

# Contrast Echocardiography

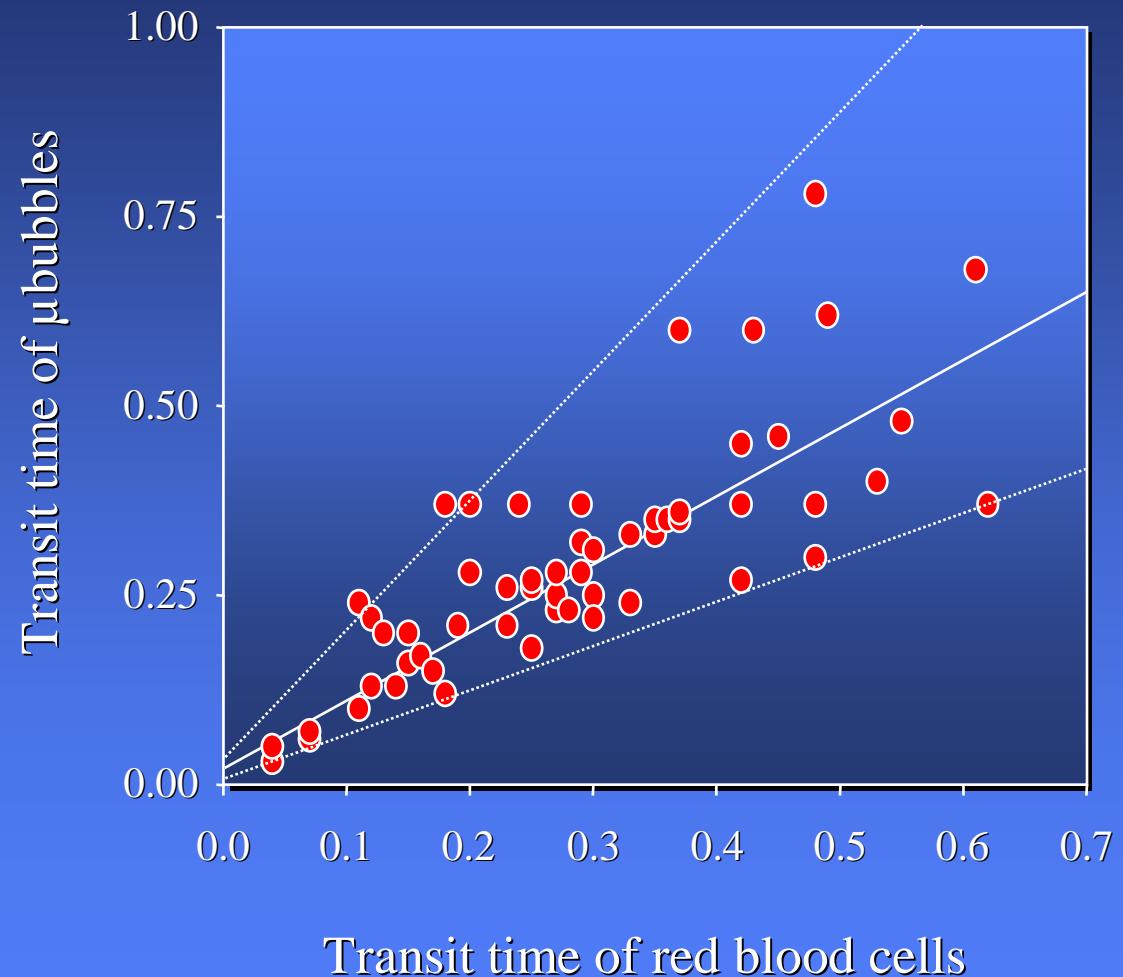
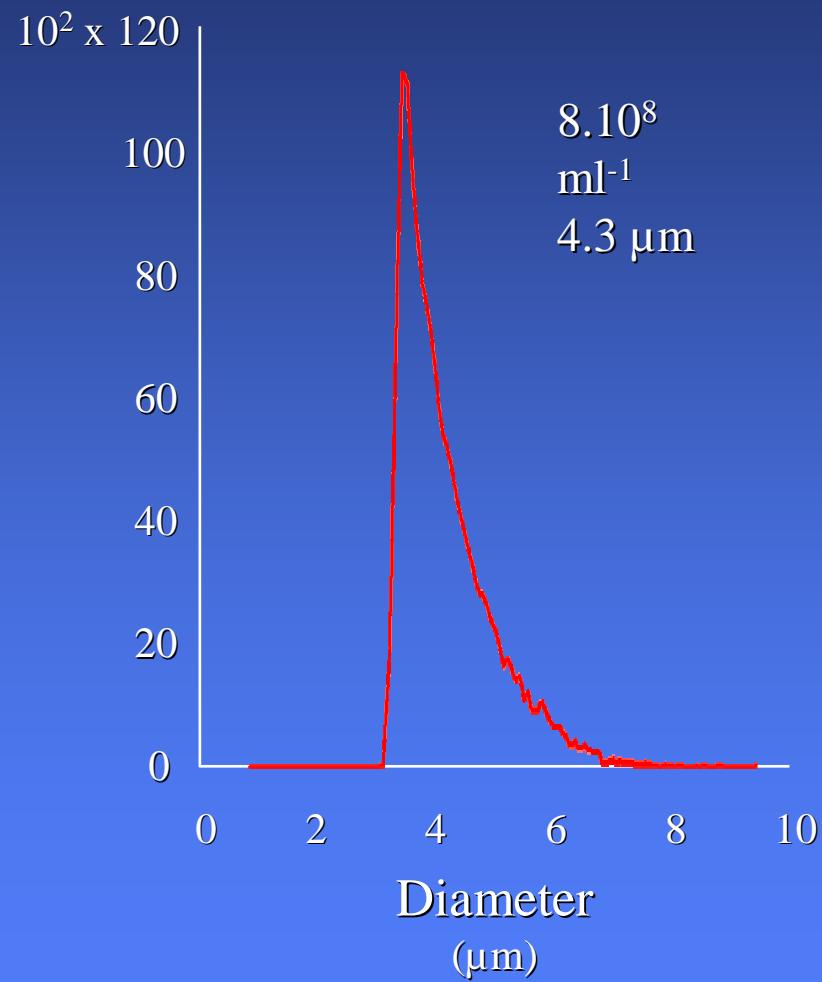
Jean-Louis J. Vanoverschelde, MD, PhD

Université catholique de Louvain  
Brussels, Belgium



# Contrast Echocardiography

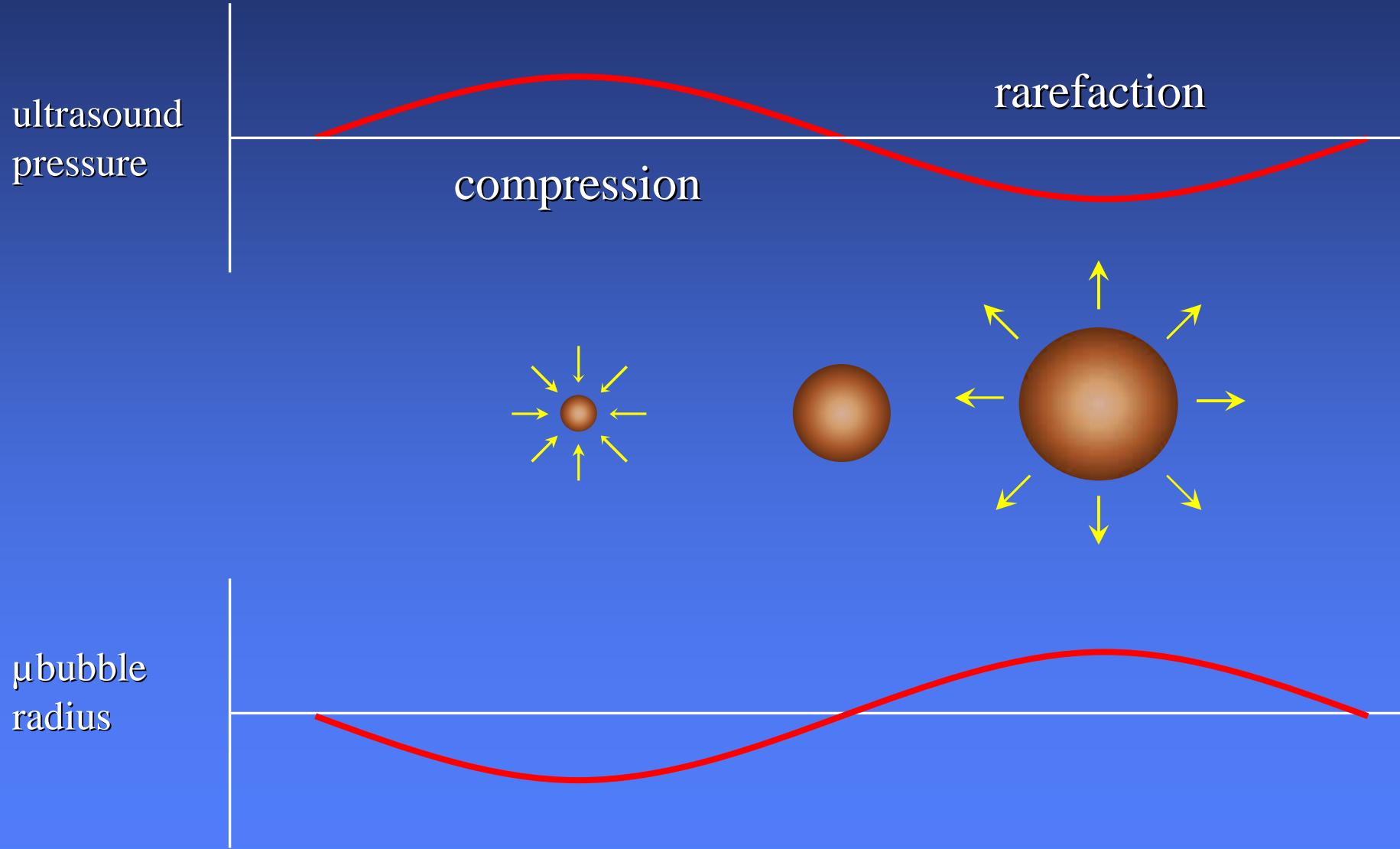
## Relation of $\mu$ bubbles to red blood cells

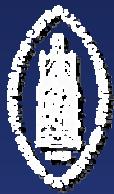




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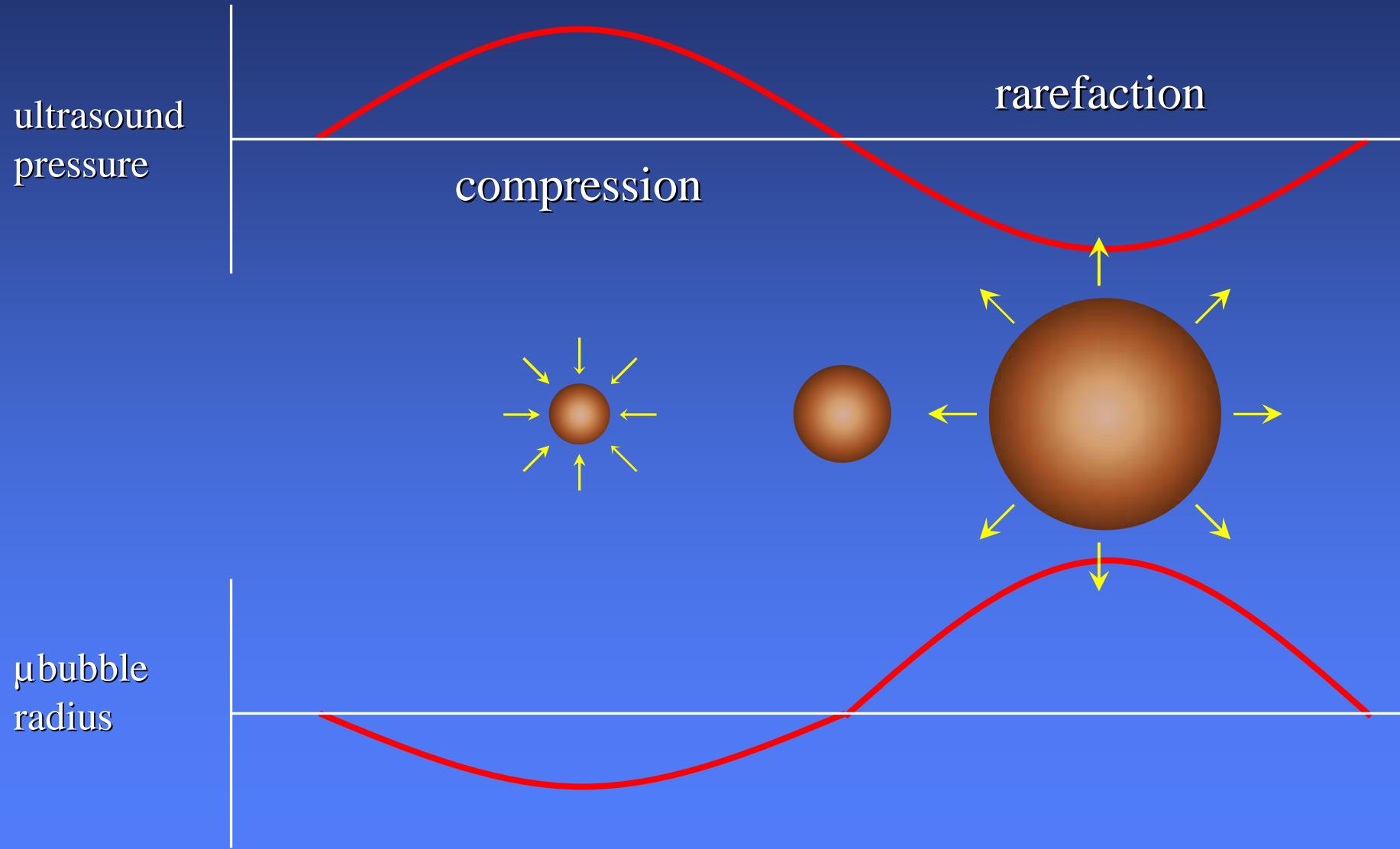
## Effect of low acoustic energy on $\mu$ bubbles size

