

Imagerie des ANOCOR

Place de la coronarographie (IVUS - OCT- FFR)

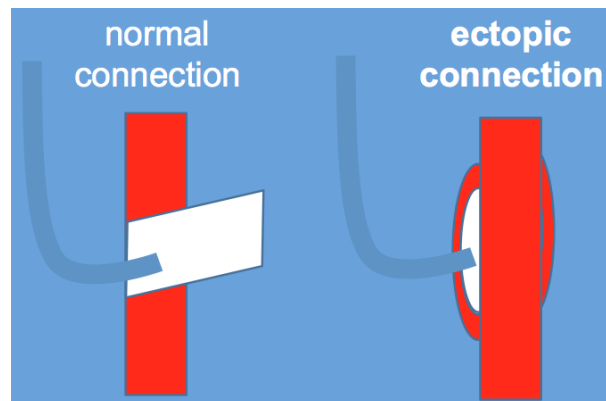
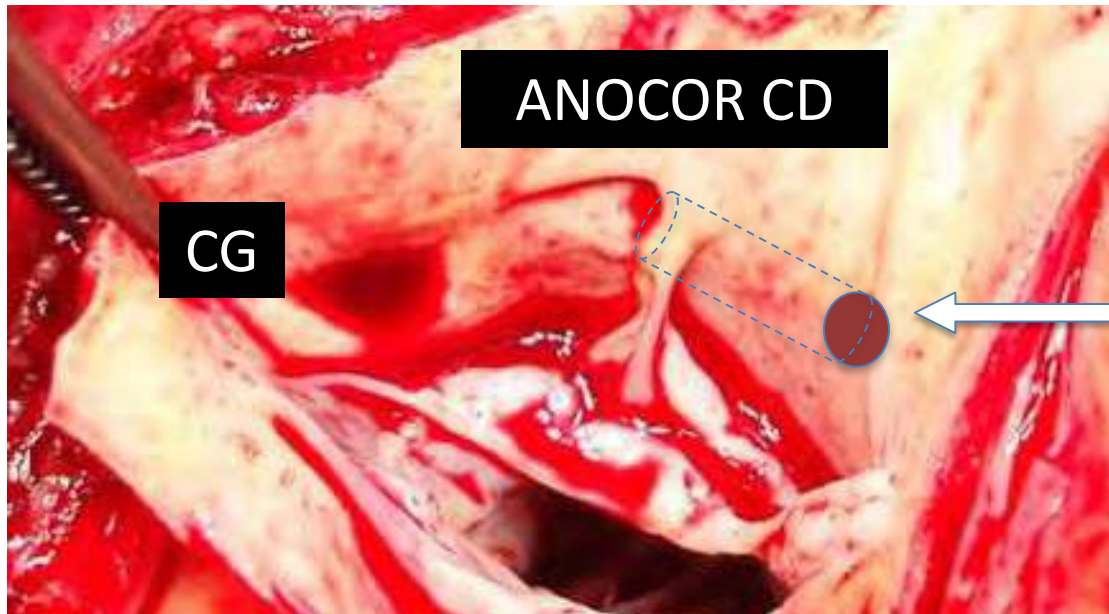
Xavier Halna du Fretay (Paris, Saran) pour le groupe ANOCOR



16 mars 2018



Artère coronaire droite ectopique





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journal homepage: www.elsevier.com/locate/ihj



Original Article

Coronary intervention in anomalous origin of the right coronary artery (ARCA) from the left sinus of valsalva (LSOV): A single center experience



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Anitha Lakshmanan ^b, Balaji Pakshirajan ^a, Ramkumar Solirajaram ^c,
Jaishankar Krishnamoorthy ^c, Ezhilan Janakiraman ^c,
Ulhas M. Panduranghi ^c, Latchumanadhas Kalidoss ^c,
Mullasari Ajit Sankaradas ^d

Table 1 – Summary of 17 cases of PCI in Anomalous RCA originating from LSOV. The type of Take off, sequence of catheter tried and the successful catheter for engagement presented.

