

Recommendation Table 25 — Recommendations for sudden cardiac death prevention in patients with coronary anomalies

Recommendations	Class ^a	Level ^b
Diagnostic evaluation		
Cardiac stress imaging during physical exercise is recommended in addition to cardiopulmonary exercise test in patients with anomalous aortic origin of a coronary artery with an interarterial course to confirm/exclude myocardial ischaemia. ⁵⁸⁷	I	C
Cardiac stress imaging during physical exercise is recommended in addition to cardiopulmonary exercise test after surgery in patients with anomalous aortic origin of a coronary artery with a history of aborted CA.	I	C
Treatment		
Surgery is recommended in patients with anomalous aortic origin of a coronary artery with CA, syncope suspected to be due to VAs, or angina when other causes have been excluded. ^{585,586,588}	I	C
Surgery should be considered in asymptomatic patients with anomalous aortic origin of a coronary artery and evidence of myocardial ischaemia or abnormal aortic origin of the left coronary artery with high-risk anatomy. ^{c,585,586,588}	IIa	C

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CA, cardiac arrest; VA, ventricular arrhythmia.

^aClass of recommendation.

^bLevel of evidence.

^cHigh-risk anatomy is defined as interarterial course, slit-like shaped orifice, high orifice, acute-angle take-off, and intramural course and its length.