中文題目：於低 CHA_2DS_2-VASc 分數病人具高中風風險的超音波發現

英文題目：Low CHA_2DS_2-VASc score with high risk of stroke

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Introduction: Patient with atrial fibrillation (AF) increase risk of thromboembolism and stroke. CHA2DS2-VASc scoring system was used to predicted thromboembolism risk and guide anti-thrombotic therapies in patients with AF. Spontaneous echo contrast (SEC) by echocardiography was considered as a predictor of stroke risk in patients with AF.[1] Here, we present with a patient with a CHA2DS2-VASc score of zero but with SEC by intra-cardiac echocardiography (ICE).

Case report: A 55-year-old man with symptomatic drug-refractory paroxysmal atrial AF was arranged to receive catheter ablation of AF. The CHA2DS2-VASc score is zero and no anticoagulant was prescribed before ablation. AF attacked one day before ablation and spontaneously terminated at the start of general anesthesia for ablation. The ICE revealed SEC, “smoke”, in the both right and left atria in sinus rhythm. Although electricity was converted spontaneously to sinus rhythm, the mechanical function of atria did not completely recover resulted in SEC in both atria by ICE. Ablation procedure was terminated due to high risk of stroke. Although with a CHA2DS2-VASc score of zero, the paroxysmal AF patient has high risk of stroke. The anticoagulant was prescribed to this patient for stroke prevention after discharge.

Discussion: We reported a paroxysmal AF patient with zero of CHA2DS2-VASc score but with high risk of stroke. This clinical finding suggested that some additional risk factors of thromboembolisms may be considered into risk stratification scoring system of stroke in patients with AF, especially in those who have a low CHA2DS2-VASc score, to find AF patients with high risk of thromboembolism.[2]

References:

1. Prognostic implications of left atrial spontaneous echo contrast in nonvalvular atrial fibrillation. Journal of the American College of Cardiology. 1994;24:755-62.
2. Stroke Risk Factors Beyond the CHA2DS2-VASc Score: Can We Improve Our Identification of "High Stroke Risk" Patients With Atrial Fibrillation? The American journal of cardiology. 2015;116:1781-8.