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Infective Endocarditis of Unicuspid -Unicommisural Aortic Valve

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Clinical image description

A 32-year-old man with a history of intravenous heroin use presented with altered mental status, facial asymmetry, and left-sided dense hemiplegia. He was subsequently found to have an acute right middle cerebral artery stroke. Multiple blood cultures on admission grew *Enterococcus faecalis*. A Transesophageal Echocardiogram (TEE) showed a unicuspid- unicommisural aortic valve with thickening suggestive of vegetation, associated with severe regurgitation (Figure A & B). He was treated

with a 6-week-course of intravenous antibiotics based on susceptibilities (Ampicillin and Ceftriaxone). Unicuspid unicommissural aortic valve is an extremely rare congenital anomaly with a prevalence of 0.02% [1]. It is usually associated with severe aortic stenosis or regurgitation and often requires surgical correction [2]. Infective endocarditis involving a unicuspid aortic valve is even rarer; there have been only 2 cases reported in the literature to our best knowledge [3,4].



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Figure 1A: Unicuspid aortic valve thickening seen on parasternal long-axis view of TEE

Figure 2: Unicuspid aortic valve thickening seen on parasternal short-axis view of TEE.

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