Patient no	Type of take off	Sequence of catheters	Successfully cannulated catheter	Amt of contrast (ml)	Fluoro time
1	A	JR 3.5,AR2; AL1; JL 4.0; JL 5.0	JL 5.0	210	17.5
2	C	JR 3.5; AR2; AL1	AL 1	120	12.2
3	B	JR 3.5; AR 2.0; AL 1; JL 4.0; JL 5.0; EBU 3.0	EBU 3.5	320	63.3
4	C	JR 3.5; AR 2.0; AL 1.0; JL 5.0; AL 2.0	AL -2	220	17.3
5	A	JR 3.5; AL 1.0; JL 4.0	JL 4.0	130	12.2
6	A	JR 3.5; JL 4.0; JL 5.0	JL 5.0	150	13.5
7	C	JR 3.5; AR 2; JL 5.0; AL 1	AL 1	200	17.8
8	B	JR 3.5; AR 2.0; AL 1; JL 5.0; EBU 3.5	EBU 3.5	280	23.8
9	A	JR 3.5; AR 2; AL 1; JL 4.0; JL 5.0	JL 5.0	270	22.5
10	C	JR 3.5; AR 2.0; JL 5.0; AL 1	AL1	180	15.4
11	C	JR 3.5; AR 2.0; AL1; AL 2.0, JL 4.0	JL 4.0	300	51.3
12	A	JR 3.5; AL 1; JL 4.0	JL 4.0	150	12.5
13	B	JR 3.5; AR 2.0; AL 1, JL 4.0	JL 4.0	180	21.5
14	A	JR 3.5; AL 1; JL 4.0; JL 5.0	JL 5.0	200	17.4
15	A	JR 3.5; JL 4.0; JL 5.0	JL 5.0	170	14.2
16	C	JR 3.5; AR 2.0; JL 5.0; AL 1	AL 1	180	15.6
17	A	JR 3.5; AL 1; JL 4.0; JL 5.0	JL 5.0	200	15.7

Rotation horaire du cathéter placé dans le tronc commun

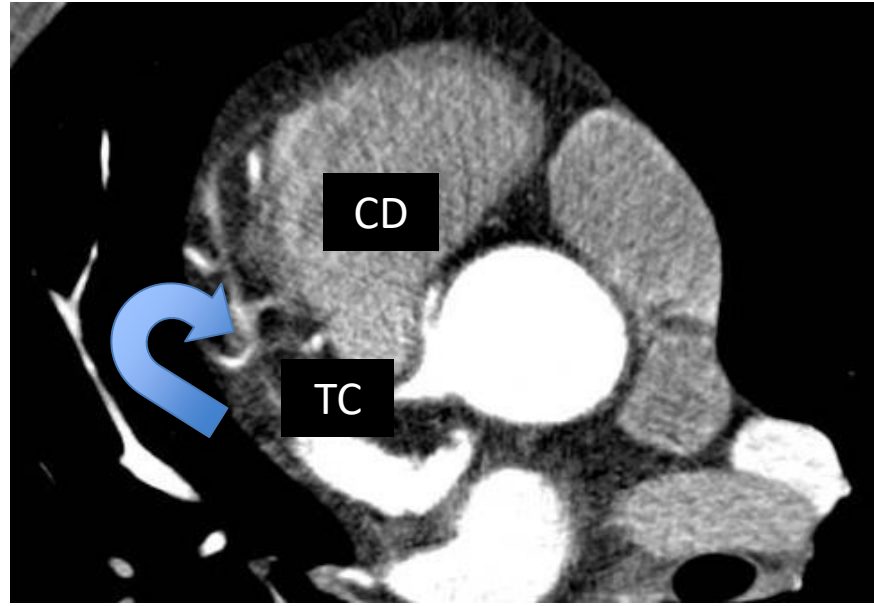
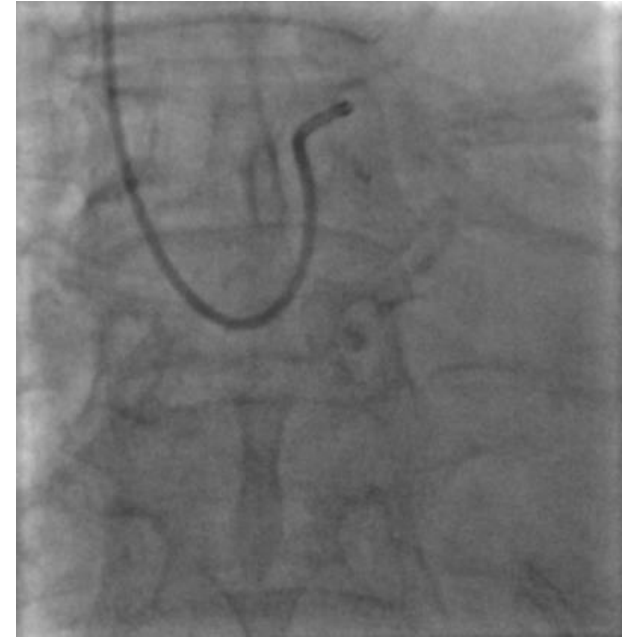
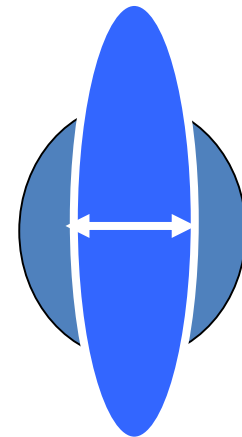
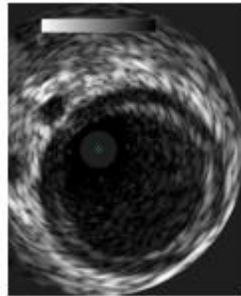
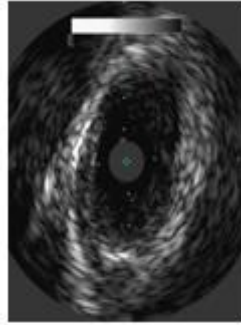


