Live 3-D stress echo: is beauty also a sign of intelligence? F. Rigo¹, G. Ossena¹, V. Cutaia¹, M. Richieri¹, L. Pratali², A. Raviele², E. Picano¹ ¹Mestre Hospital, Mestre, Italy; ²Cnr, Institute Of Clinical Physiology, Pisa, Italy

Background: Last generation 3-D live stress echo has potential for adding "beauty" (seductive display) and also "intelligence" (unique quantitative information) to the robust, albeit qualitative, classic 2-D stress echo based on wall motion analysis.

Aim: to assess feasibility of 3-D stress echo.

Materials and methods: From May 2005, we enrolled 214 consecutive patients (age=64±11 years; 88 females) routinely screened for suspect coronary artery disease with dipyridamole (0.84 mg/kg in 6') stress echo. Transthoracic echocardiography (2D, 3D and coronary flow reserve, CFR, by pulsed Doppler) was performed with commercially available systems (iE33) using phase array probes (1-5 and 3-8 MHz, S5-S8) and a matrix 3D probe for 3D-Live application. Each data set was analyzed with a dedicated software (3DO, OLab - Advanced Ultrasound Ouantification Software vs. 4.1 and 4.2, Philips Electronics), including 3D volumes and dissynchrony index (DI), considered as the mean value of standard deviation of maximum time to systolic volume variation.

Results: Interpretable 2D data were obtained in all pts (100 % feasibility), CFR data on left anterior descending artery in 185 pts (88 %) and 3D data in 151 pts (70 %). In the 48 pts with negative stress echo (for wall motion criteria) by 2D and 3D, 3D-DI decreased (rest=1.3±.8 vs. stress=.99±.54, p<.001): see figure. In patients with normal resting echo and positive stress echo, 3D-DI increased $(rest = 4.5 \pm 1.9 vs. stress = 8.3 \pm 3.2, p < 0.01).$

Last generation live 3D dipyridamole stress echo still suffers a feasibility gap vs. 2D and Doppler-CFR stress echo, but shows potential for adding substantial "beauty" (convincing display) and perhaps some extra-"intelligence" (quantitative support) to classic stress echo.



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