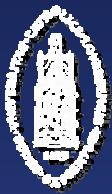




# Contrast Echocardiography

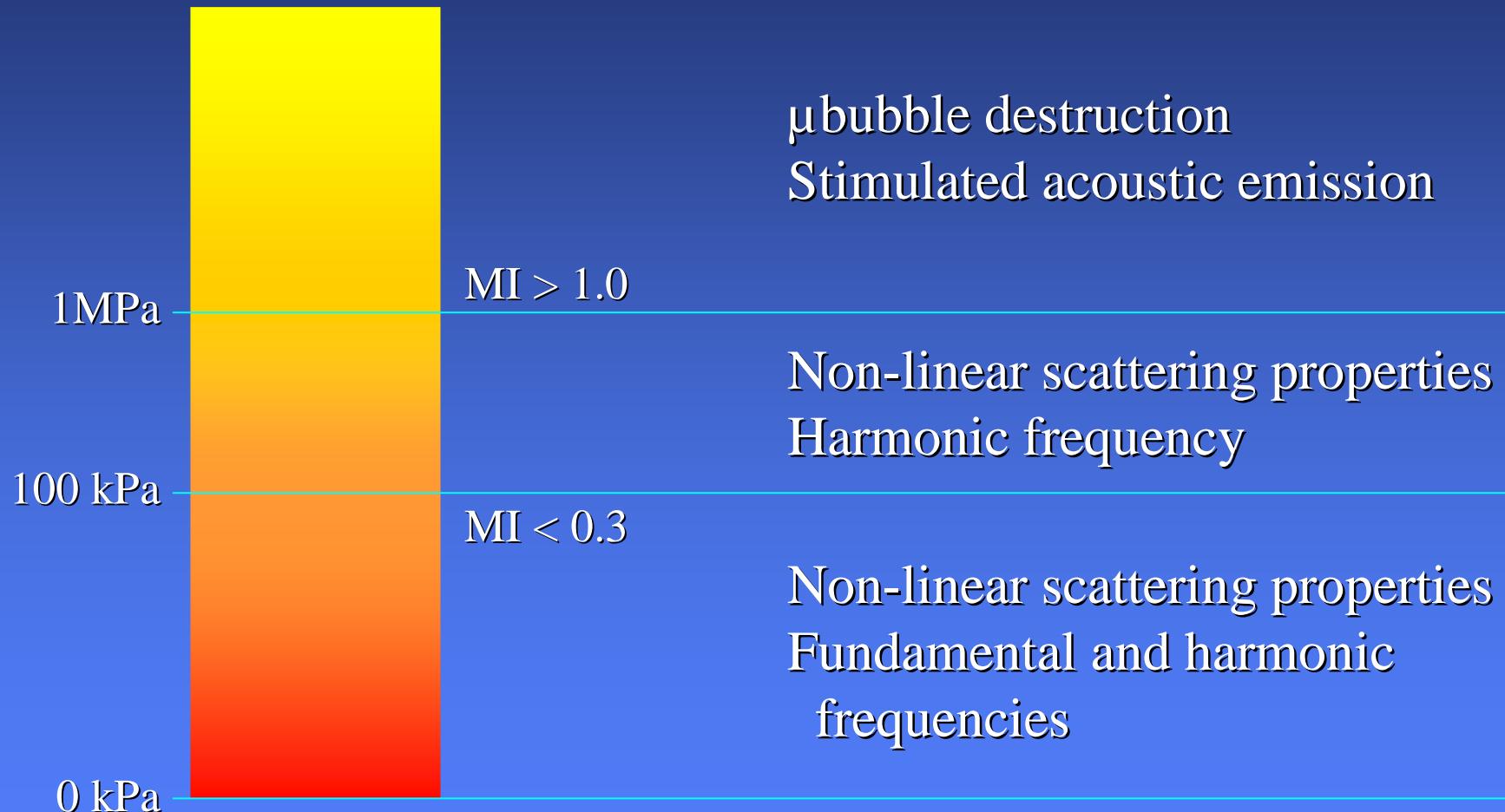
## Effect of high acoustic energy on $\mu$ bubbles

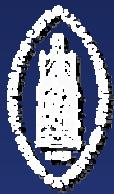




# Contrast Echocardiography

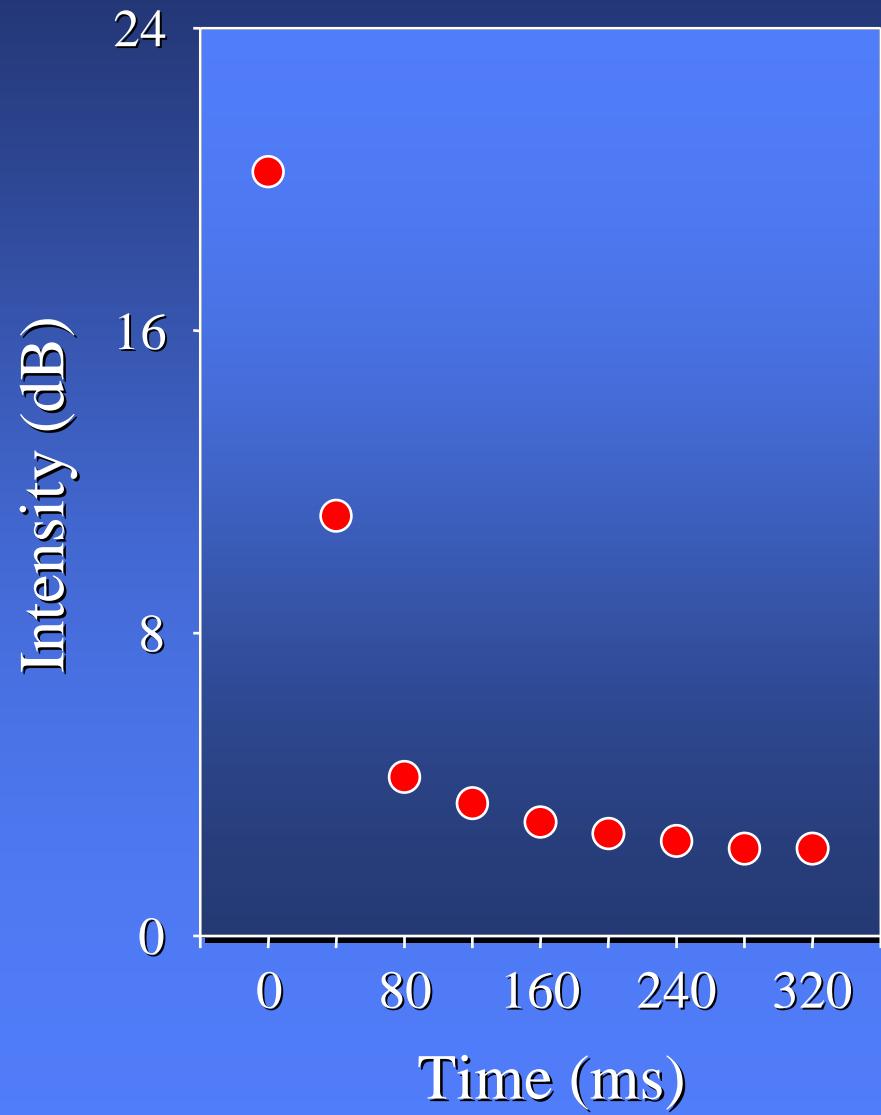
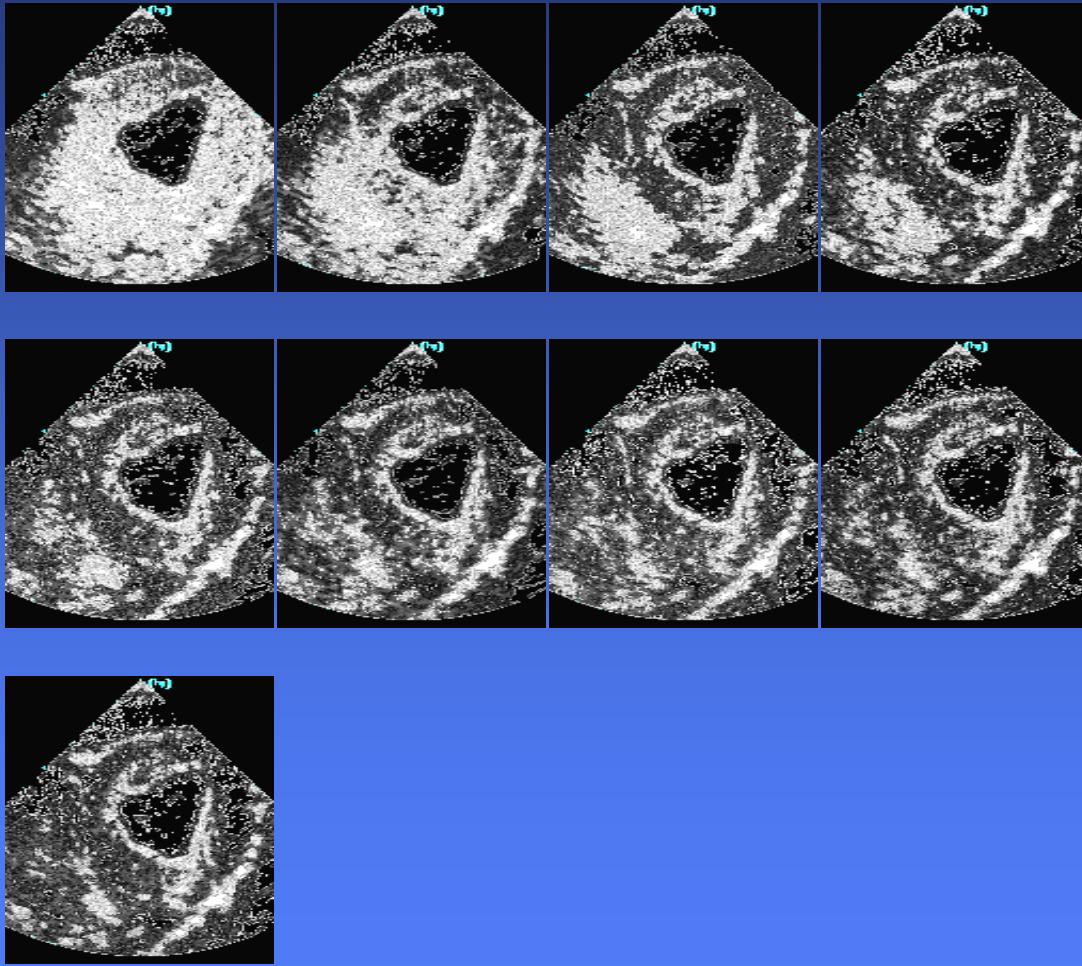
## Effect of acoustic energy on $\mu$ bubbles scattering properties





