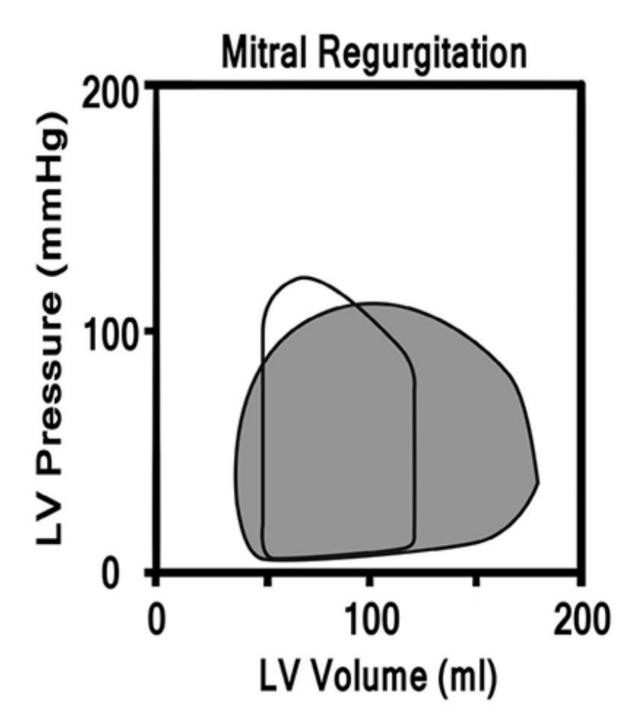
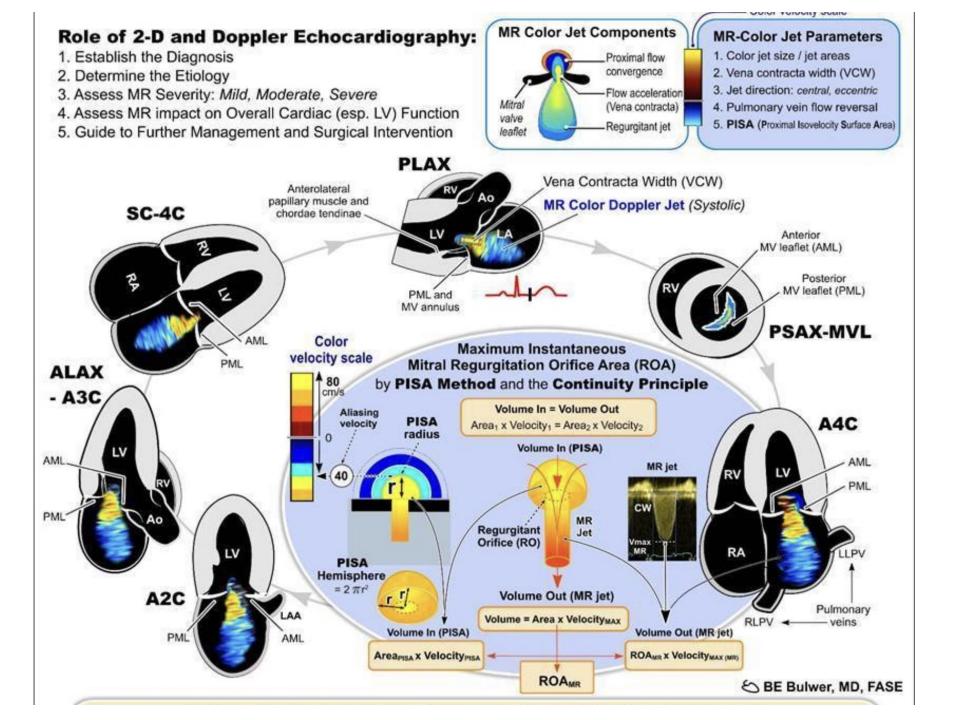
# Insufficienza Mitralica secondaria; secondo round: tips and tricks by echo. Dissezioni coronariche spontanee

Webinar del 18 dicembre 2020





### Etiology: due to any MV Apparatus Component Involvement:

(Leaflets, MV Annulus, Chordae tendinae, Papillary muscles. LV wall)

- Physiologic or Trace MR in ~ 50% normals
- 2. Degenerative/structural:

