Coronary evaluation for PPVI: 2D vs 3DRA vs CTA/MRI





Dr. Francisco Garay G. Department of Pediatric Cardiology and Respiratory Diseases. Pontifical Catholic University of Chile.



- Catastrophic reported cases at the initial PPVI experience.
- 5% coronary artery compression.
- 71% patients with coronary artery compression had abnormal CA anatomy.
- Tetralogy of Fallot and TGA.

Morray. Circ Cardiovasc Interv. 2013



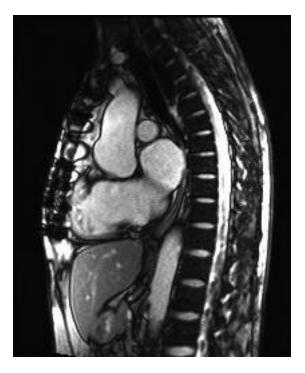






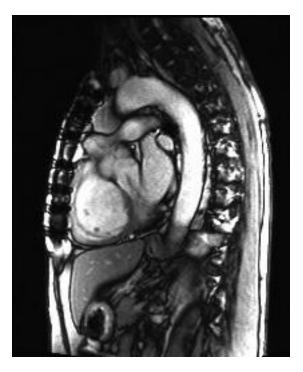


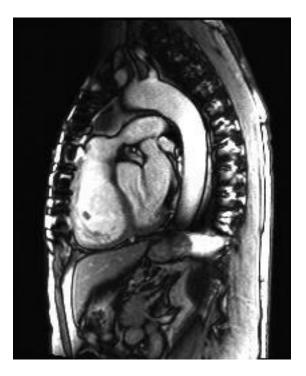




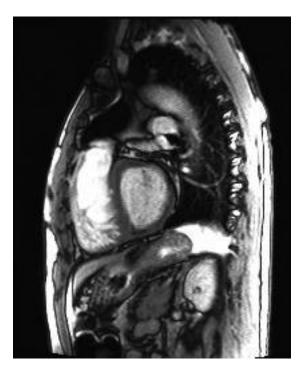


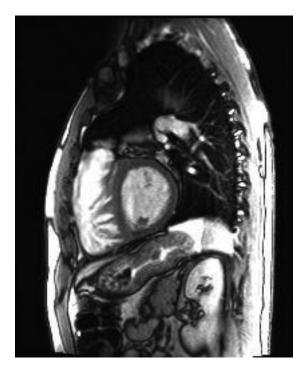


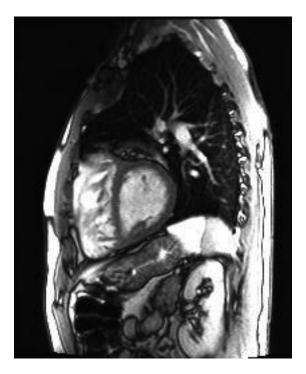




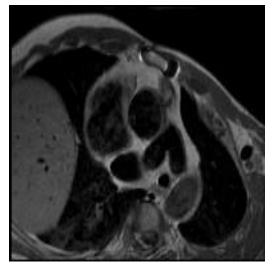








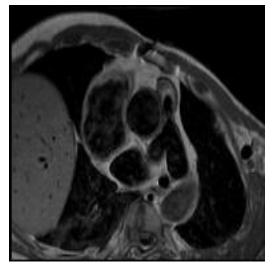
aortic rooth short axis T1 mapping







aortic rooth short axis T1 mapping







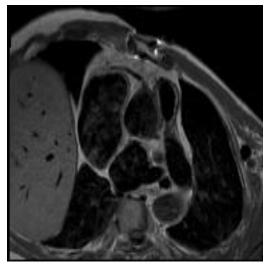
aortic rooth short axis T1 mapping







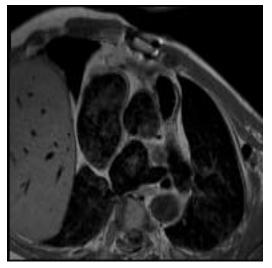
aortic rooth short axis T1 mapping







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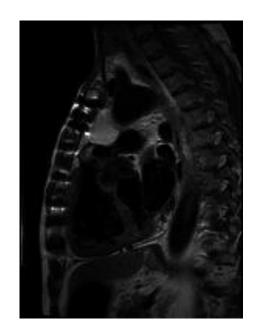






