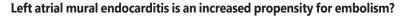
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Introduction: Infective endocarditis is a microbial infection of endocardial surface of the heart and vegetation is the characteristic lesion of the disease. Left atrial mural endocarditis is a condition of rare diagnosis and it may be difficult to find vegetation by standard views in transthoracic echocardiography (TTE). Identifying the mural vegetation not only helps to diagnose infective endocarditis, but also predicts the risk for developing embolism.

Aim: The main aim of this study is to find the prevalence of embolism in patients with left atrial mural endocarditis.

Method: A retrospective, observational study was done from the year 2012 to 2018, in which total of 53 patients with definite diagnosis of infective endocarditis were identified. After the IHEC approval, the data of these patients were collected and analyzed.

Results: Results showed that out of 53 patients five (9.4%) patients had mural vegetation with culture positive infective endocarditis. Among five (9.4%) patients with mural vegetation, three (5.6%) presented with stroke and two (3.7%) developed stroke during hospital stay. Though mural vegetation is not common, but if present it may predict a propensity for embolism. Our results indicate that in patients with left atrial mural endocarditis, the propensity of embolism is more.

Biography

Tamilarasu Kaliappan has completed his MBBS, MD at Dr. MGR Medical University, Chennai, India. He has obtained his Diplomate in National Board in Cardiology at Amrita University, Kochi, India. He has been elected as Fellow in American College of Cardiology (FACC) in 2015. He is currently working as an Associate Professor in the Department of Cardiology, PSG Institute of Medical Science and Research, Coimbatore, India. He is a Life Member in Cardiology Society of India (CSI).

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