Intraoperative Cardiac Ultrasound Examination Using Vector Flow Imaging - DTU Orbit (09/11/2017)

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Conventional ultrasound (US) methods for blood velocity estimation only provide onedimensional and angle-dependent velocity estimates; thus, the complexity of cardiac flow has been difficult to measure. To circumvent these limitations, the Transverse Oscillation (TO) vector flow method has been proposed. The vector flow method implemented on a Commercial scanner provided real-time, angle-independent estimates of cardiac blood flow. Epicardiac and epiaortic, intraoperative US examinations were performed on three patients with stenosed coronary arteries scheduled for bypass surgery. Repeating cyclic beat-to-beat flow patterns were seen in the ascending aorta and pulmonary artery of each patient, but these patterns varied between patients. Early systolic retrograde flow filling the aortic sinuses was seen in the ascending aorta as well as early systolic retrograde flow. A stable vortex in the right atrium was seen during the entire heart cycle. The measurements were compared with estimates obtained intraoperatively with conventional spectral Doppler US using a transesophageal and an epiaortic approach. Mean differences in peak systole velocity of 11% and 26% were observed when TO was compared with transesophageal echocardiography and epiaortic US, respectively. In one patient, the cardiac output derived from vector velocities was compared with pulmonary artery catheter thermodilution technique and showed a difference of 16%. Vector flow provides real-time, angle-

independent vector velocities of cardiac blood flow. The technique can potentially reveal new information of cardiovascular physiology and give insight into blood flow dynamics.

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