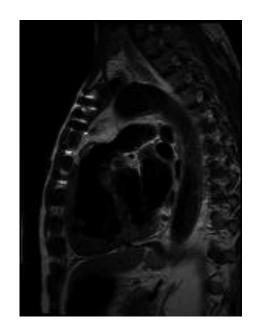






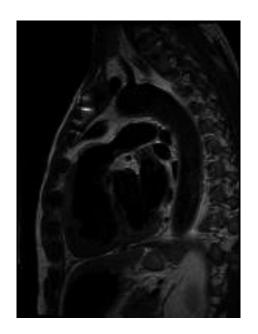














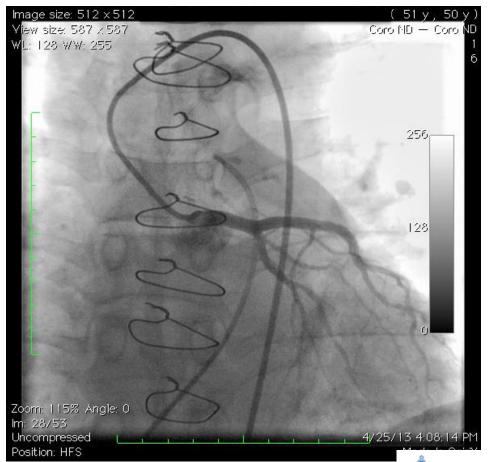


- Since no previous imaging technique 100% predicts or rule out the coronary artery compression occurrence.
- A dynamic coronary compression test is necessary during PPVI.





Traditional angiography for coronaries evaluation.







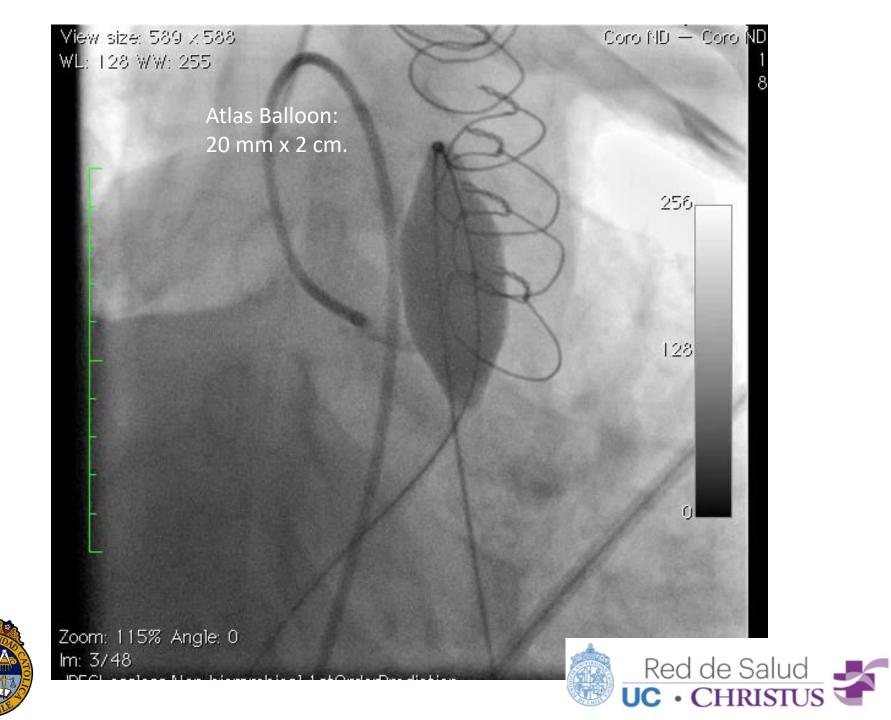
Traditional angiography for coronaries evaluation.