Myxomatous: MV prolapse

Chordal rupture with MV leaflet flail

Papillary muscle dysfunction or rupture

Severe MV annular calcification

Leaflet perforation

3. Ischemic or Functional:

Dilated Ischemic cardiomyopathy +/-Annular dilatation and apical tethering

- 4. Infective endocarditis: vegetations, perforation
- Inflammatory: Rheumatic heart disease

Connective tissue disorders

e.g. SLE, scleroderma

### MR Severity Classification Parameters: Mild: M, Moderate: Mod , Severe: S

Color Doppler Jet Area (cm²): (Nyquist: 50-60 cm/sec)

M < 4 cm2 or <20% LA area; S > 10 cm2 or > 40% LA area

2. Color Doppler Vena Contracta Width (cm):

Systolic Flow Reversal: Pulmonary Veins s

PISA radius: (Nyquist: 40 cm/sec)

Regurgitant Volume (ml/beat)

Regurgitant Fraction (%)

Regurgitant Orifice Area by PISA (cm²)

M < 0.3 cm; \$ > 0.7 cm

M < 0.4 cm; S > 1.0 cm

M < 30: S > 60 ml/beat

M < 30%; S > 50%

M < 0.2 cm2; S > 0.4 cm2

Transmitral Inflow (E-wave dominant); s

CW Doppler shape and signal Intensity

M: parabolic, faint; S: triangular, dense

dP/dT for LV Systolic Function

11. Left Atrial (LA) Size: M: normal size: S: dilated LA

12. Left Ventricular (LV) Size, Function

M: normal: S: LV dilated/dysfuncti

13. Mitral leaflets and subvalvular structures: leaflet flail, ruptured papillary muscles; s



From the Echo Stethoscope Academy Project

### About the Echo Stethoscope Academy Project

The Echo Stethoscope Academy project is the brainchild of Bernard E. Bulwer, M.D., FASE.

The replacement for the traditional stethoscope

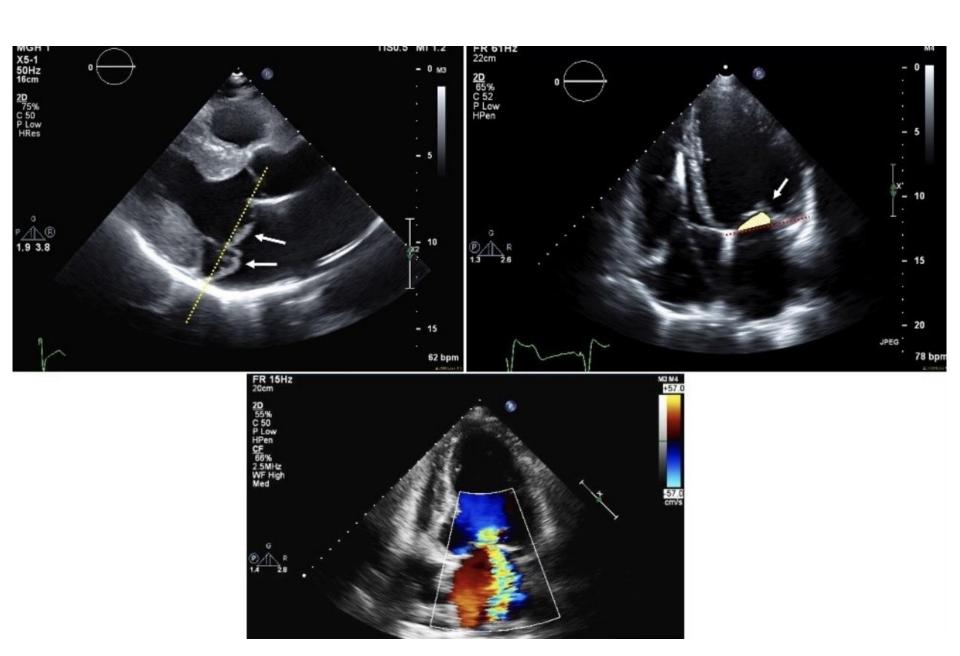
—the 200 year-old status symbol of doctors and healthcare professionals—has arrived.

Today, portable ultrasound stethoscopes fulfil modern medicine's historic quest to instantly, and far more accurately, "scope" the heart. This promises to save time, costs, and lives.

