

## Abstract

I describe the case of a 58 year old male with acute limb ischemia and transient neurologic deficit in whom extensive infectious work up and thrombophilic evaluation was negative. Transesophageal echo showed a vegetation attached to mitral valve leaflet though the blood cultures were negative. This is a rare occurrence giving rise to a hypercoagulable state in association with adenocarcinomas. Typically there are cardiac vegetations attached to valvular apparatus without valve destruction. In our patient we diagnosed an adenocarcinoma of lung. This case illustrates a rare atypical presentation of lung malignancy which has to be distinguished from infective endocarditis which has different therapeutic options. When non bacterial thrombotic endocarditis is suspected, it is essential to search for an occult malignancy. Marantic endocarditis or non bacterial thrombotic endocarditis refers to microscopic or large vegetative aggregates of platelets in a previously normal cardiac valves in the absence of a infection in the blood. The diagnosis of non bacterial thrombotic endocarditis needs a high degree of suspicion and judicious use of echocardiogram, looking for micro aggregates on cardiac valves. Treatment consists of systemic anticoagulation in the absence of contraindications which prevents further thromboembolic episodes. Treatment and

control of the underlying malignancy is also a part of management.