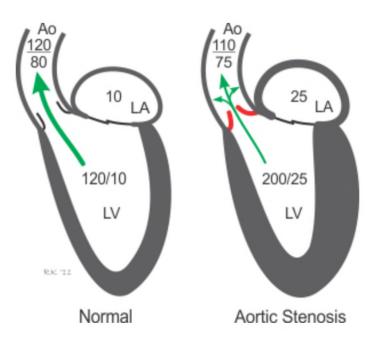
# INVASIVE HEMODYNAMICS ASSESSMENT OF AORTIC STENOSIS

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### ROLE OF LHC IN AORTIC STENOSIS

- 1) Perform when discrepancy between echo findings and patient's symptoms
- 2) Measure gradient across aortic valve and calculate aortic valve areas
- 3) Identify level of obstruction

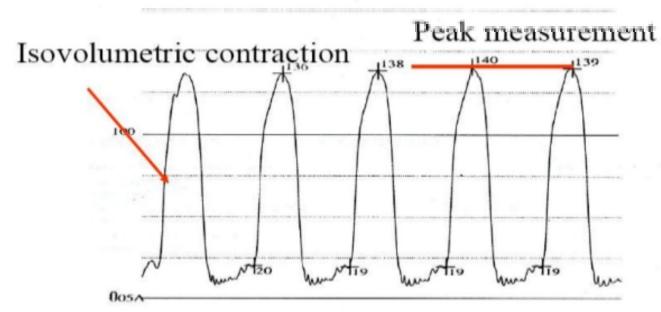


#### **AV STUDY METHODS**

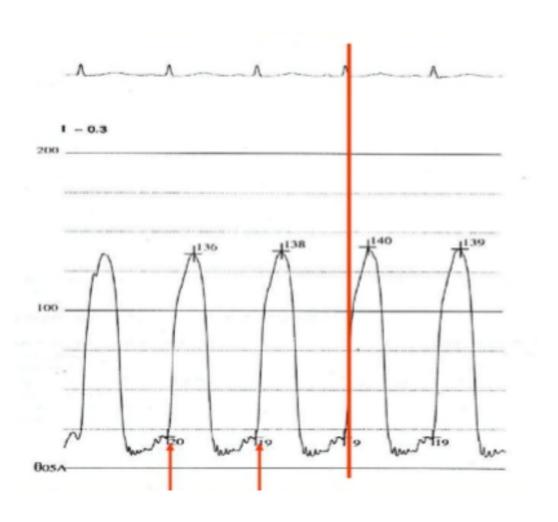
METHOD	EASE OF USE
PULLBACK	+++++
FEMORALSHEATH	+++++
DOUBLE ARTERIAL PUNCTURE	***
PIG TAIL- DOUBLE LUMEN	+++
TRANSEPTAL	++

#### **LHC BASICS**

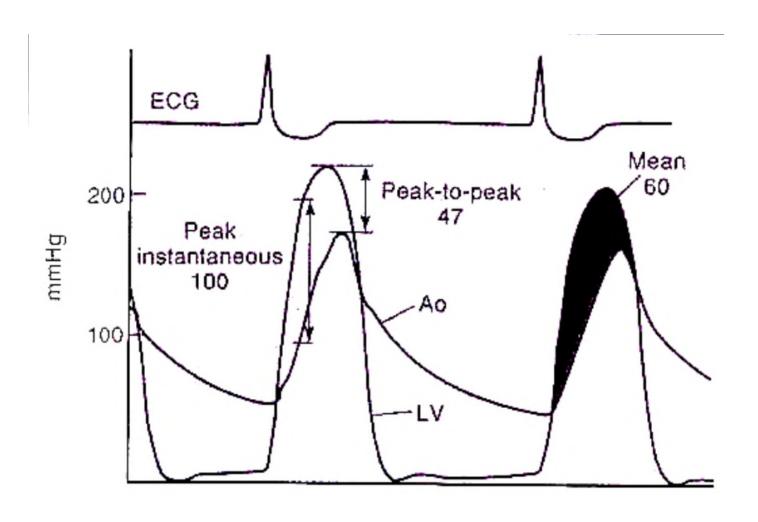




#### **LHC BASICS**



#### AV GRADIENT MEASUREMENTS



### AORTIC VALVE GRADING

CLASSIFICATION	MEAN PRESSURE GRADIENT (MM HG)	AORTIC VALVE AREA (CM²)
Normal	< 10	3.0 to 4.0
Mild	10 to 19	1.5 to 2.9
Moderate	20 to 39	1.0 to 1.4
Severe	≥ 40	< 1.0