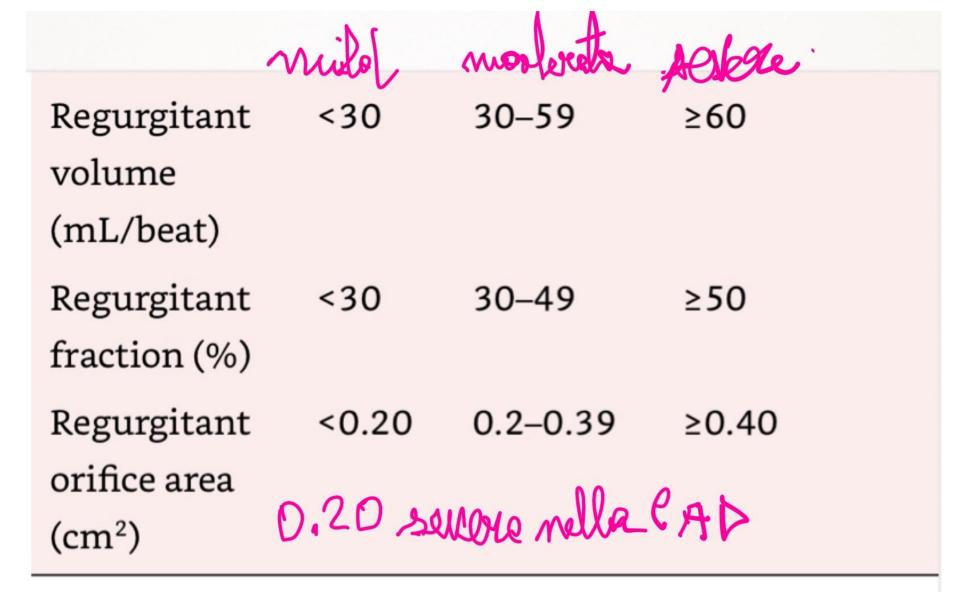
The Echo Stethoscope Academy Project is a solutions-oriented project to help fulfil this promise. Its focus is to *educate and equip* tomorrow's health care professionals with the requisites.

