotic aneurysm, the case was discussed with the cardiac surgeon and the patient was operated the next day. An inflamed ascending aorta was detected in the operating theater; the mass was excised and the ascending aorta and aortic valve were replaced. The histopathology was notable for aortic endarteritis, with granulocyte infiltration (Figure 3). After the operation, antibiotics were continued to complete an eight-week course. The patient was discharged thereafter. Our case illustrates a very rare location of a vegetation



Figures 1 and 2 Transesophageal echocardiogram showing a 14 mm pedunculated and highly mobile mass attached to the intima, at the level of the sinotubular junction.

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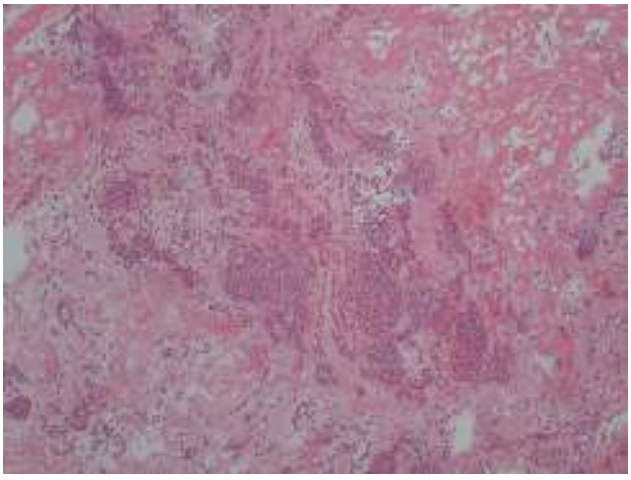

Figure 3 Histopathological study showing granulocyte infiltration.

implanted in the aortic root, probably secondary to intimal trauma from prior coronary catheterization.

Ethical disclosures

Protection of human and animal subjects. The authors declare that no experiments were performed on humans or animals for this study.

Confidentiality of data. The authors declare that they have followed the protocols of their work center on the publication of patient data.

Right to privacy and informed consent. The authors have obtained the written informed consent of the patients or subjects mentioned in the article. The corresponding author is in possession of this document.

Conflicts of interest

The authors have no conflicts of interest to declare.