# Contrast Echocardiography

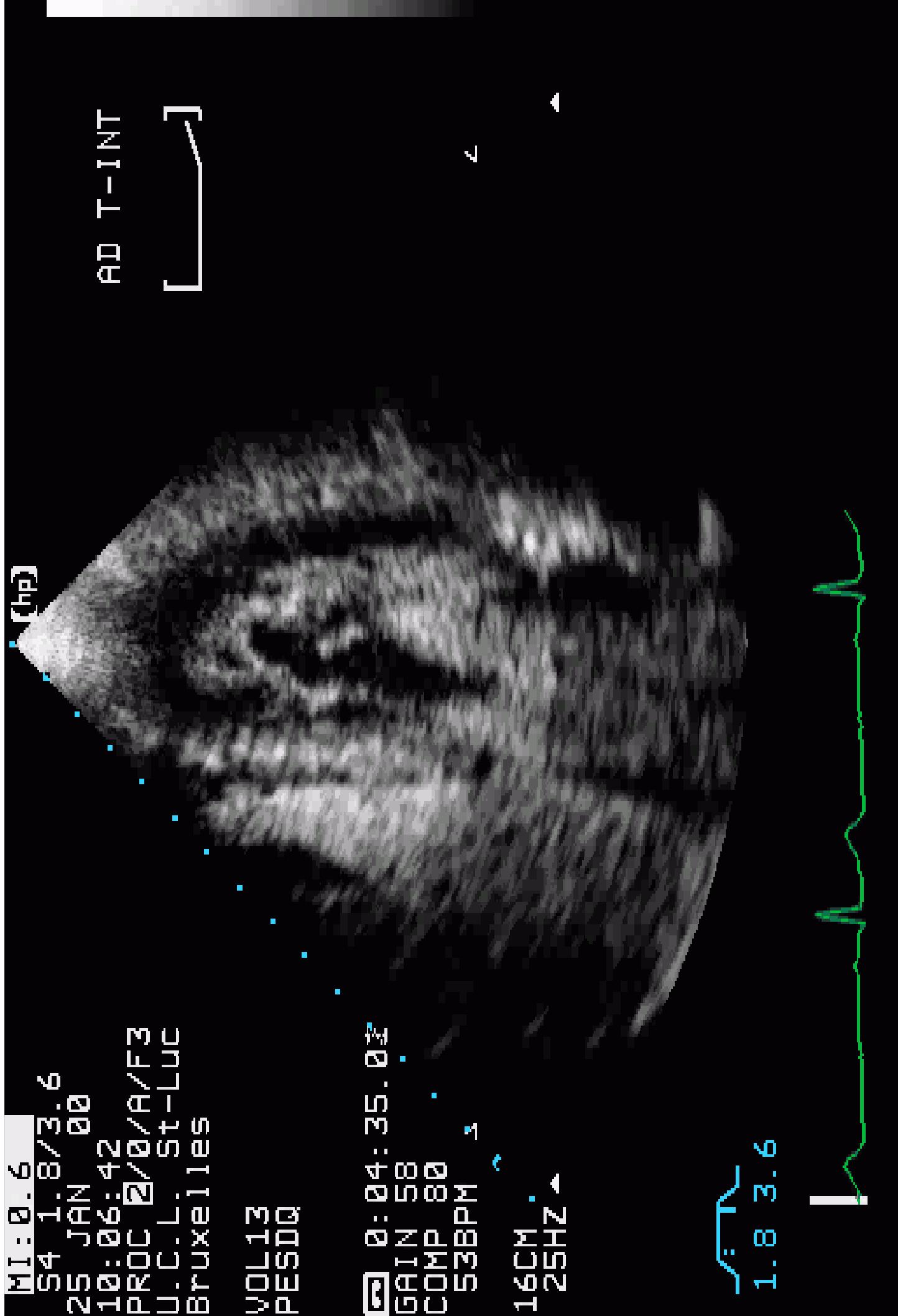
## Destruction of contrast by ultrasound



MI : 0 . 6  
S4 1 . 8 / 3 . 6  
25 JAN 00  
10 : 06 : 42  
PACIFIC / G / A / F3  
JULY 1995  
ST - LUC  
YES

VOL 13 PESO

16CH  
25HZ



MI : 0 . 6  
S4 1 . 8 / 3 . 6  
25 JAN 00  
10 : 06 : 42  
PACIFIC / G / A / F3  
JULY 1995  
ST - LUC  
YES

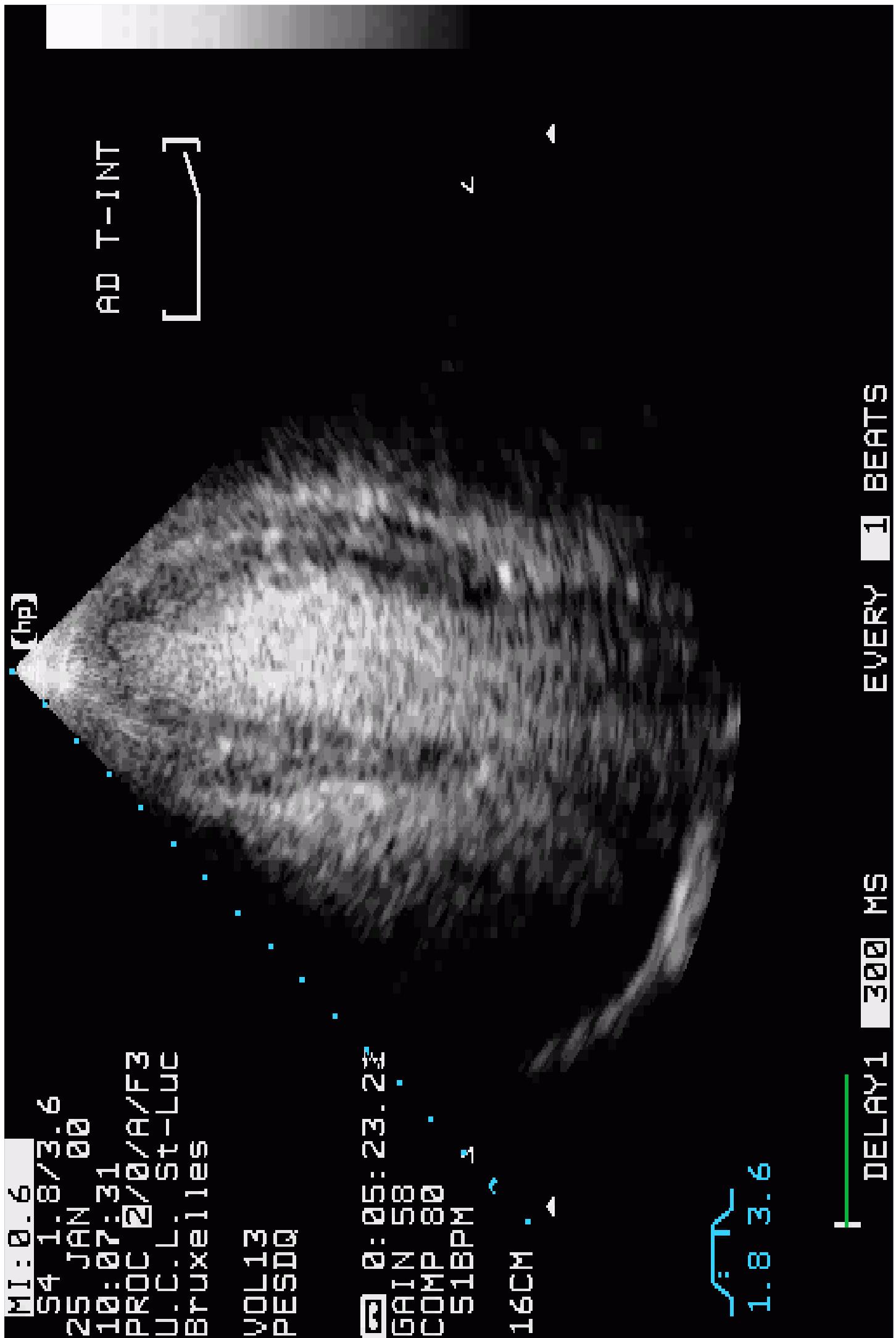
16CH 25HZ  
538PH COMP GAIN:50 0:04:35.05  
PESD0 POLIC

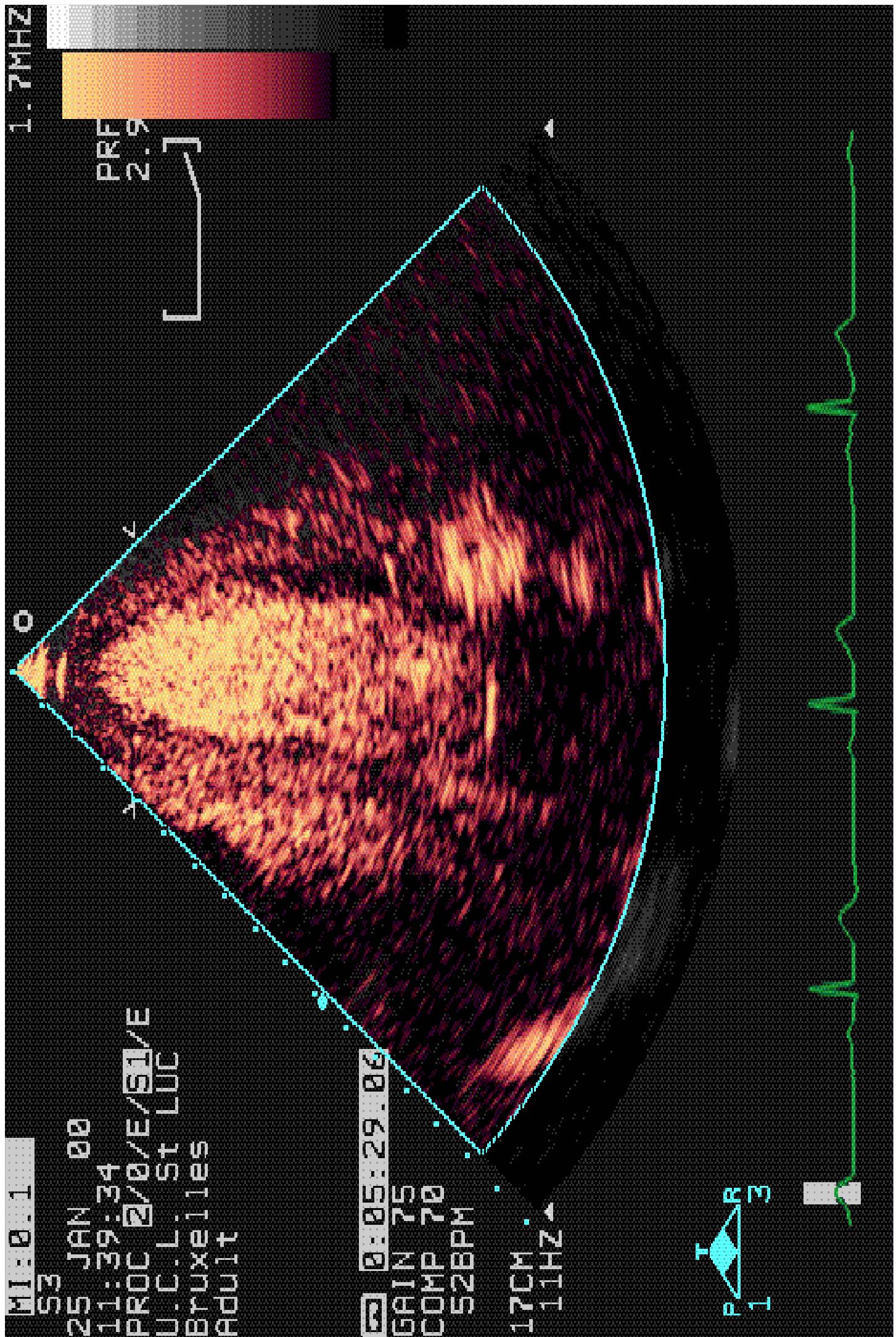
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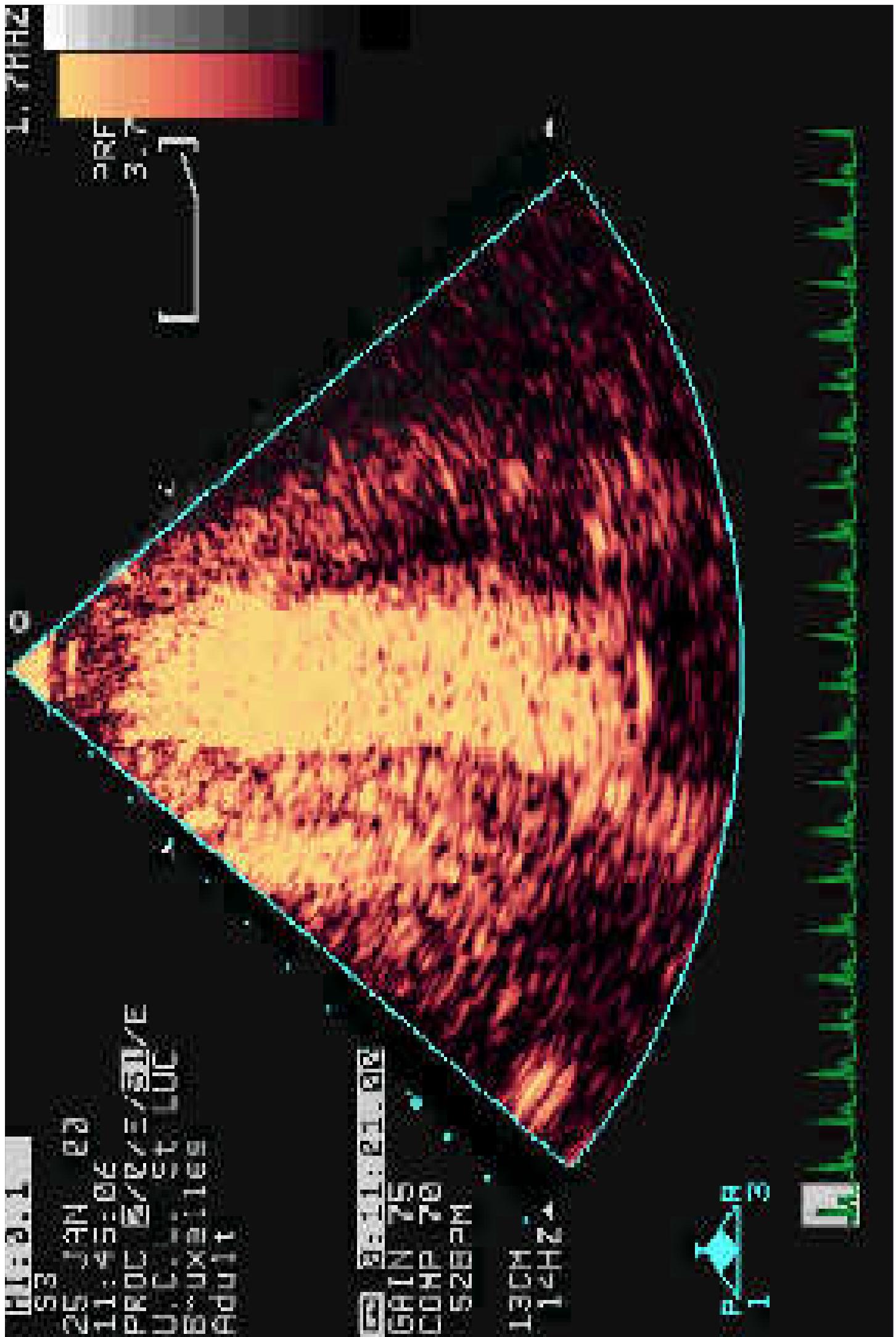
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T - INT