For more information,

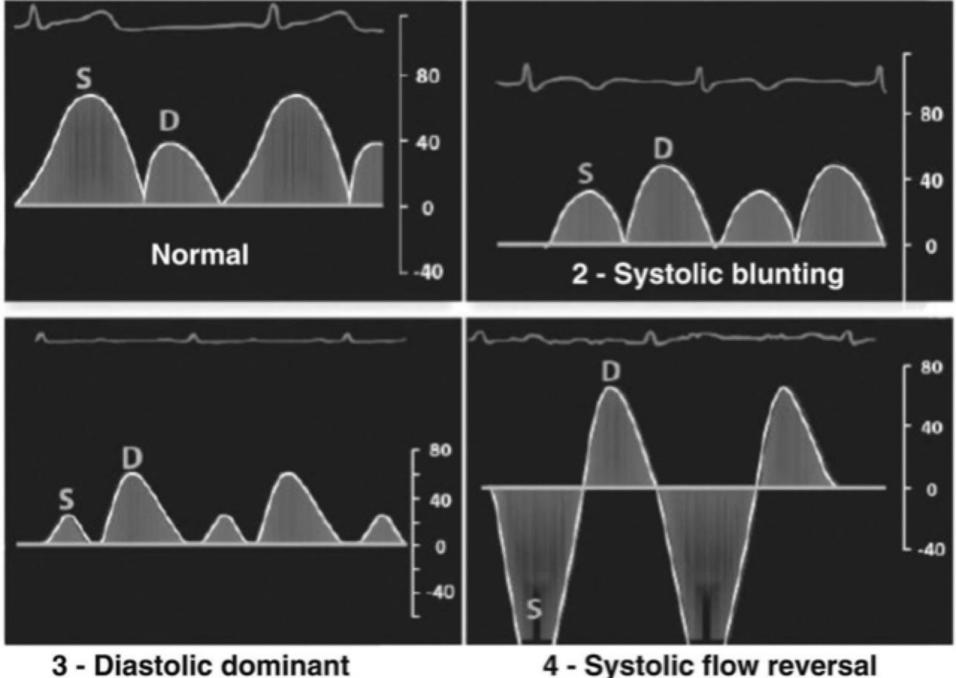
Contact: info@echoscope.org



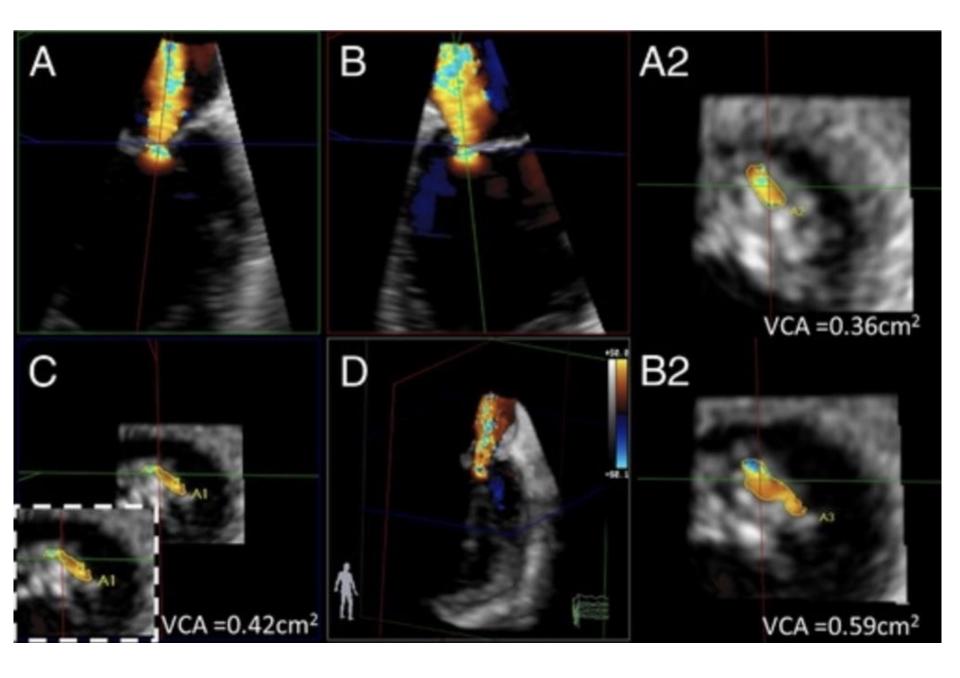
Mitral Regurgitation			
	Mild	Moderate	Severe <sup>a</sup>
Qualitative			
Angiographic grade	1+	2+	3–4+
Color	Small,	Signs of	Vena
Doppler jet	central	MR > mild	contracta
area	jet (<4	present,	width > 0.7
	$cm^2  or$	but no	cm with large
	<20%	criteria	central MR jet
	LA	for severe	(area > 40% of
	area)	MR	LA area) or
			with a wall-
			impinging jet
			of any size
Doppler vena	< 0.3	0.3-0.69	≥0.70
contracta			
width (cm)			

