
Case Reports

Behçet's Disease Presenting as Recurrent Right Ventricular Thrombus

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Abstract

We report the case of a 17-year-old man with Behçet's disease, associated with a recurrent right heart thrombosis and pseudoaneurysm of the abdominal aorta. The patient was admitted to the surgical unit because of malaise, tachycardia, easy fatigability and fever.

The patient had a history of long standing low-grade fever, weight loss, fatigue, long-term headaches and non-specific skin lesions of the lower extremities. One month previously, an echocardiographic examination had revealed a right ventricular mass, thought to be a thrombus in an unusual location. The patient had consequently undergone surgery, and pathologic examination had confirmed the mass to be a thrombus.

When the patient was subsequently re-admitted to the emergency unit of our center with complaints of severe abdominal pain, fever, fatigue, sinus tachycardia and a pulsatile and tender abdominal mass, a right ventricular thrombus and a large pseudoaneurysm of the abdominal aorta were found on echocardiography and angiography, respectively. The patient underwent resection of the aortic aneurysm and aortoplasty and received immunosuppressive and anticoagulation therapy. The thrombus of the right ventricle disappeared 4 months later (*Iranian Heart Journal 2007; 8 (2): 51-55*).

Key words: Behçet's disease ■ cardiac thrombus ■ aortic pseudoaneurysm

Behçet's disease is a multi-systemic vasculitis of unknown etiology. In 1937, Hulusi Behçet, a dermatologist, first described the disease as a triad of oral and genital ulceration and ocular lesions. It is frequent among the Japanese and Mediterranean basin population. Vascular complications are a common component of this disease, but cardiac involvement is very rare. In such cases, known as cardio- Behçet's disease, reported symptoms include thrombus formation in the right atrium and right ventricle, tricuspid regurgitation, coronary

aneurysm and acute myocardial infarction due to coronary artery involvement.^{1,2}

We present a case with recurrent right ventricular thrombus and a large pseudoaneurysm of the abdominal aorta with impending rupture in a 17-year-old boy.

Case Report

A 17-year-old male patient was admitted to the emergency department suffering from malaise, tachycardia, fatigue, low-grade fever, weight loss and prolonged headaches.

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