Image inversée du scanner coronaire

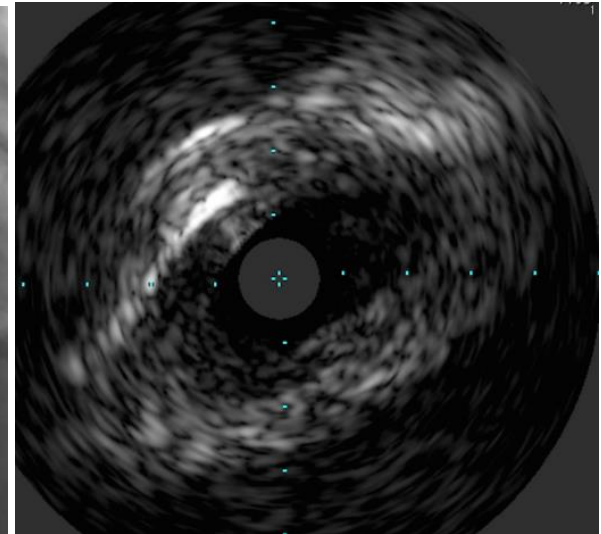
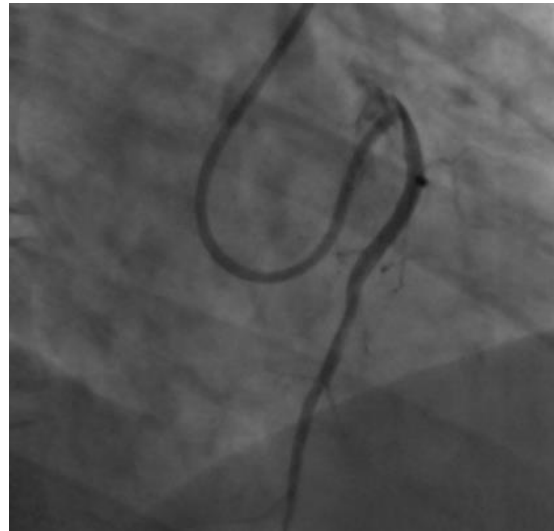