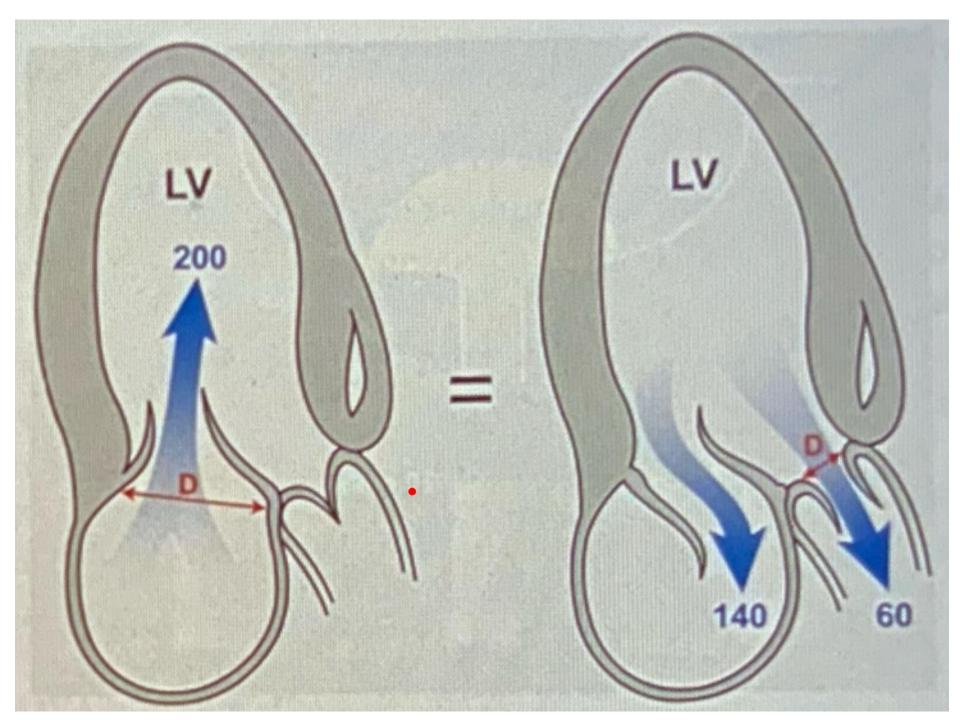


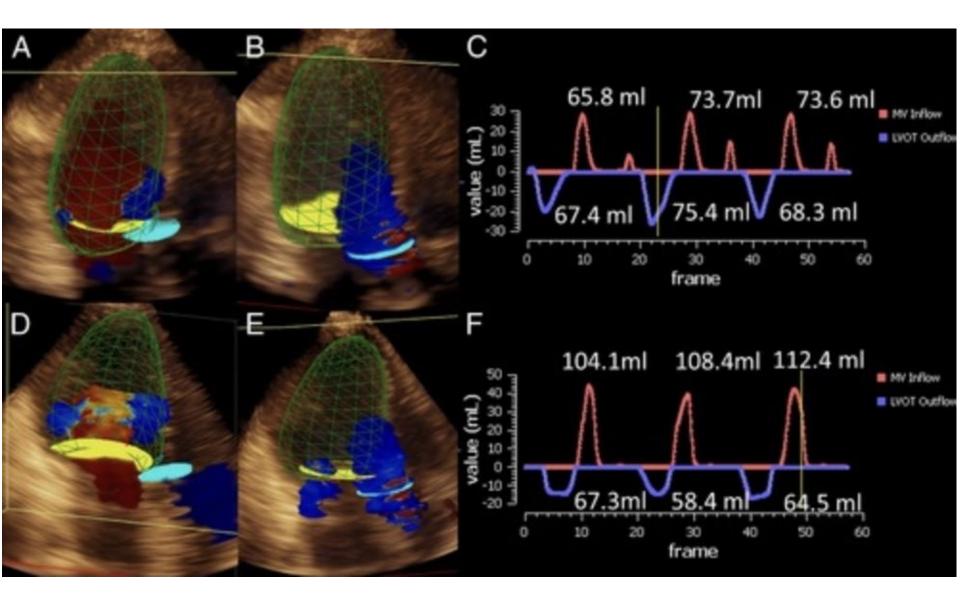
MR, mitral regurgitation; LA, left atrium; LV, left ventricle. aIn severe MR, evidence of LA and LV dilation is essential.