[ 1 ]









# Contrast Echocardiography

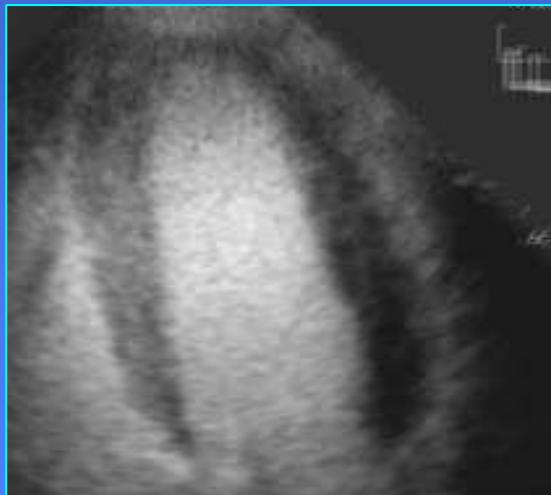
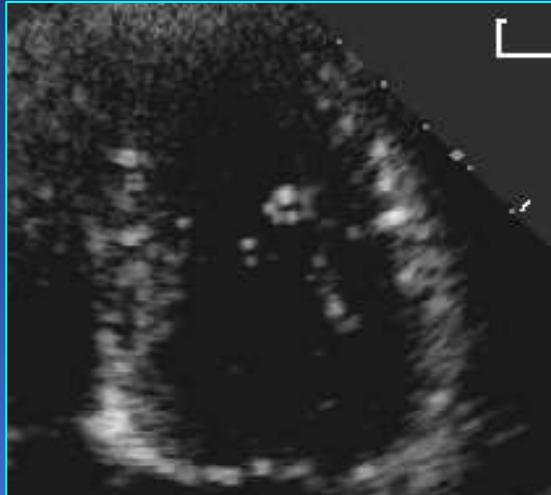
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- Left ventricular opacification
- Myocardial perfusion
- Assessment of reperfusion and myocardial viability



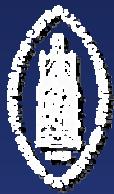
# Contrast Echocardiography

## Left ventricular opacification



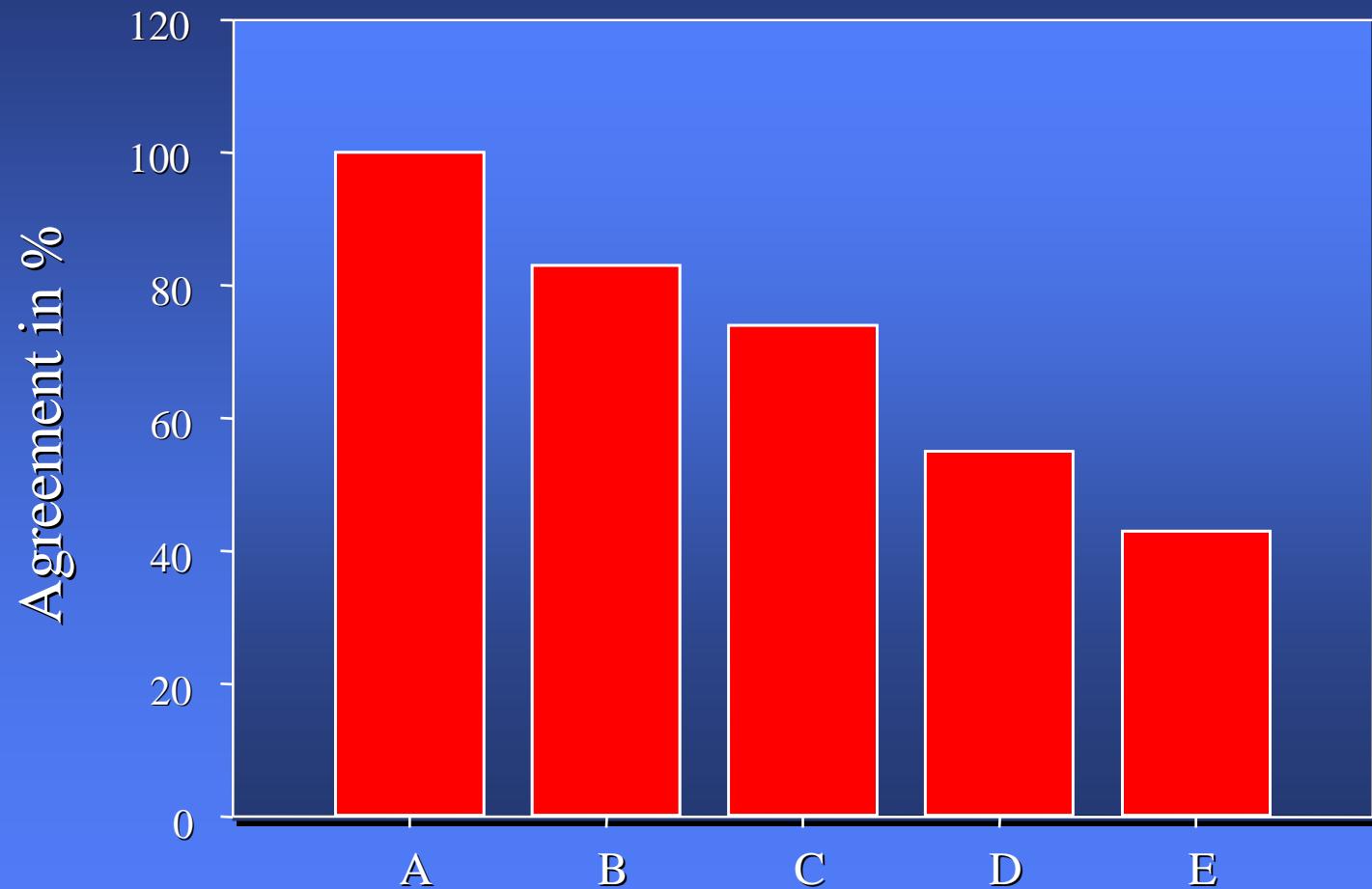
*Improved endocardial border delineation*

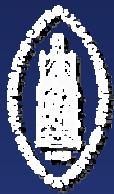
- reduced inter- and intra-observer variability
- improved detection of regional wall motion abnormalities
- improved calculation of LV volumes and ejection fraction