Vue dans le plus grand axe

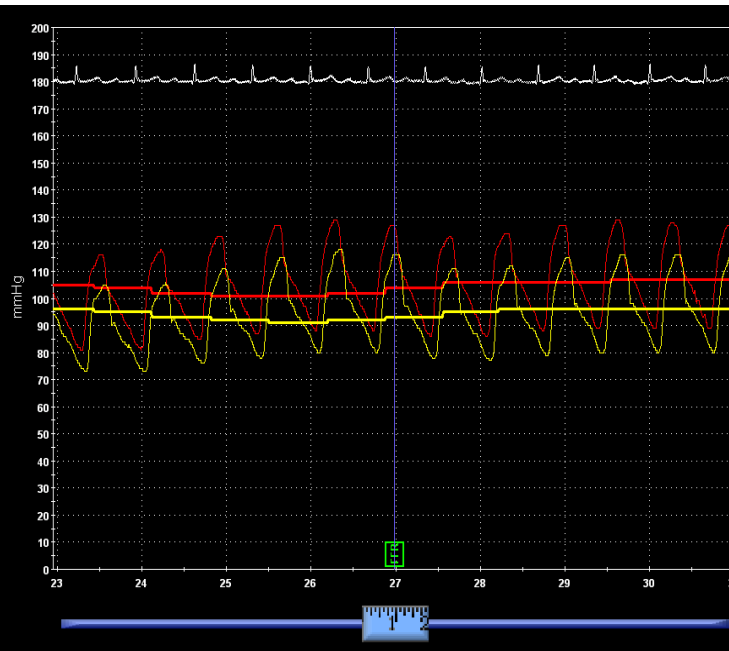
Vue dans le plus petit axe

FFR



Durée de lecture	
0:27	
FFR	0,89
Pd/Pa	0,89
Pa:iPa	104:127
Pd:iPd	93:116
HR	88

Liste des prises	FFR
14:58:01	0,96
15:00:04	0,89



Injection sélective ?

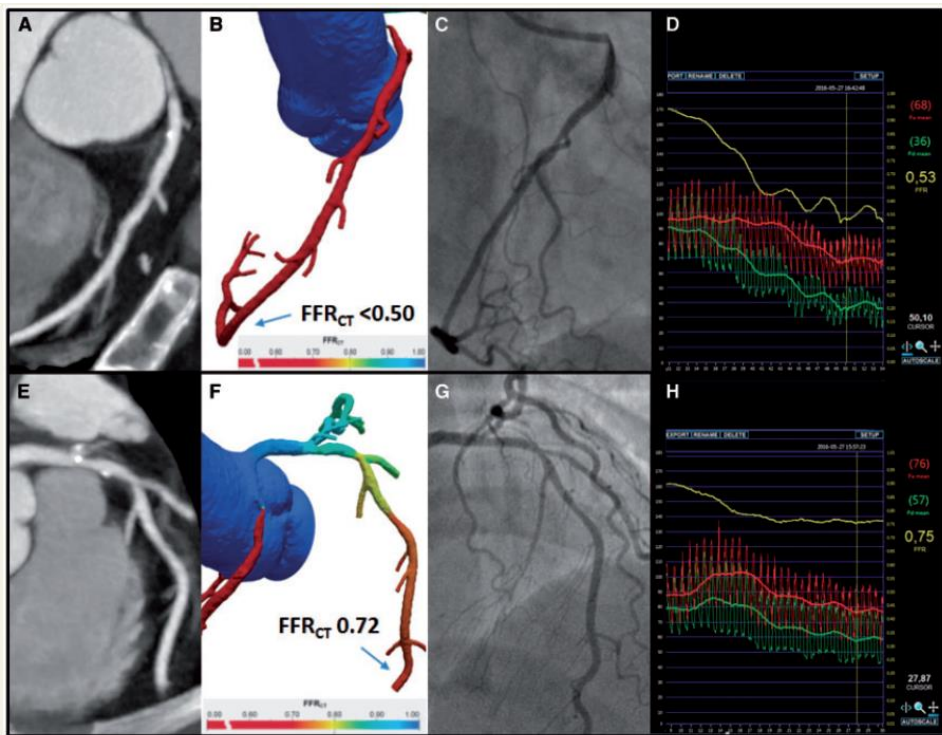
Nature dynamique de la réduction de calibre ostiale ?

