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American Journal of Emergency Medicine

journal homepage: www.elsevier.com/locate/ajem**Multiple thromboemboli in Covid-19**

Dear Editor,

I read with great interest the article titled “Abdominal pain in a patient with COVID-19 infection: A case of multiple thromboemboli” by Mahan et al. [1] in The American Journal of Emergency Medicine. The authors reported an interesting novel coronavirus disease (COVID-19) case with venous and arterial thromboembolic disease. There are some important issues that need to be clarified about this case report.

Firstly, the patient was reported to have no respiratory complaints, but her initial examination revealed tachypnea (34 respirations per minute), hypoxemia (pO₂ 87% on room air), tachycardia (112 beats/min) [1]. This seems to be contradictory.

Secondly, the authors stated that chest computed tomography (CT) showed bilateral ground-glass opacities (GGO) consistent with COVID-19 [1]. As can be seen from the CT images, the areas of consolidation accompanying GGO with peripheral location are also clearly observed. Moreover, the authors described a small mobile echogenic thrombus in the right ventricle. However, the authors did not make any declaration regarding the presence of pulmonary embolism. It is important to note this since the findings in the lung parenchyma may also be due to severe PE [2].

Thirdly, the authors stated that chest CT angiography revealed a filling defect in the thoracic aorta consistent with thromboembolism [1]. However, the filling defect in the aorta on CT is compatible with the mural thrombus and it is usually associated with atherosclerosis [3].

Moreover, the aortic mural thrombus is particularly associated with mesenteric, renal or lower extremity arterial thromboembolism [3,4]. The authors should explain how the aortic mural thrombus is associated with COVID-19 rather than atherosclerosis. In addition, the patient presenting with abdominal pain should report that mesenteric and renal artery ischemia is not detected.

Declaration of Competing Interest

None.

References

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