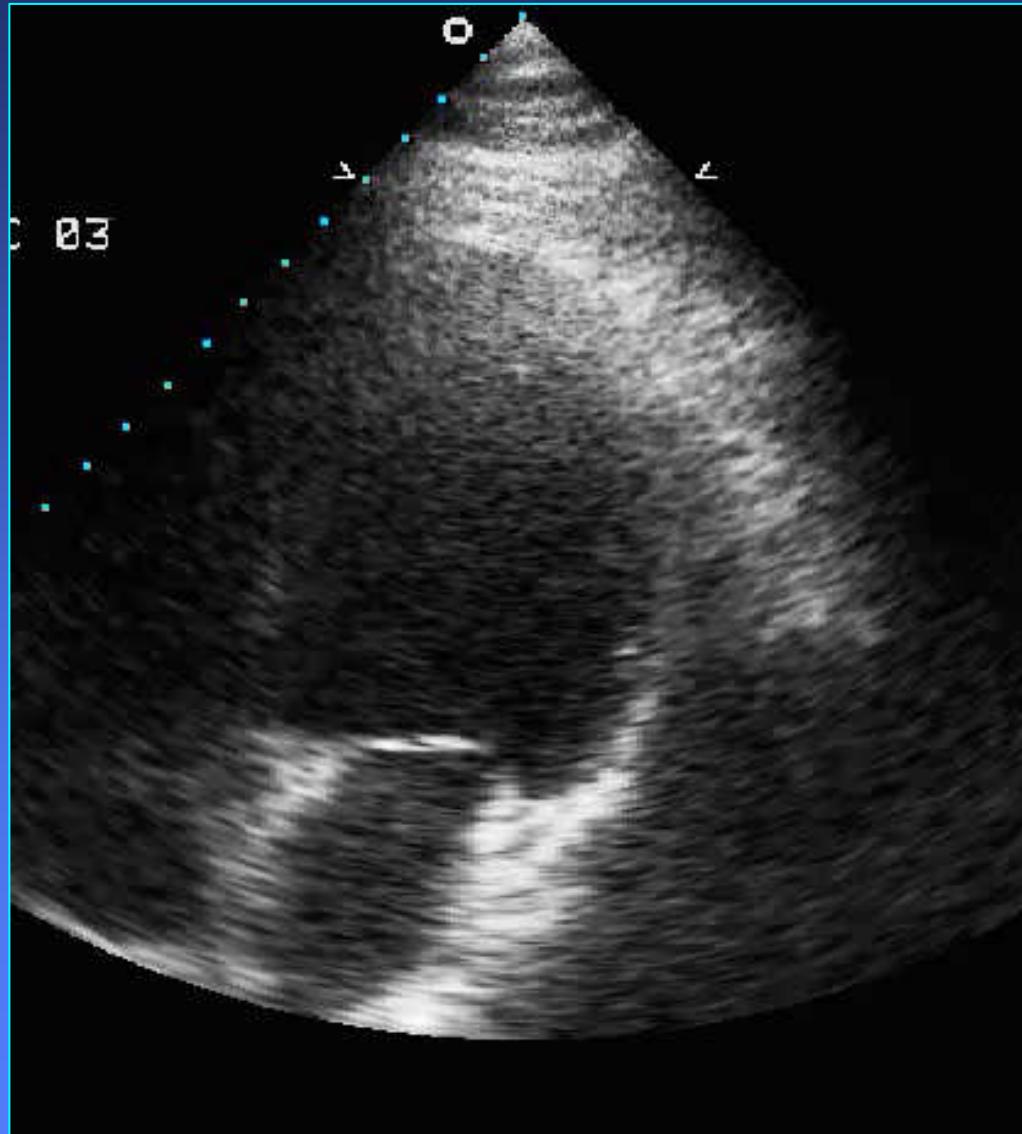
# Contrast Echocardiography

## Inter-institutional agreement according to image quality



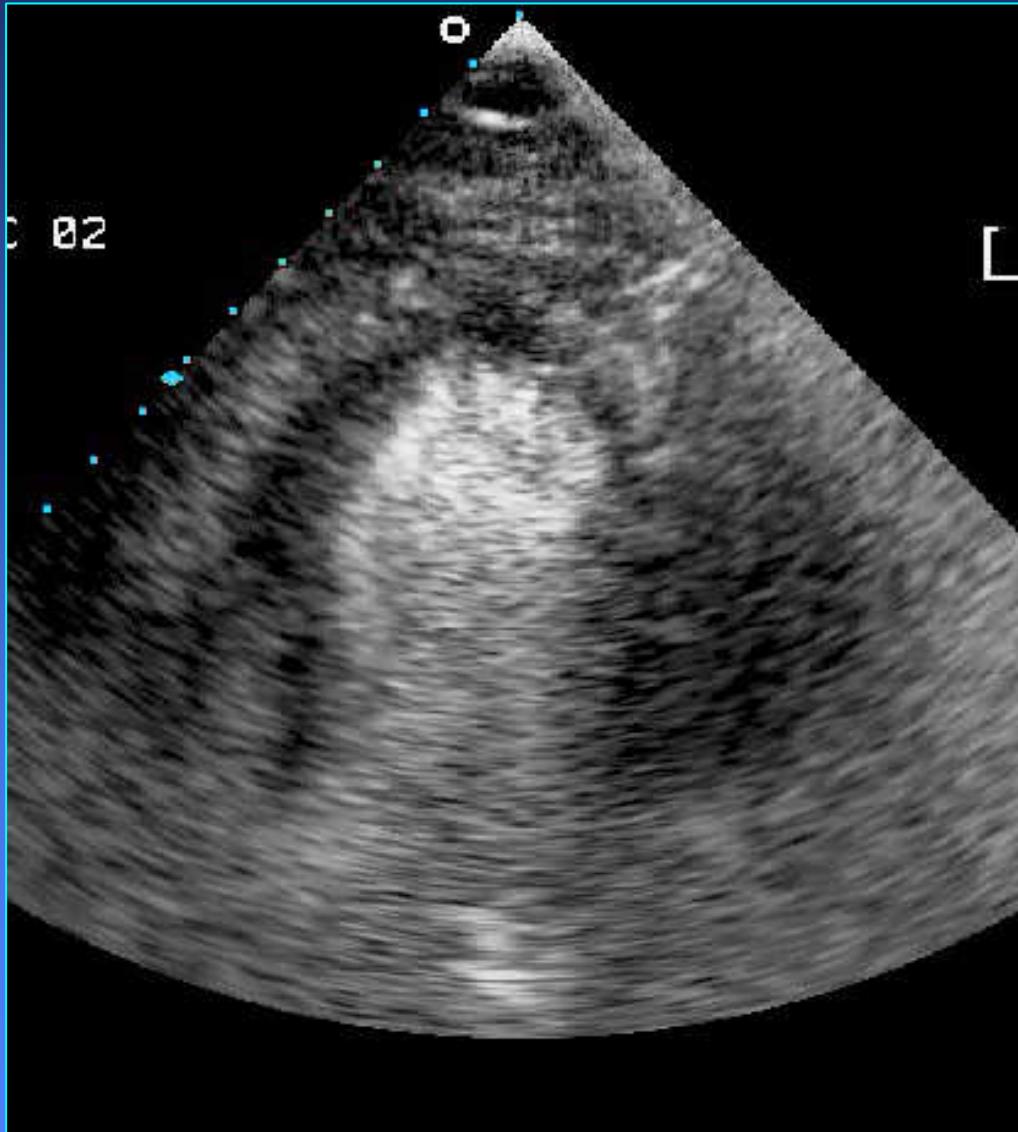


# Contrast Echocardiography





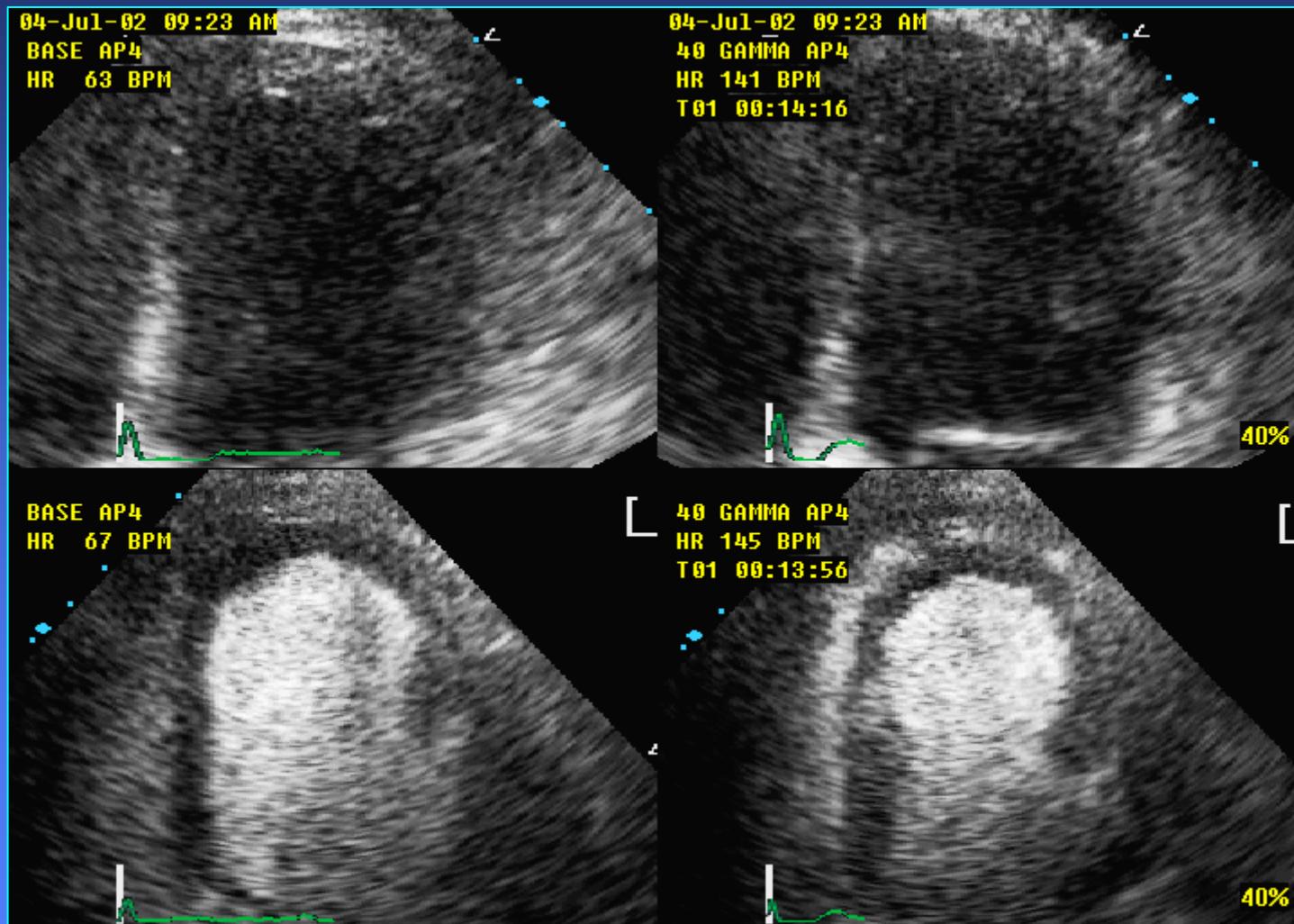
# Contrast Echocardiography





# Contrast Echocardiography

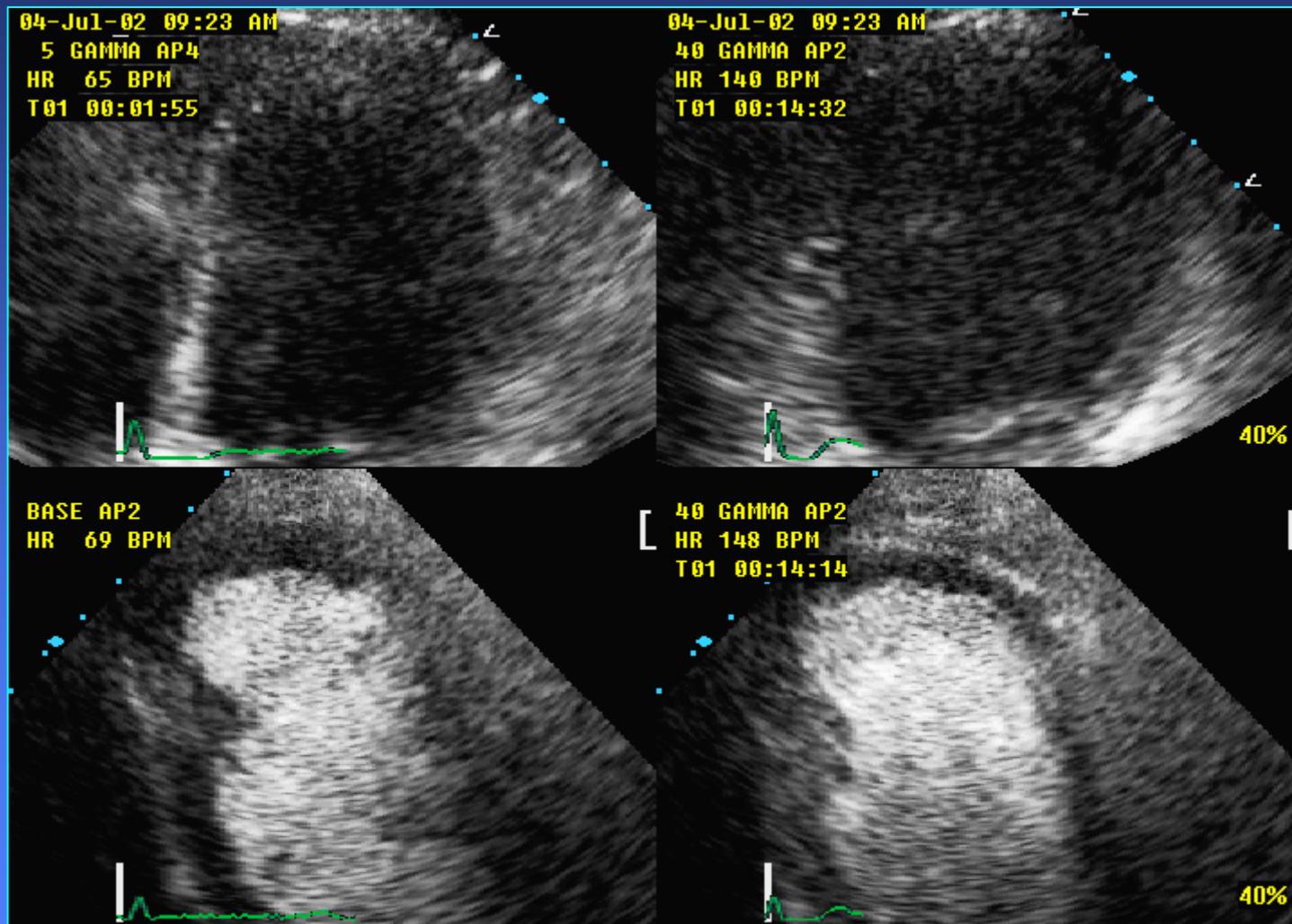
NA, 67 y.o. male

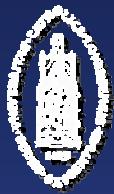




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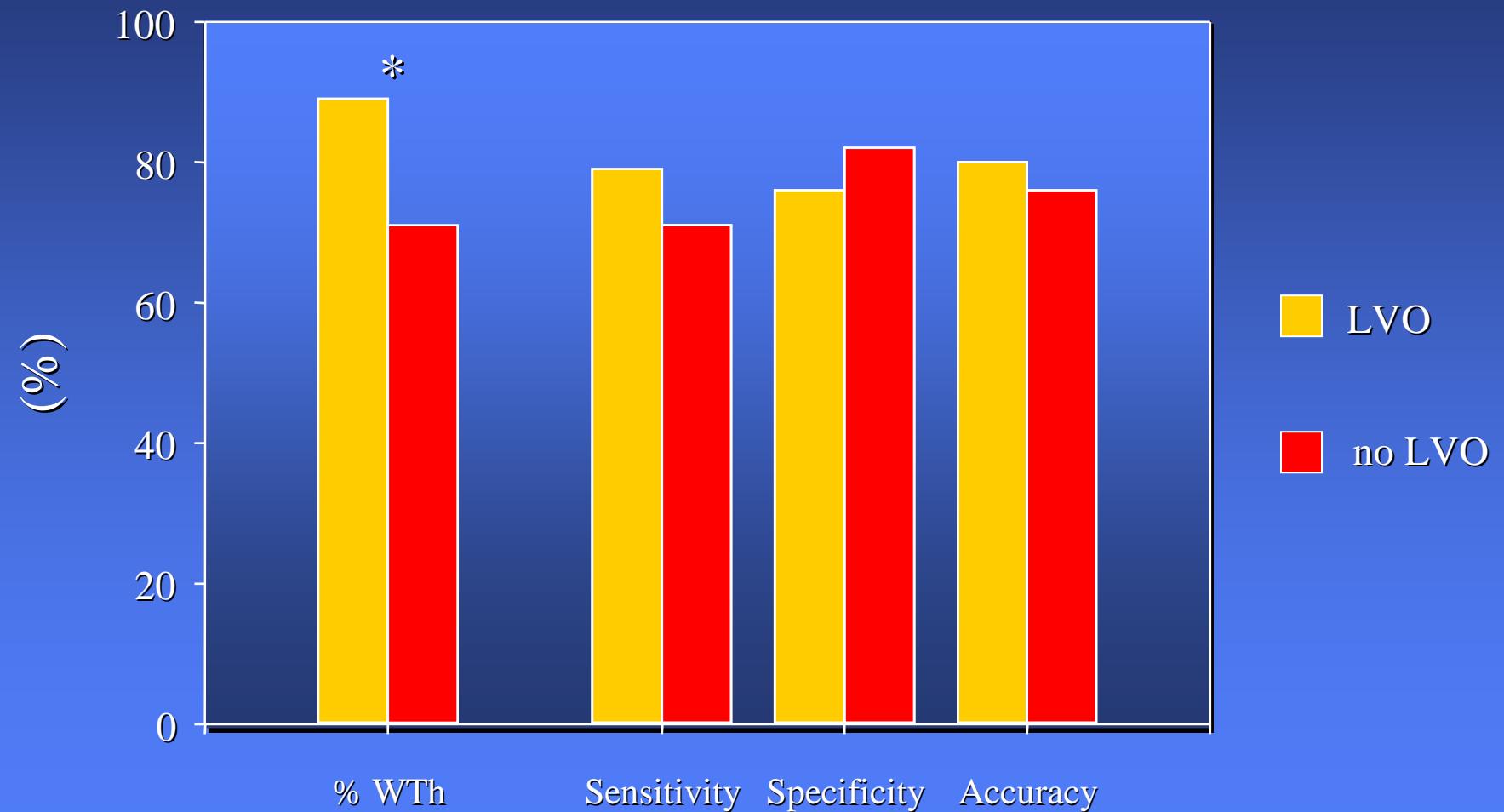
NA, 67 y.o. male





