

Left Atrial Thrombus After Placement of Watchman Device

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February 22, 2022

Abstract

Atrial fibrillation is an irregular heart rhythm with increased risk of morbidity and mortality. Commonly due to thromboembolism at the left atrial appendage. Guideline therapy for atrial fibrillation is anticoagulation. Alternative treatment includes closure with the Watchman device. We present a case of Watchman device-related thrombus seven months after placement.

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Case

74-year-old male with history of chronic atrial fibrillation presents with 5 days of abdominal pain and dyspnea. 7 months prior, he underwent placement of a Watchman device due to nonadherence with apixaban 5mg twice daily. Transesophageal echocardiogram (TEE) revealed a large thrombus, measuring 2.9 x 1.9 cm, seated on top of the Watchman device (Figure 1). At the time of presentation, he was taking aspirin 325 mg daily. He inadvertently stopped taking aspirin and clopidogrel 2 months earlier than recommended and had a 10-day interruption of aspirin for screening colonoscopy. He was discharged on apixaban 5 mg twice daily and aspirin 325 mg daily. Follow up TEE 4 months later revealed reduced size of thrombus, measuring 0.70 x 0.86cm (Figure 2).

Atrial fibrillation is the most common cardiac arrhythmia that we face, affecting millions of people worldwide. It carries the risk of stroke, especially in those with elevated CHA₂DS₂-VASc score, necessitating use of anticoagulation. In those who risk of bleeding outweighs the benefit, left atrial appendage closure device, such as the Watchman, is a great alternative and has been shown to be noninferior in the PROTECT AF study.² It, however, does carry its own risk such as device-related thrombus.¹

Acknowledgement

I would like to thank Drs. Stephens, Coombes, and Abney for all their effort in assisting in writing this paper. I wish to acknowledge the help provided by Dr. Baljepally, who helped us finalized this project.

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