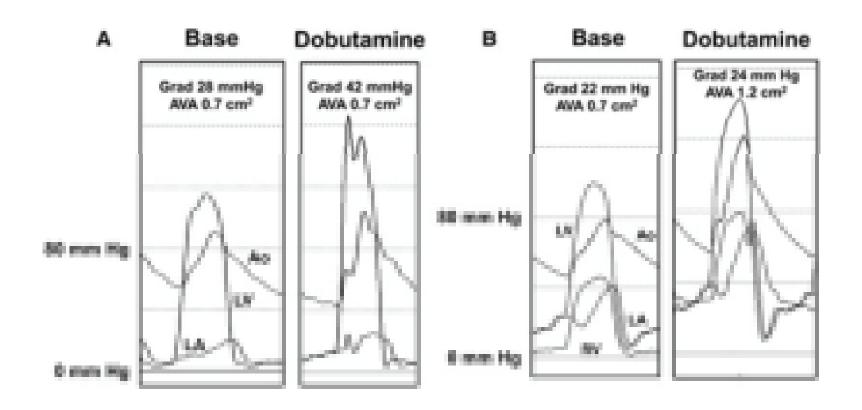
#### **AVA EQUATIONS**

#### Gorlin Equation

Aortic 
$$(C.O.L/min*1000) / (SEP_{sec/beat}*_{heart rate})$$
  
Valve =  $44.5* \sqrt{mean gradient}$ 

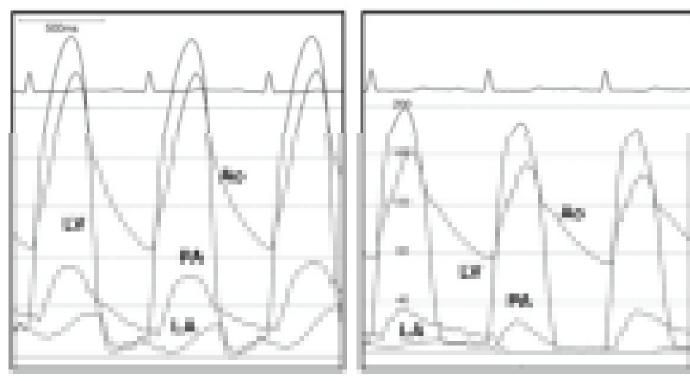
Valve Area = 
$$\frac{C.O. (L/min)}{\sqrt{peak to peak pressure gradient}}$$

### LOW OUTPUT LOW GRADIENT AORTIC STENOSIS EVALUATION



## PARADOXICAL LOW GRADIENT AORTIC STENOSIS WITH NORMAL LVEF

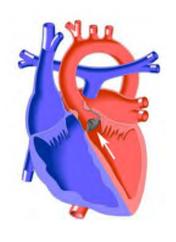


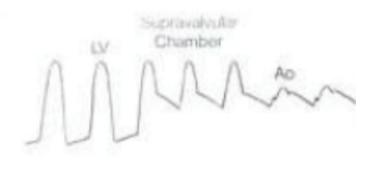


Gradient 32 mm Hg AWA 0.9 cm<sup>2</sup>

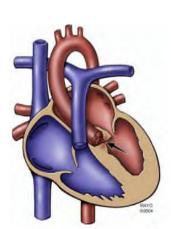
Gradient 45 mm Hig AVA 9.9 cm<sup>2</sup>