# Contrast Echocardiography

## Effect of left ventricular opacification on accuracy of DbE





# Contrast Echocardiography

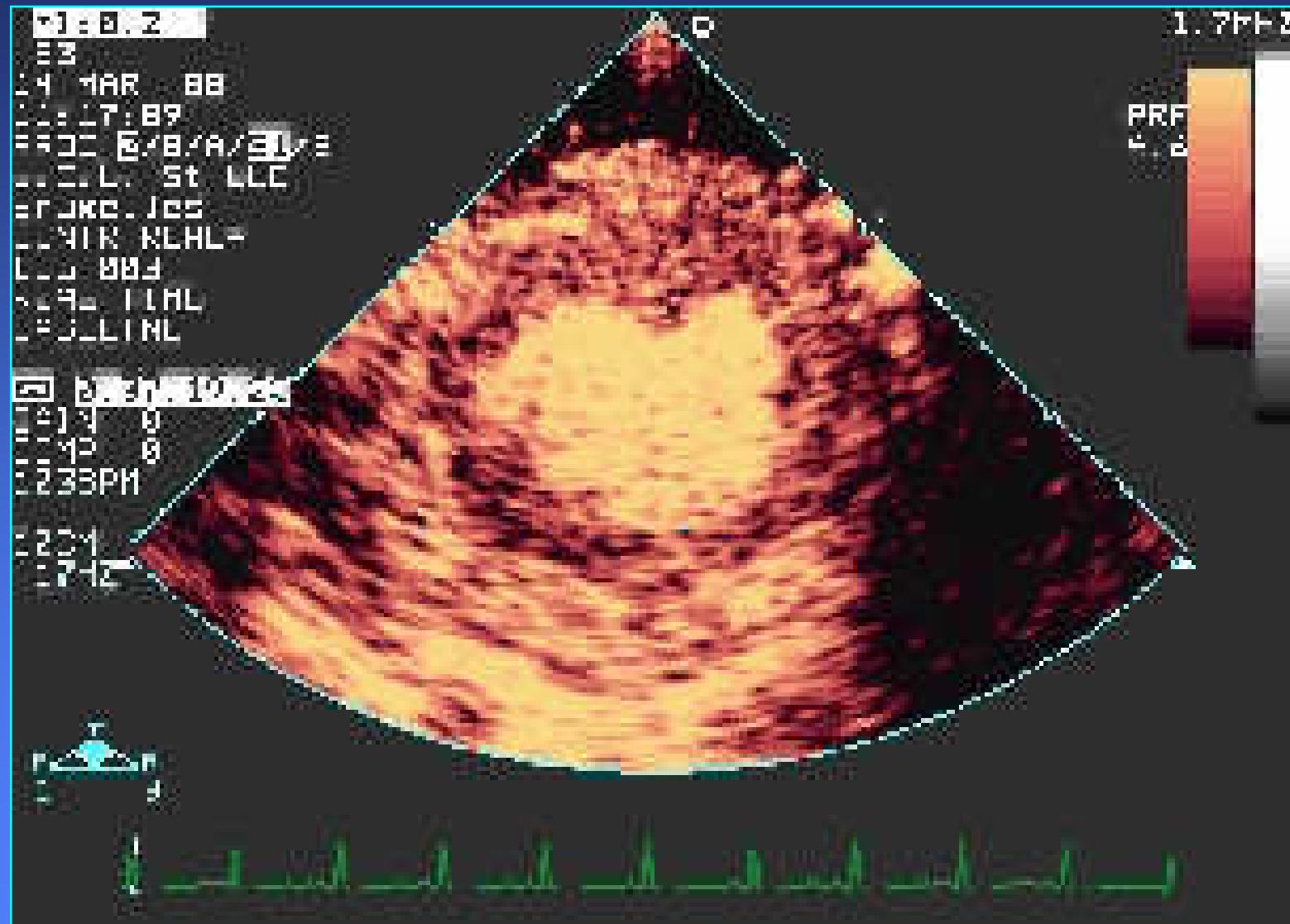
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- Left ventricular opacification
- Myocardial perfusion
- Assessment of reperfusion and myocardial viability



# Contrast Echocardiography

## Real-time perfusion imaging using power modulation

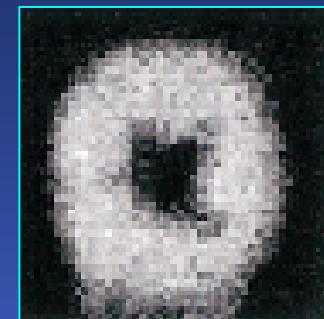




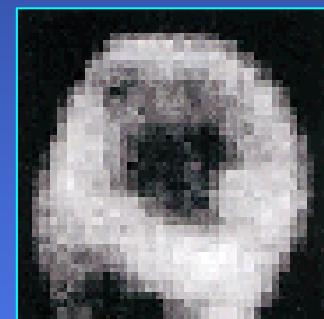
# Contrast Echocardiography

## MCE versus MIBI for assessment of myocardial blood volume

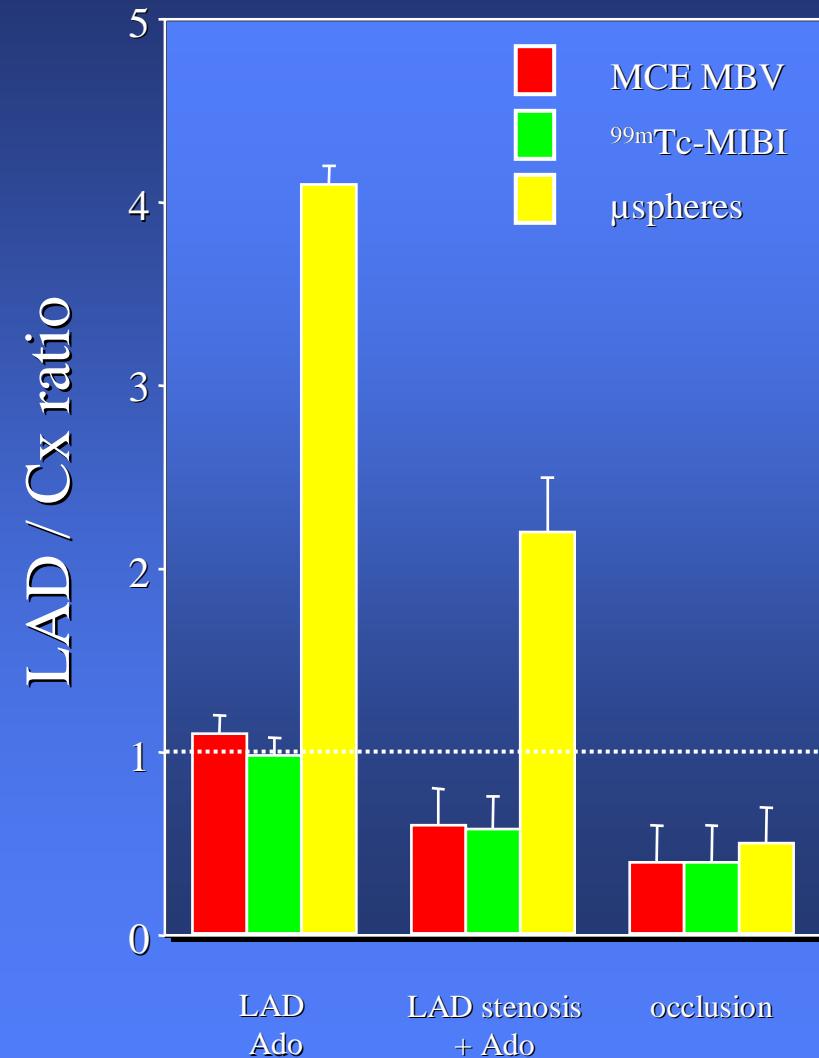
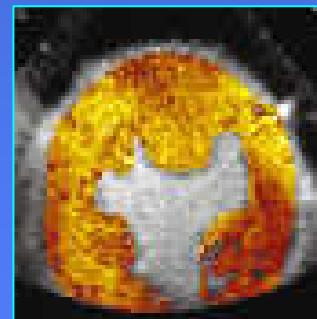
LAD adenosine

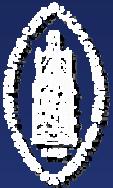


LAD stenosis + adenosine



LAD occlusion





# Contrast Echocardiography

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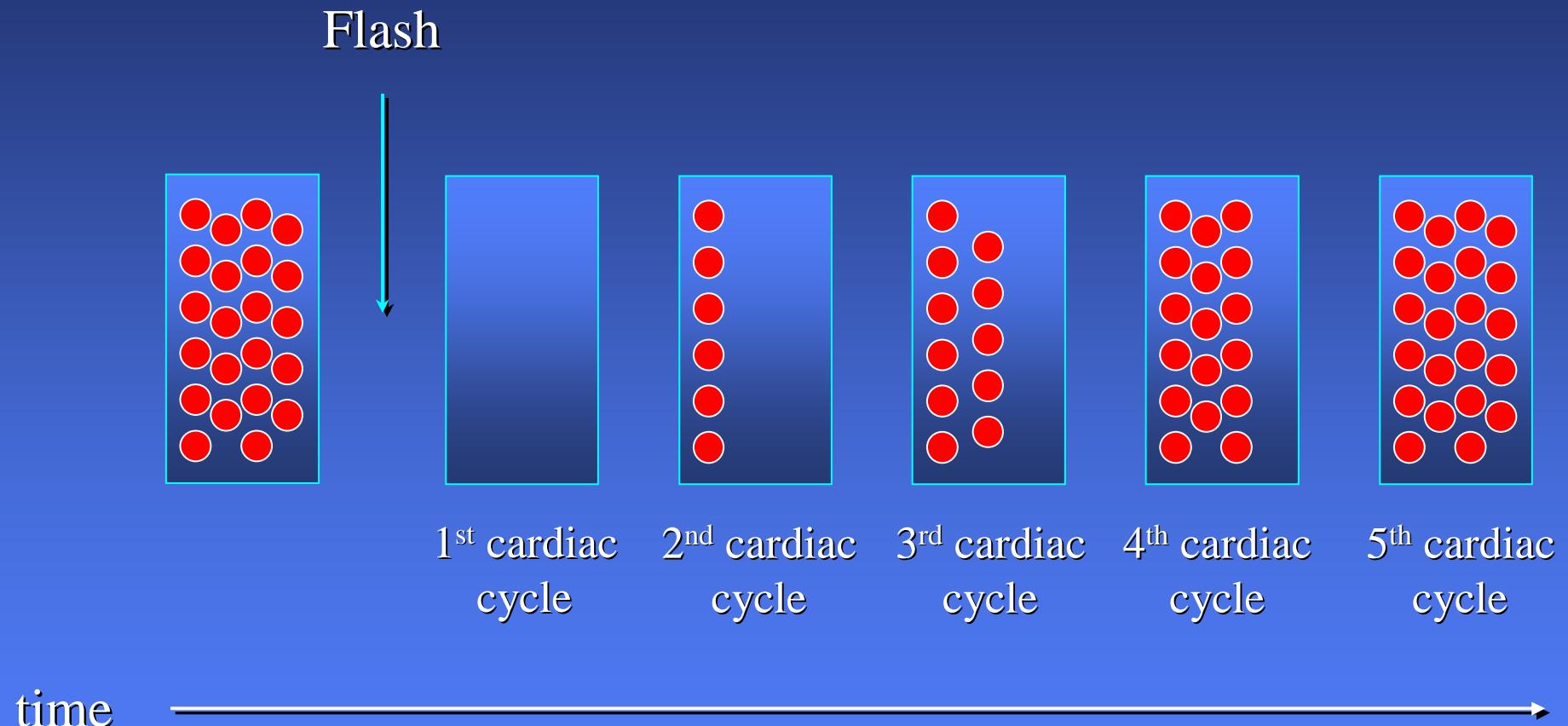
How do we get from myocardial blood volume  
to myocardial blood flow ?

