

Abstract

Symptomatic prosthetic valve thrombosis is a complication observed infrequently among patients with bioprosthetic or mechanical heart valves. Among the variety of risk factors, higher rates of prosthetic valve thrombosis have been observed among patients with subtherapeutic anticoagulation. Heart valve surgery or thrombolytic therapy are the mainstay of treatment, with the latter being preferred as an effective alternative to surgery considering the lower procedure related risks. However, thrombolytic therapy itself carries the risk of cerebral thromboembolism among patients with left sided mechanical valve thrombosis which consequently result in poor patient related outcomes. Here we present the case of a patient with mechanical prosthetic mitral valve presenting with prosthetic valve thrombosis due to suboptimal anticoagulation who later on develop an acute ischemic stroke following thrombolytic therapy. Careful assessment of risks related with each treatment modality should be considered on individual case basis to improve the overall patient outcome.