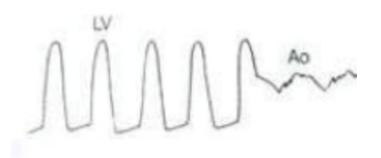
### LOCATION OF OBSTRUCTION



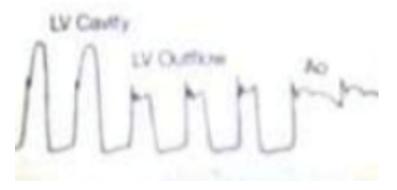






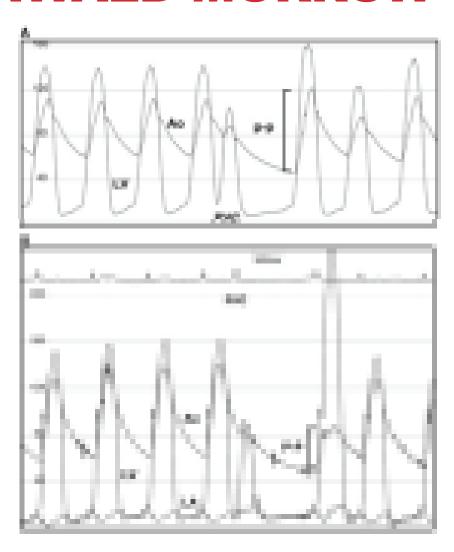


Valvular stenosis

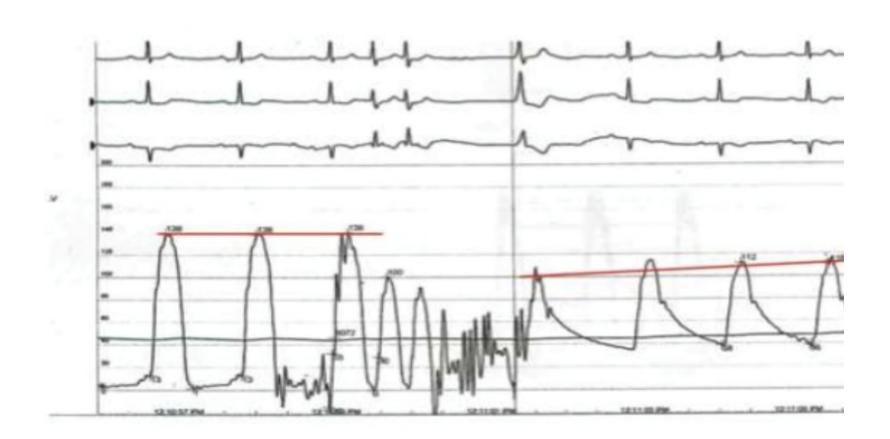


Subvalvular stenosis

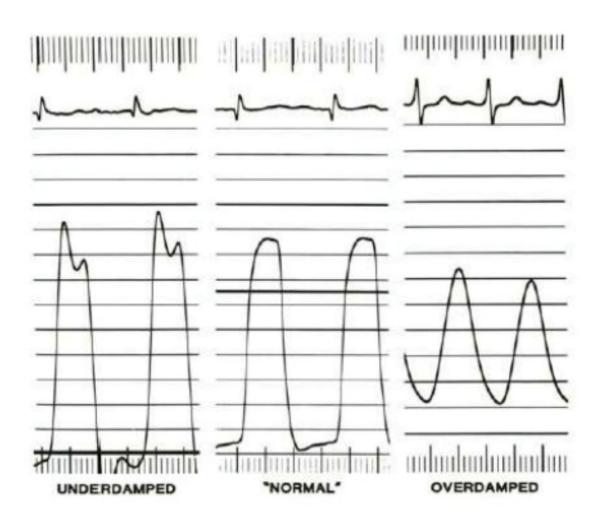
#### BROCKENBROUGH-BRAUNWALD-MORROW SIGN