DYNAMIC IMAGING



# Contrast Echocardiography

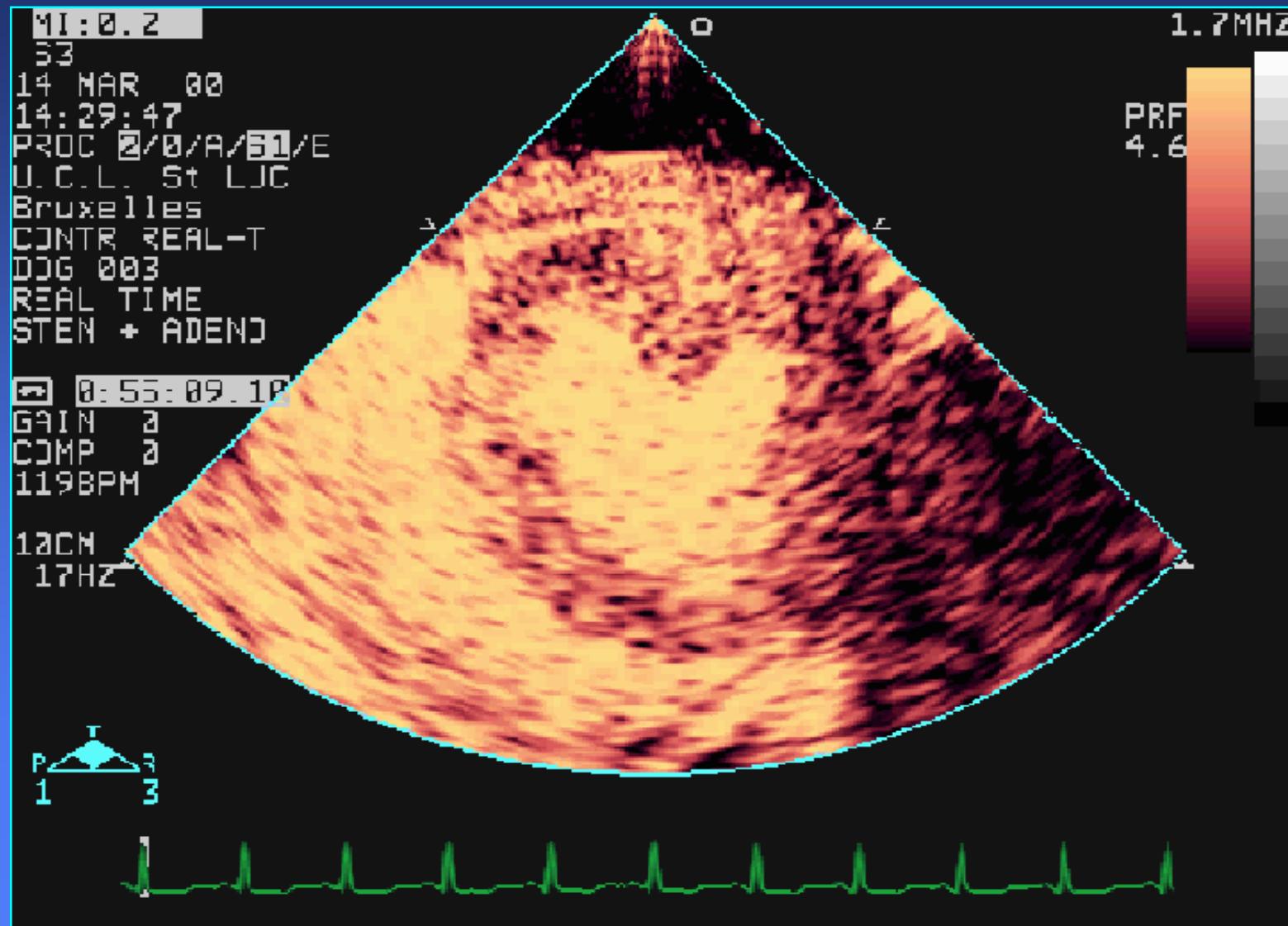
## Quantification of myocardial blood flow





# Contrast Echocardiography

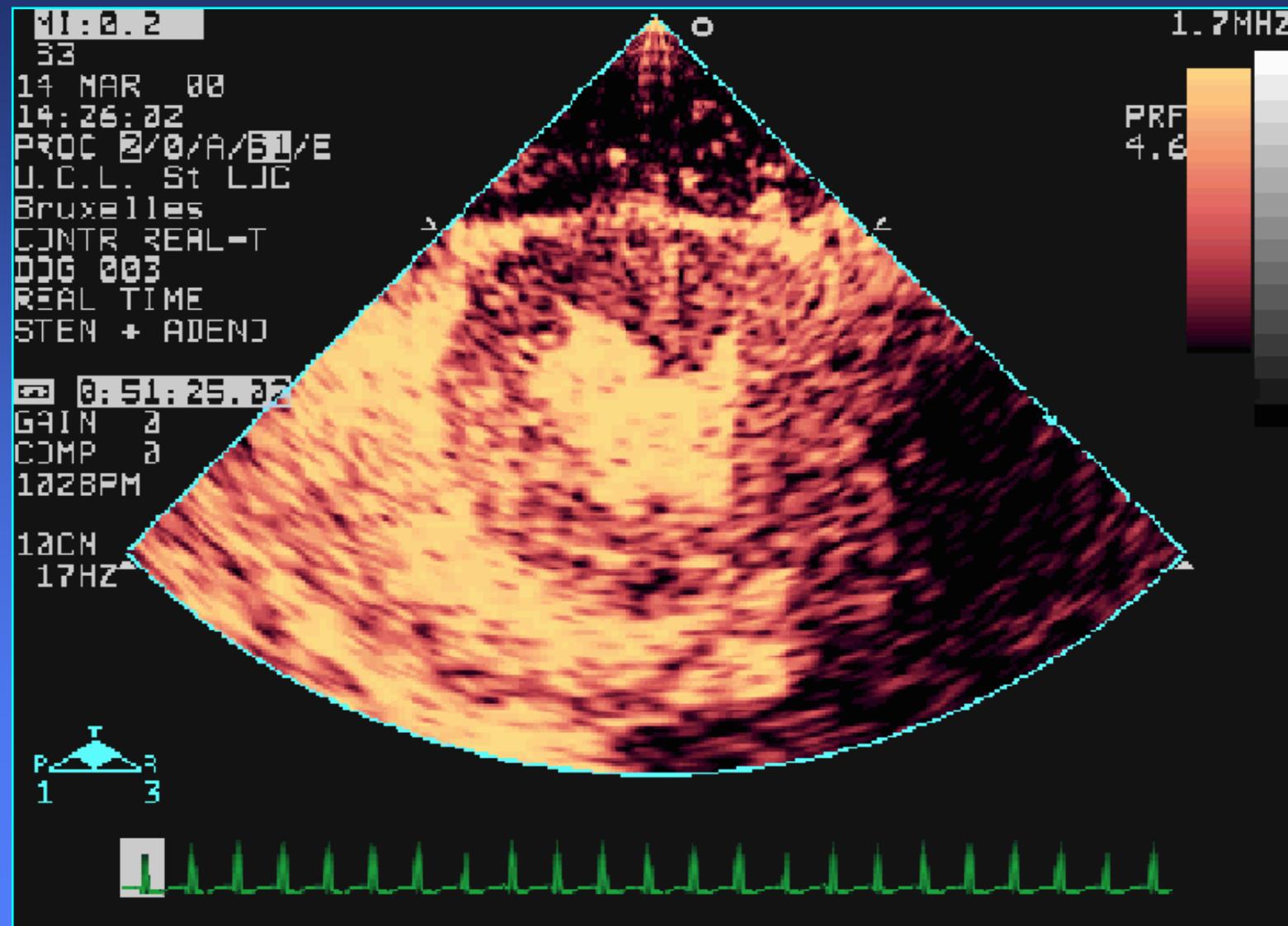
## Real-time perfusion imaging using power modulation

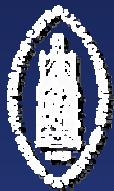




# Contrast Echocardiography

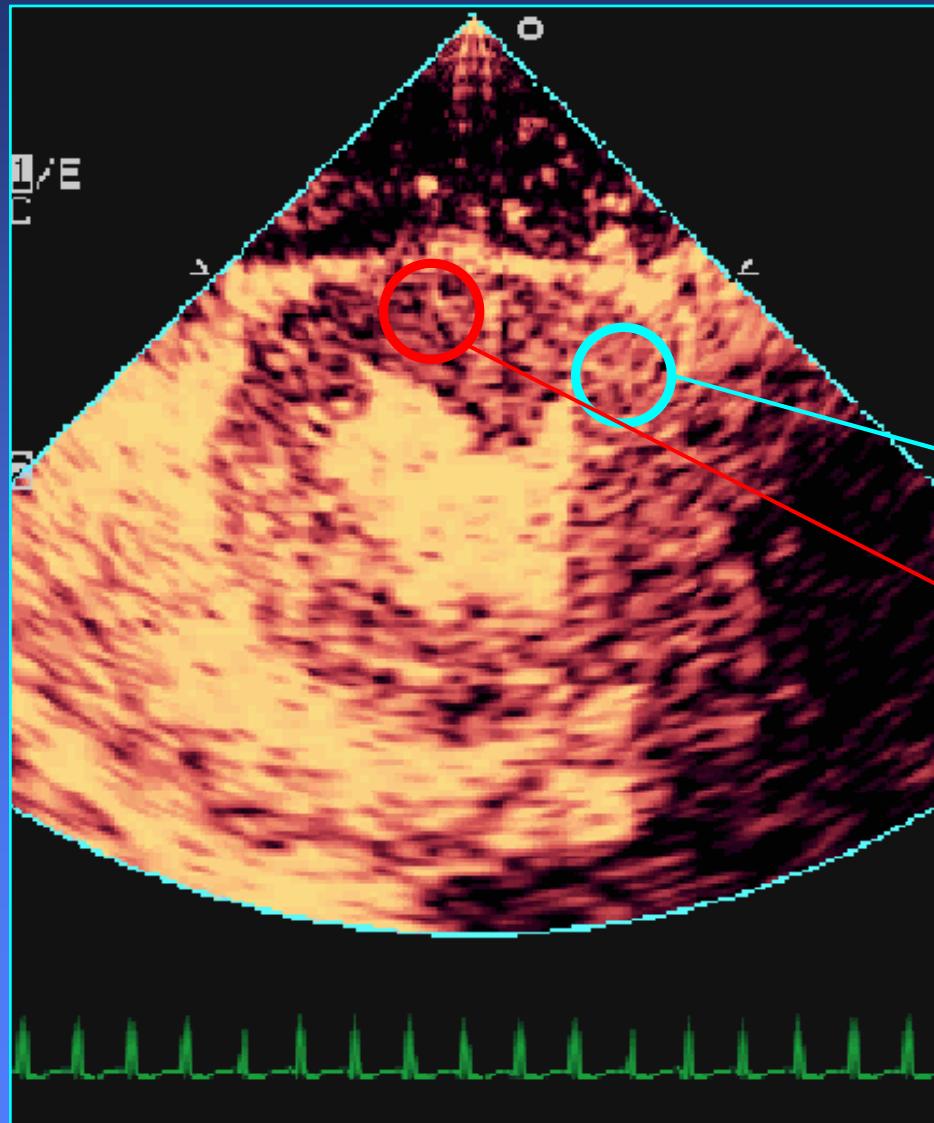
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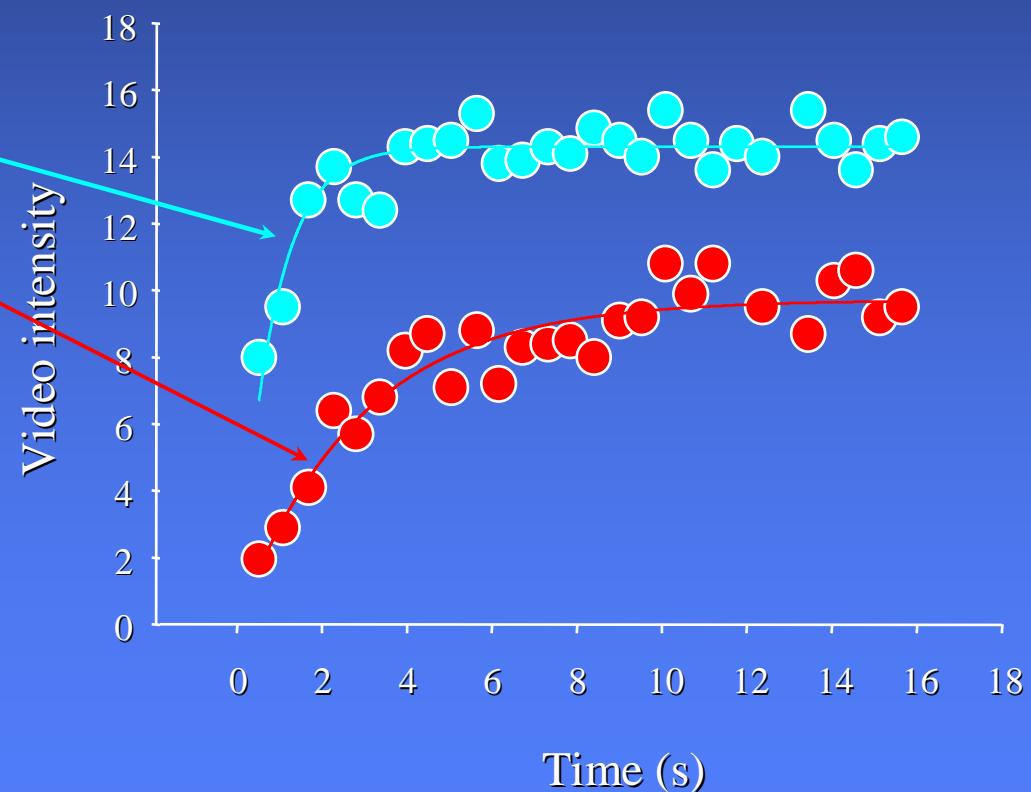