4 - Systolic flow reversal

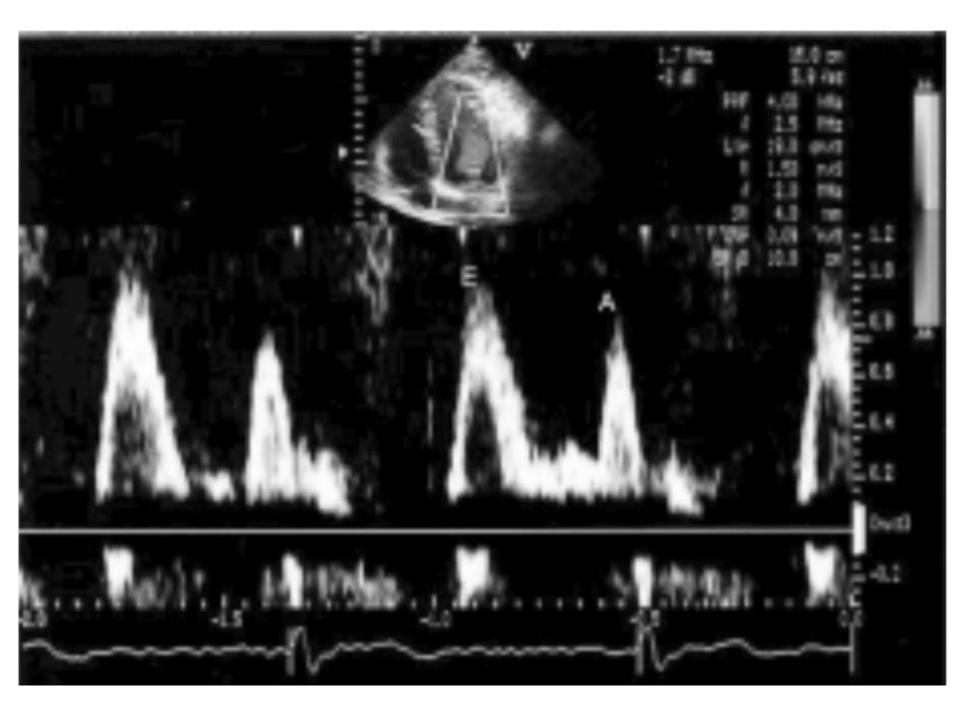








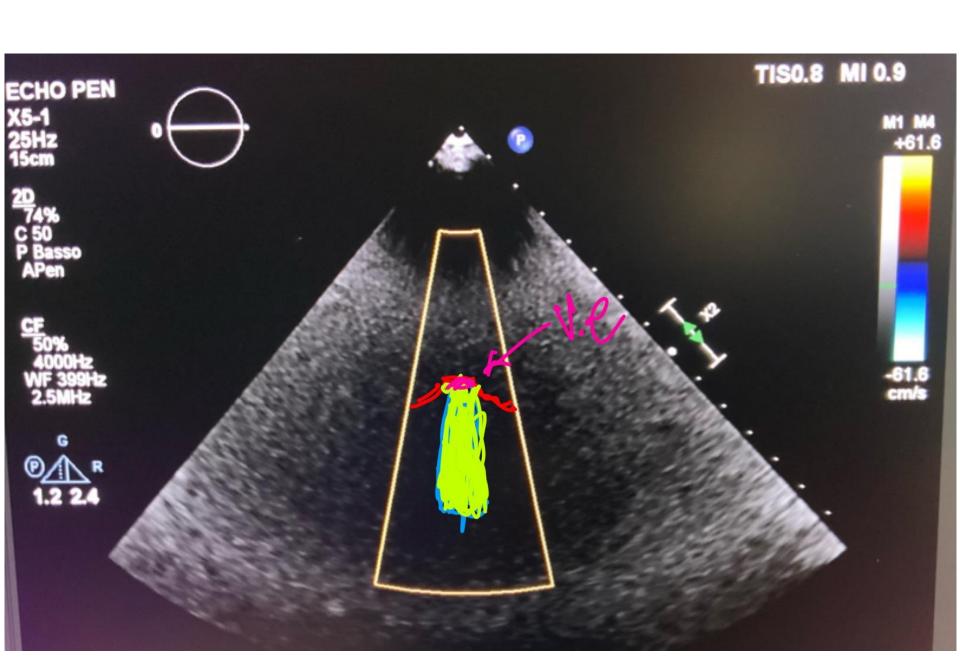
COANDA EFFECT

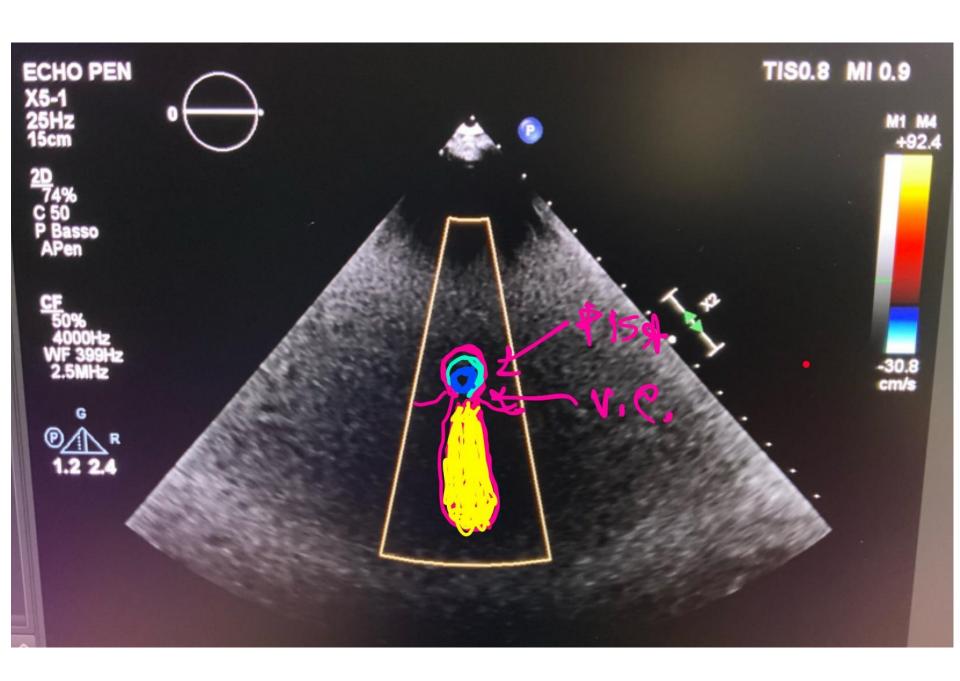


(D.785=3.14:4) SV: Area LVOTXVTI (LVOT) 5V= (B)2.0.785.VTI (LVOT) SV = (2.0.785. VT) With MI edidosattake. Wedle VOL PIRIGURGITO = - SV(MITR)-SV(A6)

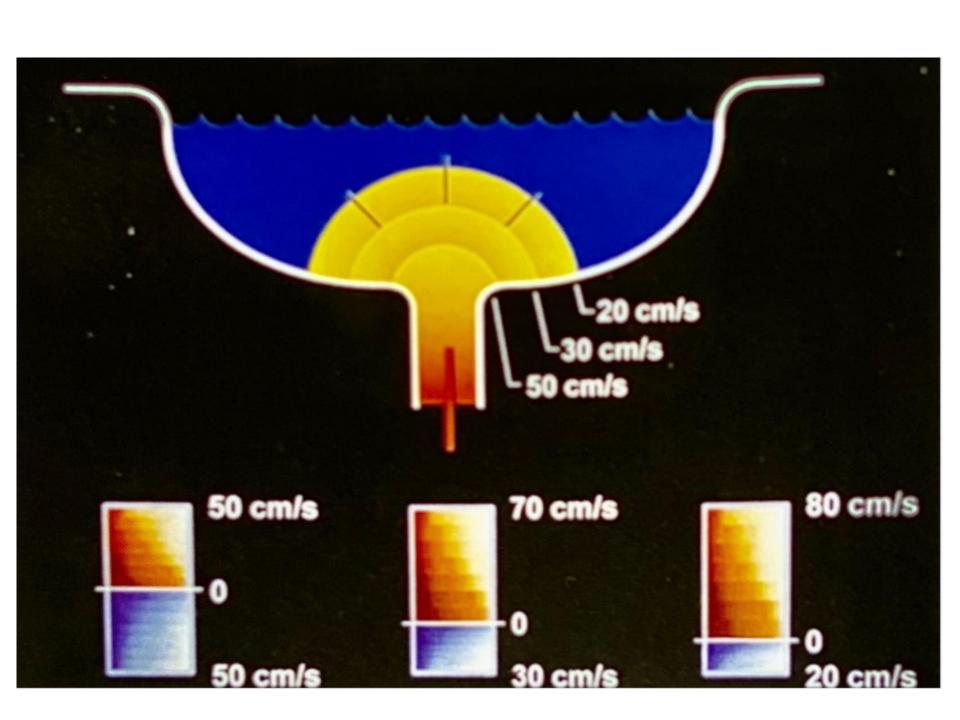
FRAZIONE PIRIGUAGITO VOL. PIRIGIRE ITO X 100 VOL. MITRALIED Cion VOL MITRACIED 100 EIDE

## FRAZIONEDI RIGURGI 70 D2-0.785-VTI(N)-D3-0.785-VTI(A), D00 D2-0.785-VTI(MI)









### CALCOLO ERO

VELOCITA DITLUSSO PICED VELDE ITA RIGUREITO MITH

6.28-2 (PISA) - VEL. ALIASING

TIECO VEC. KIGURGITOMITR,

SEMPLIFICATO

SEPICED VEC. RIGIRGITOMITHA LICO = 5 mbee £ ALIASING 40 mg/ke ERO = M2

## ERO- VOL. RIGHAGITO VTI RIGUAGITOMITA

EROA by PISA	$\frac{2\pi r^2 \times V_a}{PV_{Reg}}$	
Regurgitant Volume	SV <sub>LVOT</sub> – SV <sub>MV</sub>	
Regurgitant Fraction	$\left(\frac{RVol}{VTI_{MV} \times \pi r_{MV}^2}\right) \times 100$	