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Complications of infectious endocarditis, such as a mycotic aneurysm in the coronary artery, are rare. A 56-year-old man suffered from right hemiplegia and dysphasia. One week before, he experienced arthralgia and intermittent fever. Computed tomography (CT) of the brain showed a left frontal intracerebral haemorrhage. Haemolytic anaemia, hyperbilirubinaemia, thrombocytopaenia and bacteraemia with staphylococcus aureus were found. Transthoracic echocardiography revealed moderate mitral regurgitation with a 1.5 cm floating vegetation at the anterior mitral leaflet. After antibiotic treatment for four weeks, coronary angiography was performed for preoperative evaluation of mitral valve surgery. Multiple mycotic aneurysms of the right coronary artery (RCA) were found (**Figure 1A, Moving image 1, Moving image 2)**. The patient received mitral valve repair, arterial endarterectomy on the RCA, resection and total ligation of the proximal RCA, and coronary artery bypass grafting to the inferior interventricular artery and posterior lateral artery. Pathology showed atherosclerotic change and suppurative necrotic tissue around the coronary artery with neutrophil infiltration under Gram stain (Figure 1B). The patient recovered well after surgery except for some neurological deficit with slow response.

Conflict of interest statement

The authors have no conflicts of interest to declare.

Supplementary data

Moving image 1. Left anterior oblique cranial view of the right coronary artery.

Moving image 2. Lateral view of the right coronary artery.



Figure 1. Images of coronary angiogram and pathology. *A*) Multiple mycotic aneurysms of the right coronary artery (white arrows). *B*) Pathology of suppurative necrotic tissue around vessel with Gram stain: neutrophil infiltration (black arrows).

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