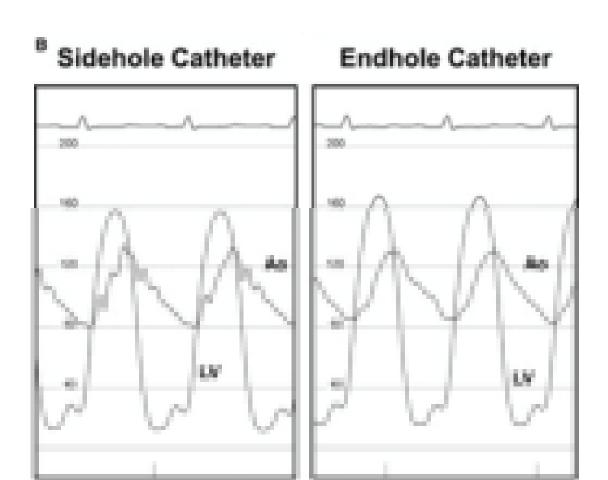
#### **ARTIFACTS**



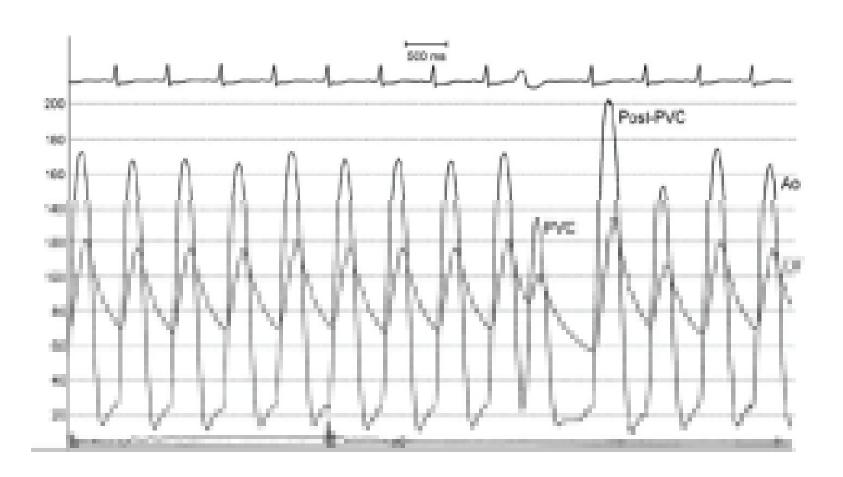
#### **DAMPENING**



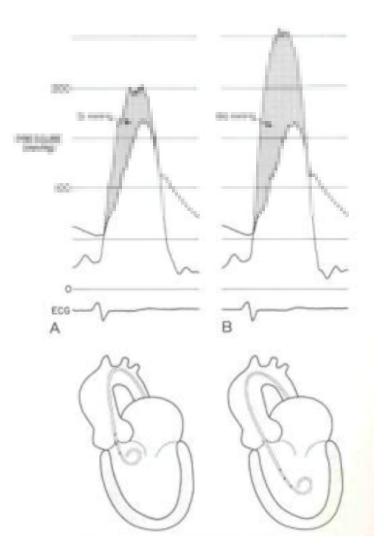
#### **DAMPENING**



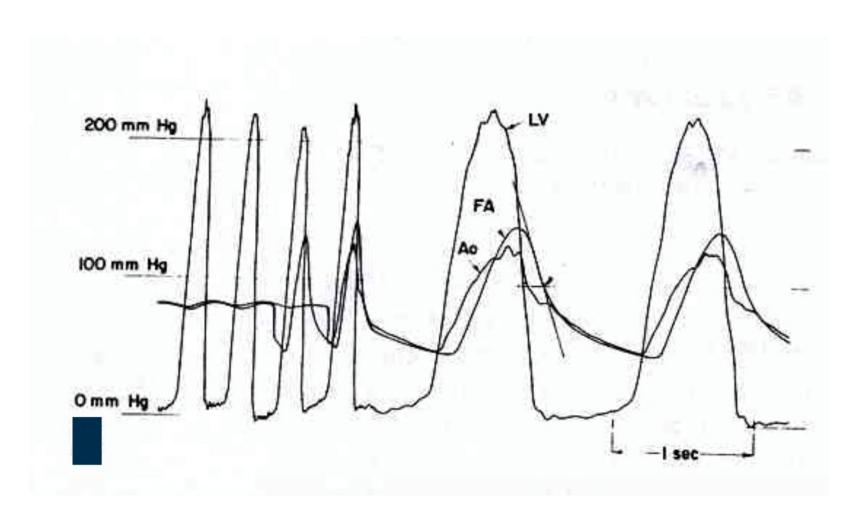
#### **PVC GRADIENTS**



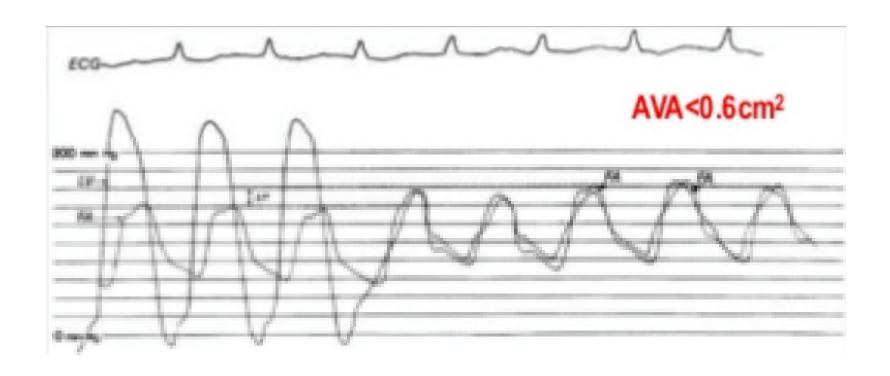
#### **IMPROPRE POSITION**



#### PERIPHERAL AMPLIFICATION



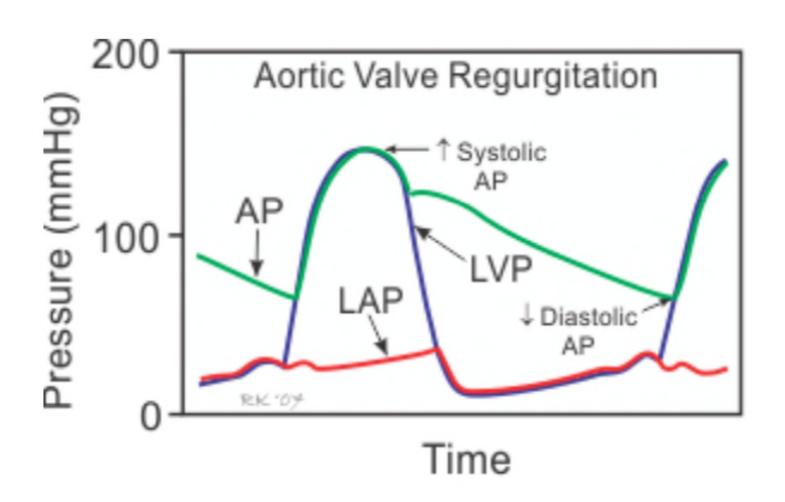
#### **CARABELLO SIGN**



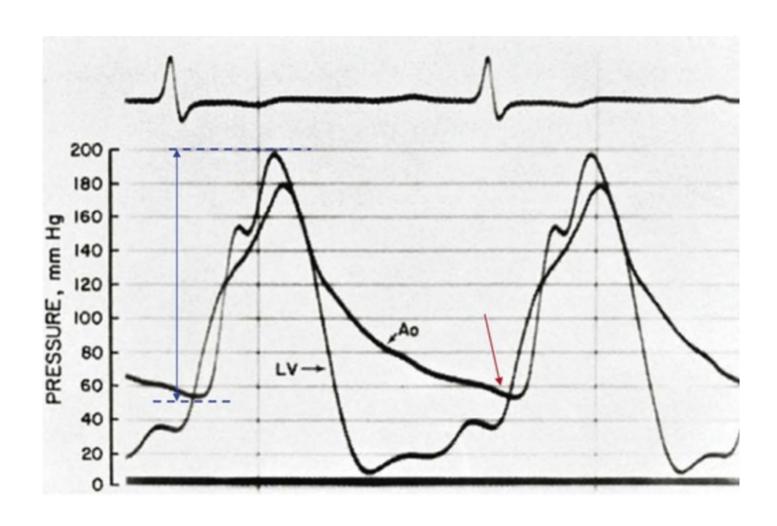
#### **TIPS AND TRICKS**

- Flush catheters frequently
- Ensure transducer height at level of heart
- Zero transducers prior to measuring pressures
- Understand catheter waveforms and expected deflections