CARDIOVASCULAR FLASHLIGHT

doi:10.1093/eurheartj/ehw542
 Online publish-ahead-of-print 7 December 2016

Non-invasive FFR_{CT} revealing severe inducible ischaemia in an anomalous right coronary artery

Frederik Maria Zimmermann^{1,2}, Yuhei Kobayashi¹, William L. Mullen³, and William Fuller Fearon^{1*}



318_bi

Patient ID: A21465572545

CT Study Date: 01/16/2012

Birth Date: 04/02/1962

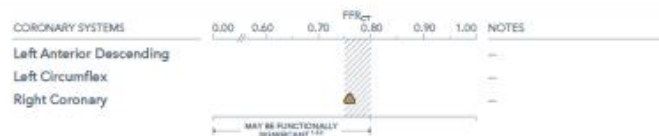
Referring Physician: Not provided

HeartFlow ID: BHH-170726-JKBL

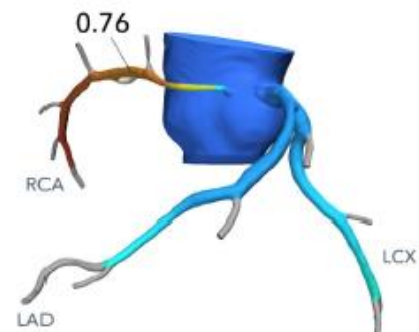
Institution: Clinical - Bichat Hospital

OVERVIEW

FFR_{CT} is ≤ 0.80 and may indicate functional significance.^{1,2,3}



OVERVIEW



FFR_{CT} values are specified distal to modeled stenoses > 30%.

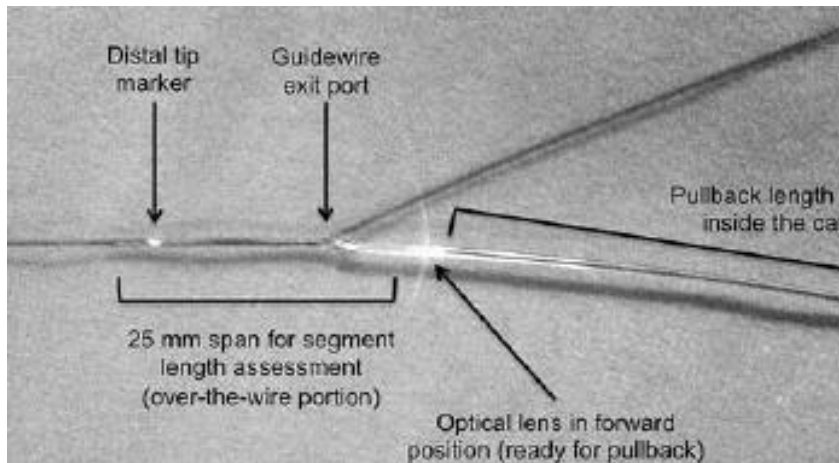
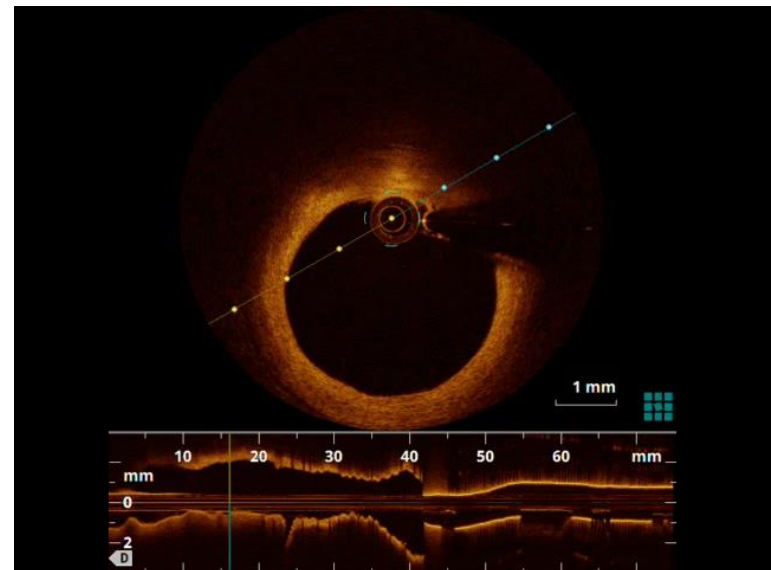
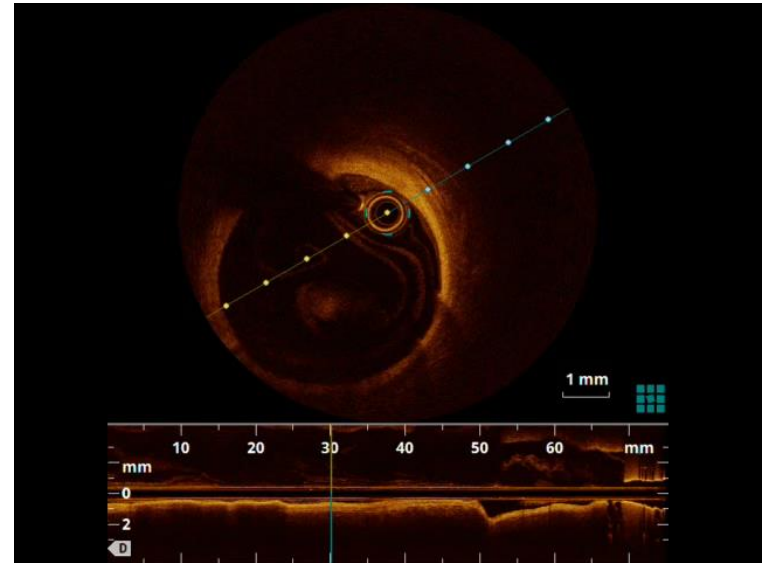