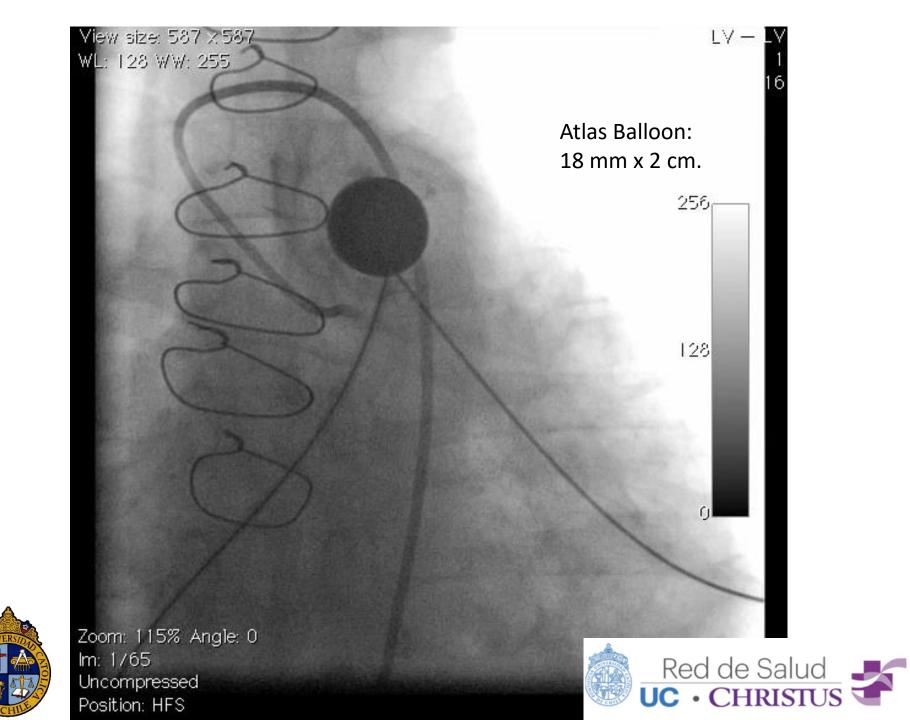


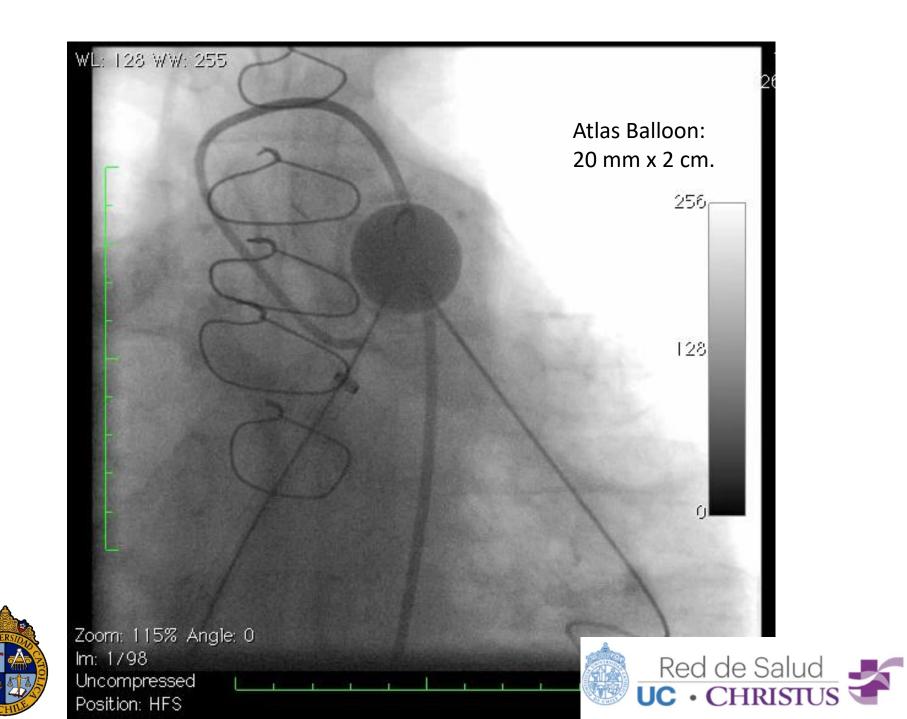


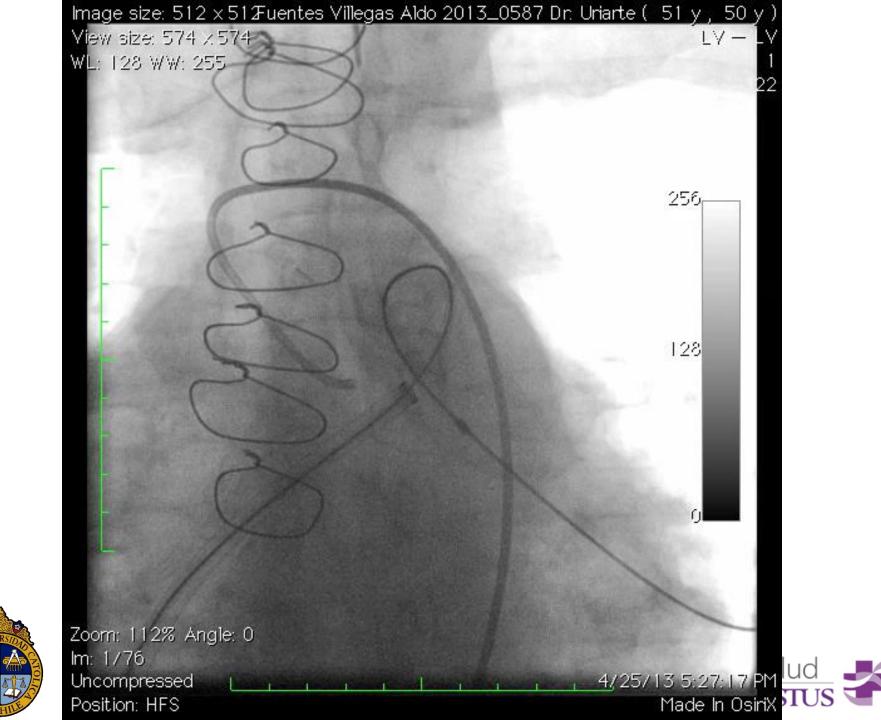


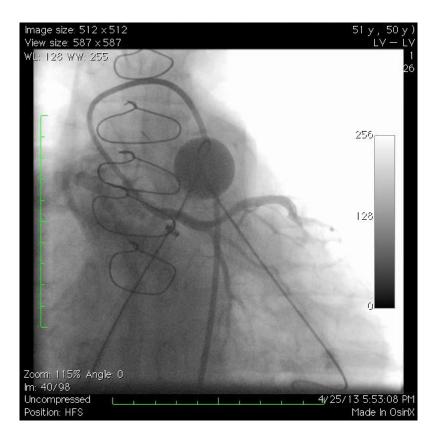


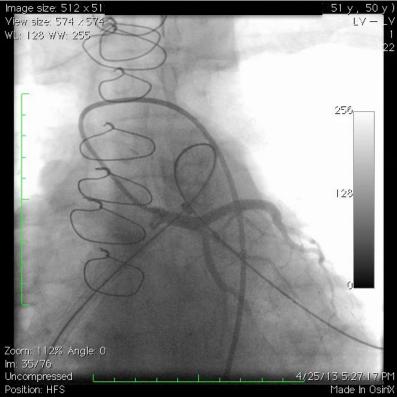








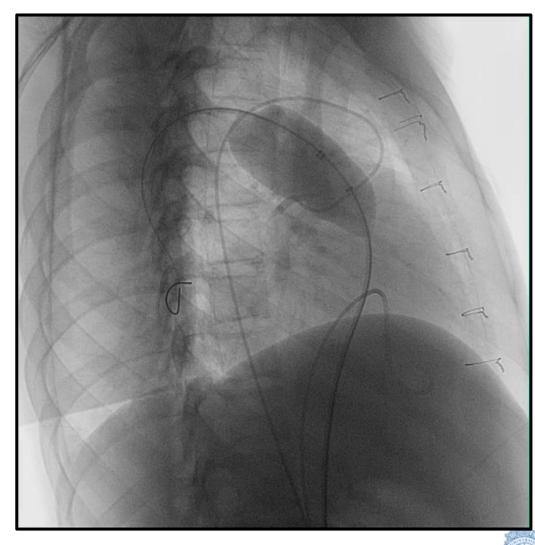








3DRA for coronaries evaluation.



Useful angiographic information from different views.

High resolution images.







Multiple views.

Comprehensive anatomical evaluation.

Acceptable resolution.

Cath lab with 3DRA

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Summary

- Coronary dynamic compression test must to be performed always no matter the MRI or CT previous information.
- Coronary compression test can be done with conventional angiography obtaining the best resolution imaging but needing more adquisitions and injections.
- Coronary compression test can be done with 3DRA obtaining a more comprehensive anatomic assessment of proximal LCA with one adquisition. Images are acceptable.
- When doing 3DRA; "look at the 3D and the RA"