INTRODUCTION

Rheumatic heart disease is a systemic immune process that is Sequelae to a beta- hemolytic streptococcal infection of the pharynx [1]. It is a sequel of acute rheumatic fever, which is which is usually a disease of poverty associated with overcrowding, poor sanitation, other social determinants of poor health [6]. It is the result of valvular damage caused by an abnormal immune response to group A streptococcus infection [5]. It is one of the common heart diseases. RHD is a chronic heart condition caused by rheumatic fever that can be prevented and controlled [2]. Rheumatic fever is still a leading cause of heart disease and, consequently [4]. Rheumatic fever is caused by a preceding group of A streptococcal infection. Autoimmune disease triggered by streptococcus pyogenes [5]. Streptococcus pyogenes bacteria the trigger for episodes of acute rheumatic fever (ARF). It is caused by an episode or recurrent episodes of ARF, where the heart has become inflamed. The normal blood flow is interrupted through damaged valves and the heart valves may be stretched and/or scarred, stretched valves that do not close properly and may cause backward blood flow, or scarred valves may not opening properly due to blockage. It affects functionality of heart.
CT scan of brain showing broca's aphasia

IV twice a day, Injection optineuron 1 ample in normal saline IV once for the patient was injection Levipil 500 mg in 100 ml normal saline.

hemoglobin 14.2 gm/dl, and TWBC 7400/cmm. The therapy followed this test it was found that the patient is suffering from broca's aphasia. The most common cause of Broca's aphasia is a stroke involving the dominant inferior frontal lobe or Broca's area. A stroke in Broca's area is usually due to thrombus or emboli in the middle cerebral artery. Arterial pathways in the frontal lobe, basal ganglia, cerebellum and contralateral hemisphere. As a result of a lesion in Broca's area, there is a breakdown between the working memory and language. The patient had also had a bedside language assessment, based on this test it was found that the patient is suffering from brocas aphasia. The laboratory values are blood urea 34 mg/dl, serum creatinine 0.88 mg/dl, serum uric acid 6.1 mg/dl, serum calcium 9.6 mg/dl, hemoglobin 14.2 gm/dl, and TWBC 7400/cmm. The therapy followed for the patient was injection Levipil 500 mg in 100 ml normal saline IV twice a day, Injection optineuron 1 ample in normal saline IV once a day, Injection Lupinox 0.4cc subcutaneous twice a day, injection Pipitas 4.5 gm in 100 ml normal saline IV trice a day, injection Febril 75 mg once daily in the morning, tablet Storvas 40 mg at night time, tablet Acitrom 2 mg once during night time, injection Mannitol 100 ml trice a day, tablet Dytor plus at morning time, Injection Paracetamol 1 gm IV twice daily, IV fluids 100 ml normal saline and RL 100 ml/hr.

DISCUSSION
In present case study, the patient was admitted with slurring speech, decreased activity since 16 days. Previously at the age of 15 years he was diagnosed as Marfans syndrome sever MR, sever AR, rheumatic heart disease. He was undergone a double value replacement surgery. After the surgery, the doctors suggested to continue the medication for at least 8 months i.e. Tab.Lasix 40 mg twice a day, Tab.Ramipril 5 mg once a day and Tab.Acitrom 2 mg once a day. But the patient had neglected the medication and took only for 3 months and discontinued. Tab.Ramipril which is an angiotensin converting enzyme inhibitor, used for the patients who suffered from heart problems, to improve their condition. It lowers blood pressure and increase the oxygen supply, blood supply to the heart. Tab.Acitrom (acenocoumarol) is which is an anticoagulant used in the treatment and prevention of abnormal blood clots. Acenocoumarol does not dissolve the blood clots that has already formed but may prevent it from becoming larger and leading to more serious problems. Based on the bedside language assessment test, it was found that the patient is suffering from broca's aphasia. The most common cause of Broca's aphasia is a stroke involving the dominant inferior frontal lobe or Broca's area. A stroke in Broca's area is usually due to thrombus or emboli in the middle cerebral artery. Arterial pathways in the frontal lobe, basal ganglia, cerebellum and contralateral hemisphere. As a result of a lesion in Broca's area, there is a breakdown between one's thoughts and one's language abilities. Maybe due to the discontinuation of anticoagulant, it leads to the development of clot in the brain which further complicated as aphasia condition in the patient. Due to broca's aphasia, the patient speech was markedly diminished and there was a loss of normal grammatical structure. The patient had also experienced interjectional speech where there was a long latency and the words that are expressed are produced as if under pressure.

CONCLUSION
Rheumatic heart disease is autoimmune disease triggered by streptococcus and also likely inherited in a multifactorial manner, which is caused by multiple genes interacting with each other and with environmental factors. If left untreated it may leads to sever complications such as heart failure. Due to non adherent medication also leads to severe complications in cardiac diseases because of insufficient blood supply to the brain leads to the formation of clots in brain and damages the brain cells.

BIBLIOGRAPHY

Figure 1: CT scan of brain showing broca's aphasia