OCT

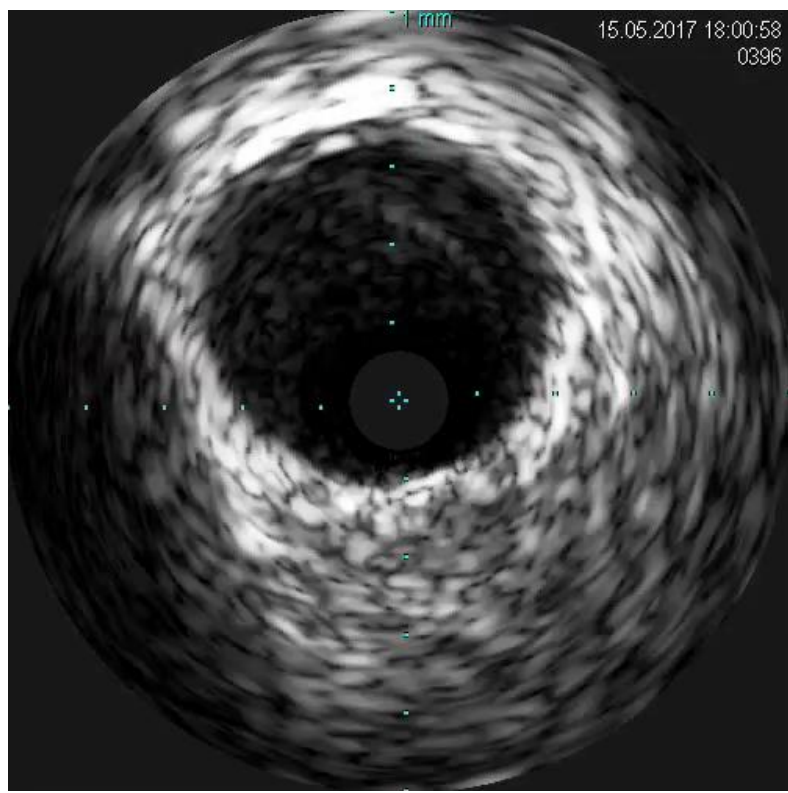
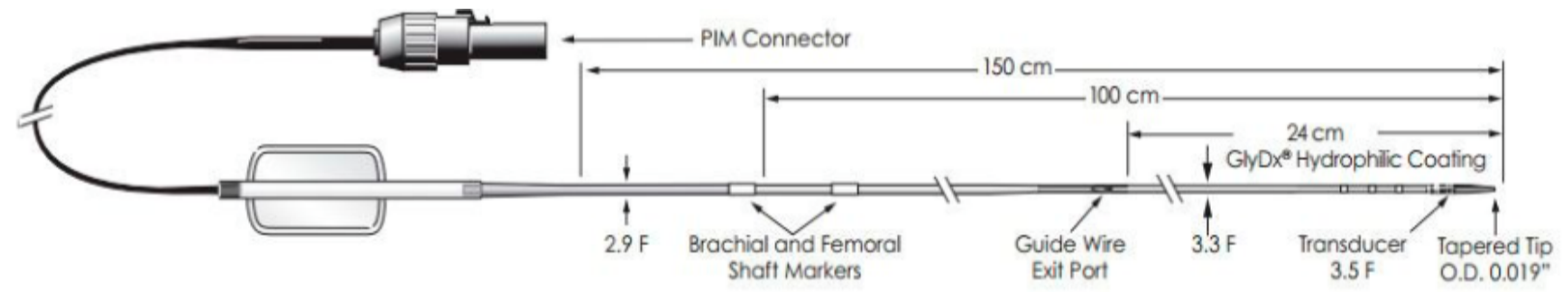
Ostium difficile à analyser