- Monitor for unexpected waveform changes frequently

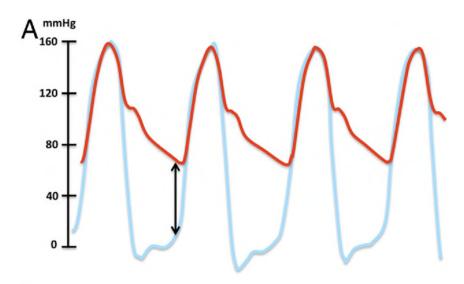
### LHC IN CHRONIC AORTIC REGURGITATION

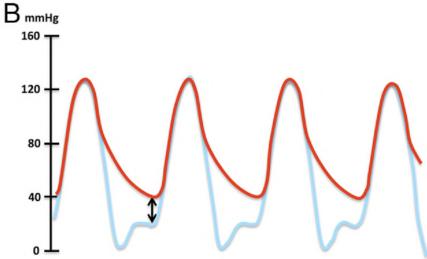


### LHC IN ACUTE AORTIC REGURGITATION

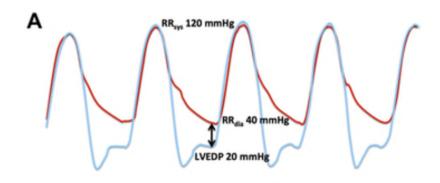


## LHC IN AORTIC REGURGITATION ASSESSMENT POST TAVR

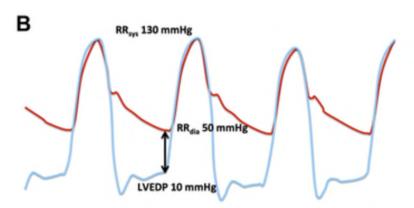




#### **AR INDEX POST TAVR**



Aortic Regurgitation Index =  $[(RR_{dia} - LVEDP) / RR_{sys}] \times 100$ =  $[(40 - 20) / 120] \times 100 = 16.7$ 



Aortic Regurgitation Index =  $[(RR_{dia} - LVEDP) / RR_{sys}] \times 100$ =  $[(50 - 10) / 130] \times 100 = 30.8$