

INTRA-LUMINAL THROMBUS IN INTERNAL CAROTID ARTERY: PARANEOPLASTIC SYNDROME? A CASE REPORT

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There is an increased risk of stroke in patients with cancer. This increased risk is determined by multiple causes, among which the coagulation disorders associated with malignancy. These disorders can lead to the occurrence of thromboembolic events as paraneoplastic manifestations. The paraneoplastic thromboembolic manifestations are often migratory, increasing the difficulty in the diagnosis. In these cases, the role of non-invasive diagnosis techniques can be decisive in the identification and characterization of arterial thromboembolism in these patients.

We describe a 69 years old male patient, with pulmonary cancer under chemotherapy. The patient presented with aphasia and right motor deficit. Brain TC and the echocardiography were normal. Brain MR showed left medial cerebral artery territory ischemia. Carotid ultrasonography evidenced left internal carotid artery intraluminal thrombus, after what the patient was under anti-coagulation.

Our goal is to alert to the importance of non invasive methodology in the management of stroke patient with cancer, sometimes under chemotherapy, who can have embolic stroke without cardiac source. Vascular arterial ultrasonography can be very useful in the characterization of the embolic source.