Injection semi sélective

Franchissement parfois difficile



IVUS



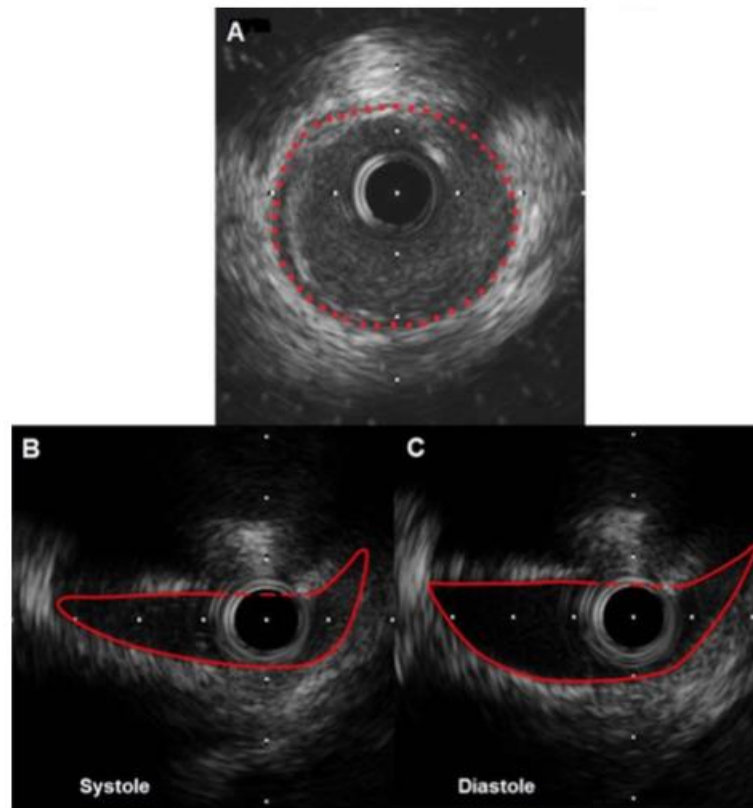
CORONARY ARTERY DISEASE

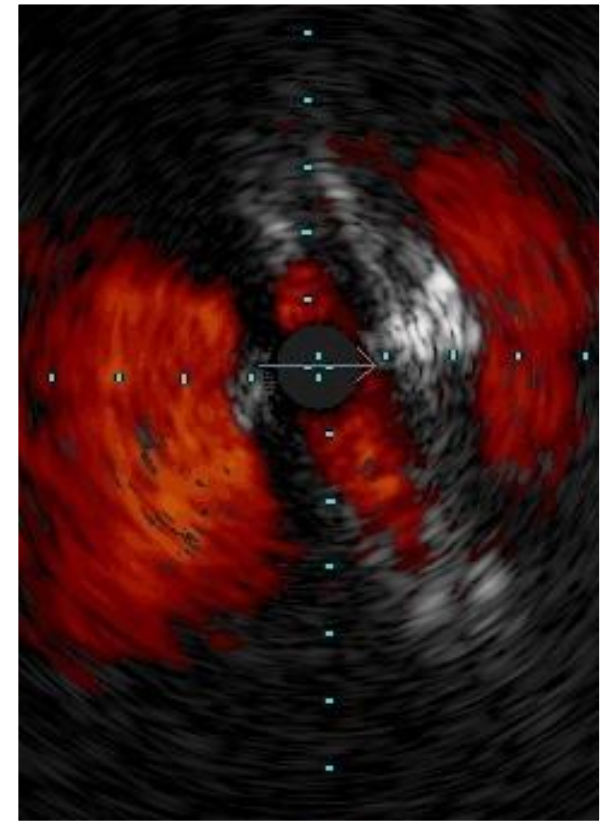
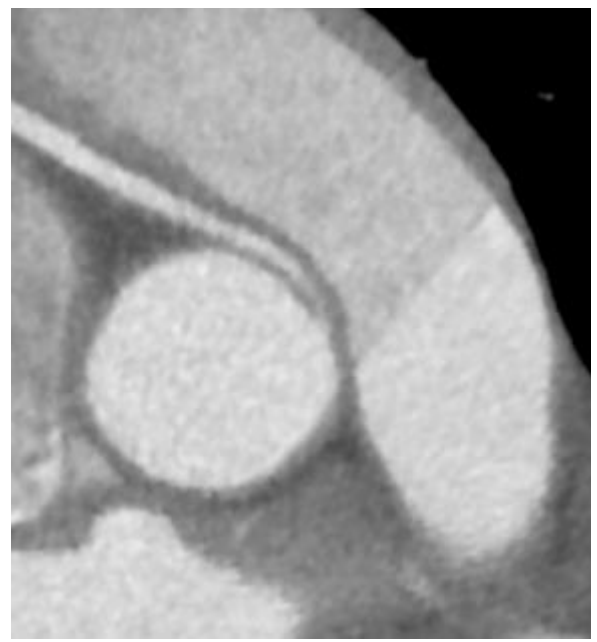
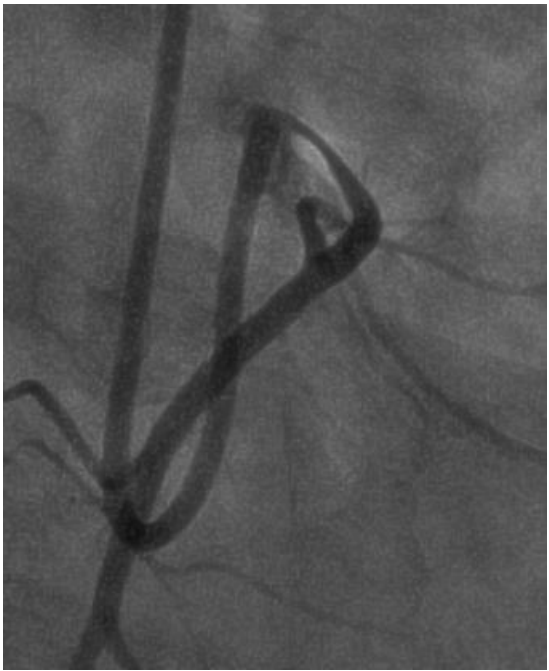
Editor's Choice

Origin of the Right Coronary Artery from the Opposite Sinus of Valsalva in Adults: Characterization by Intravascular Ultrasonography at Baseline and After Stent Angioplasty

Paolo Angelini,^{1,2*} MD, Carlo Uribe,² MD, Jorge Monge,² MD, Jonathan M. Tobis,³ MD, MacArthur A. Elayda,⁴ MD, PhD, and James T. Willerson,¹ MD

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Conclusion

La coronarographie pour les ANOCOR

- Difficultés techniques fréquentes
- Evaluation de la connexion proximale et du lit distal
- Technique d'imagerie complémentaire (IVUS)
- Premier abord avant un geste thérapeutique éventuellement par angioplastie