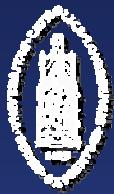
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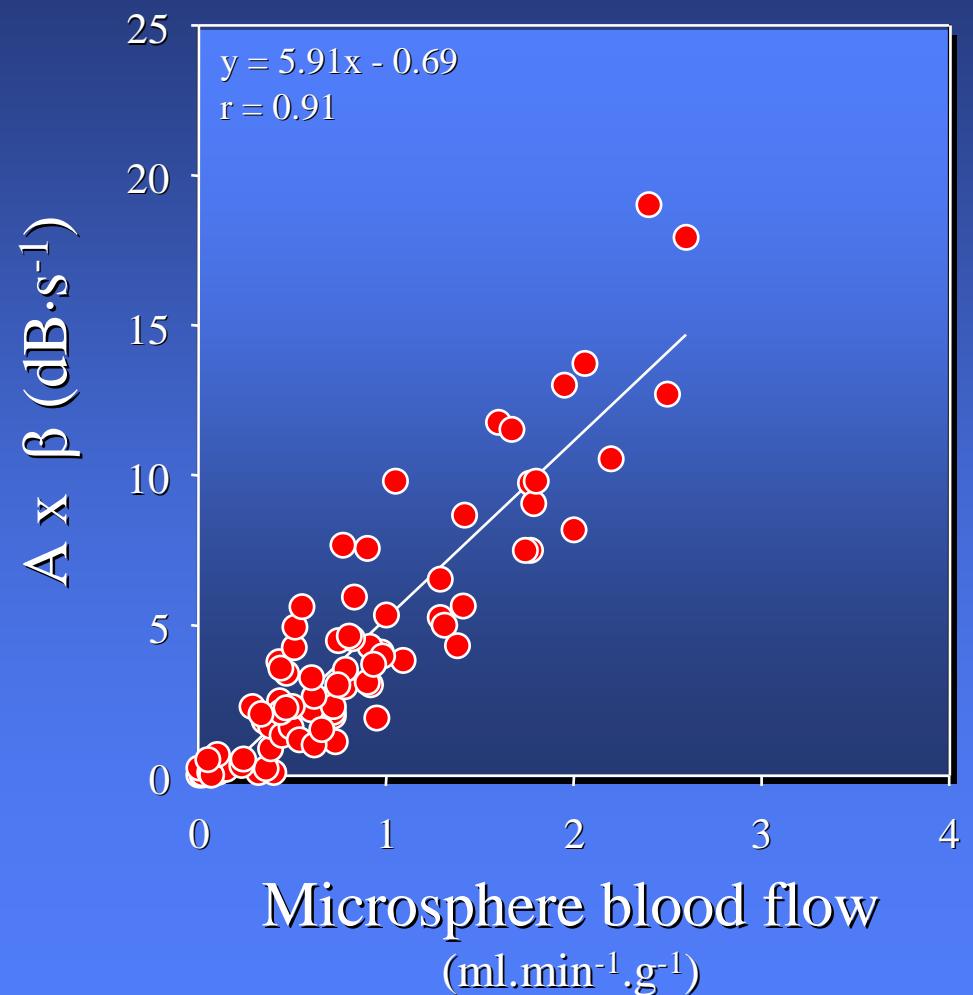
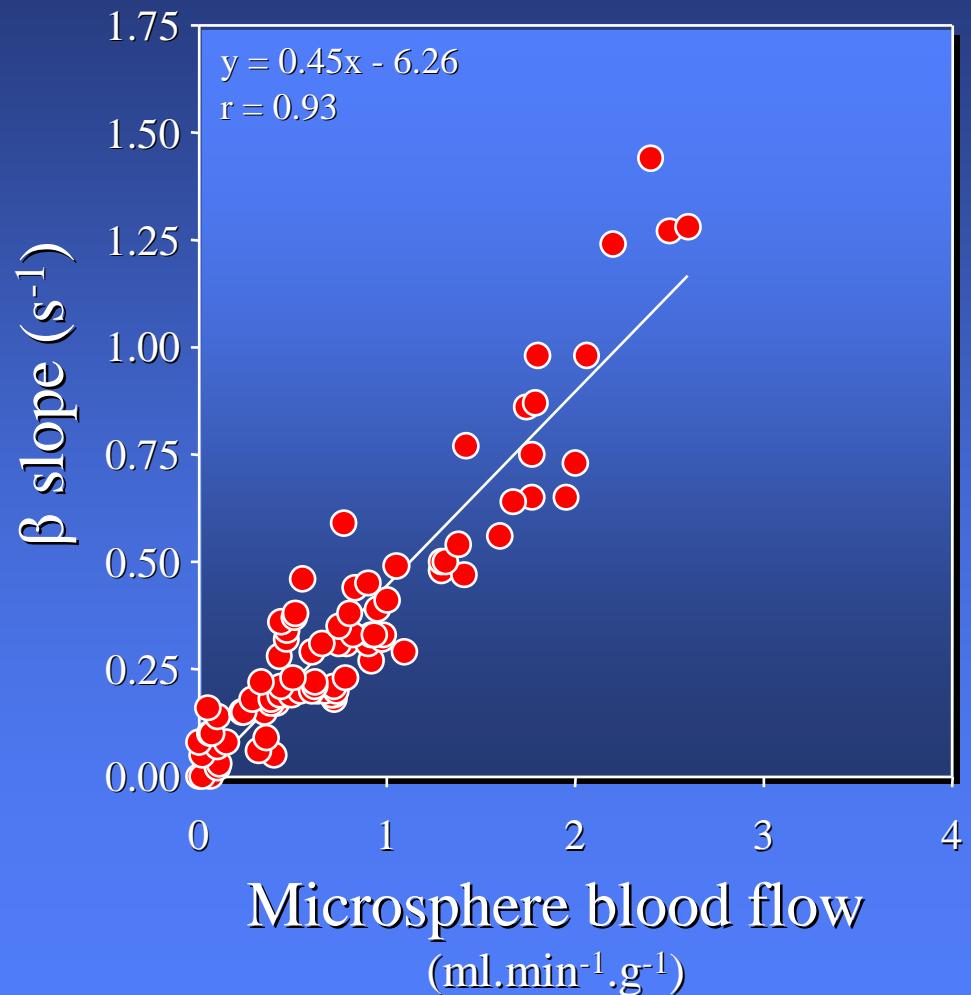
Stenosis + Adenosine

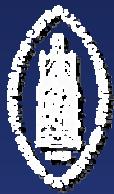




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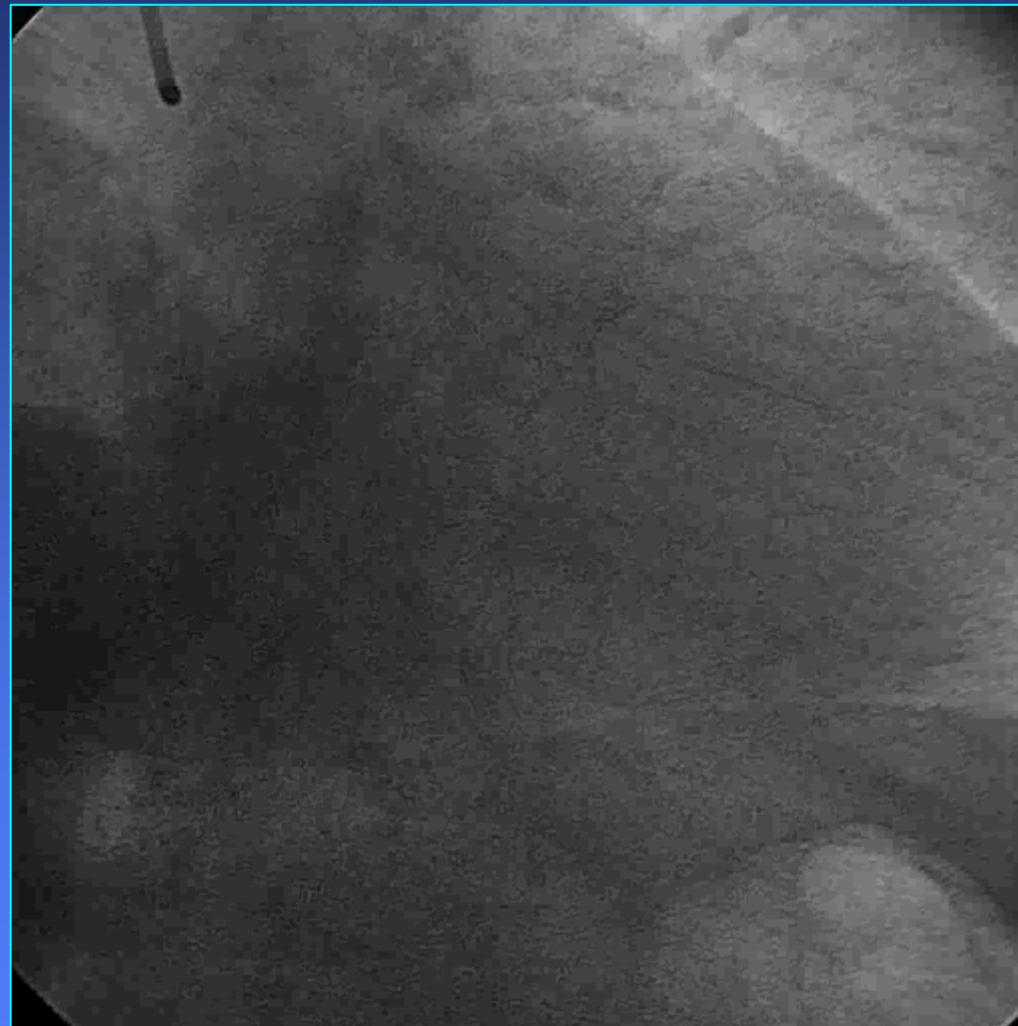
## Real-time perfusion imaging using power modulation

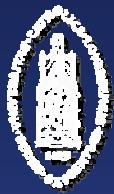




# Contrast Echocardiography

MN, 50 y.o. male



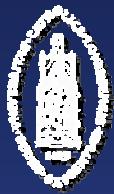


# Contrast Echocardiography

MN, 50 y.o. male

## DIPYRIDAMOLE MCE

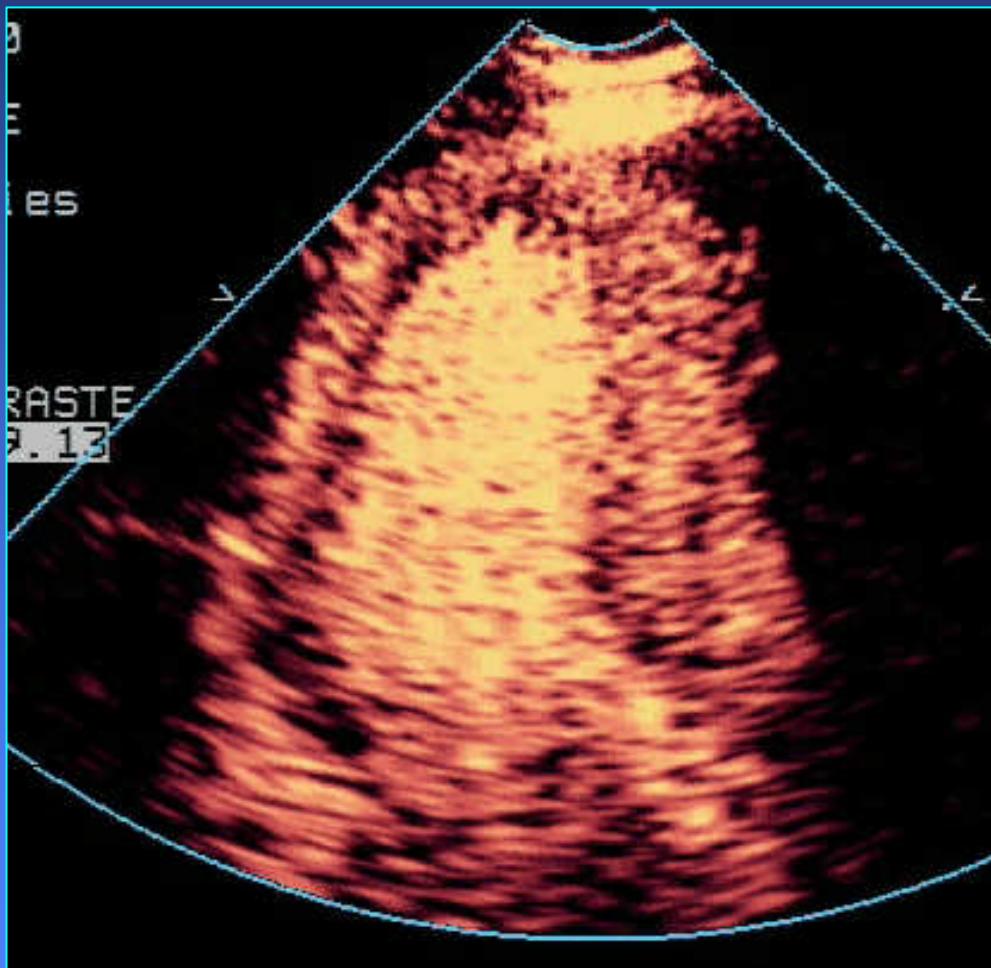




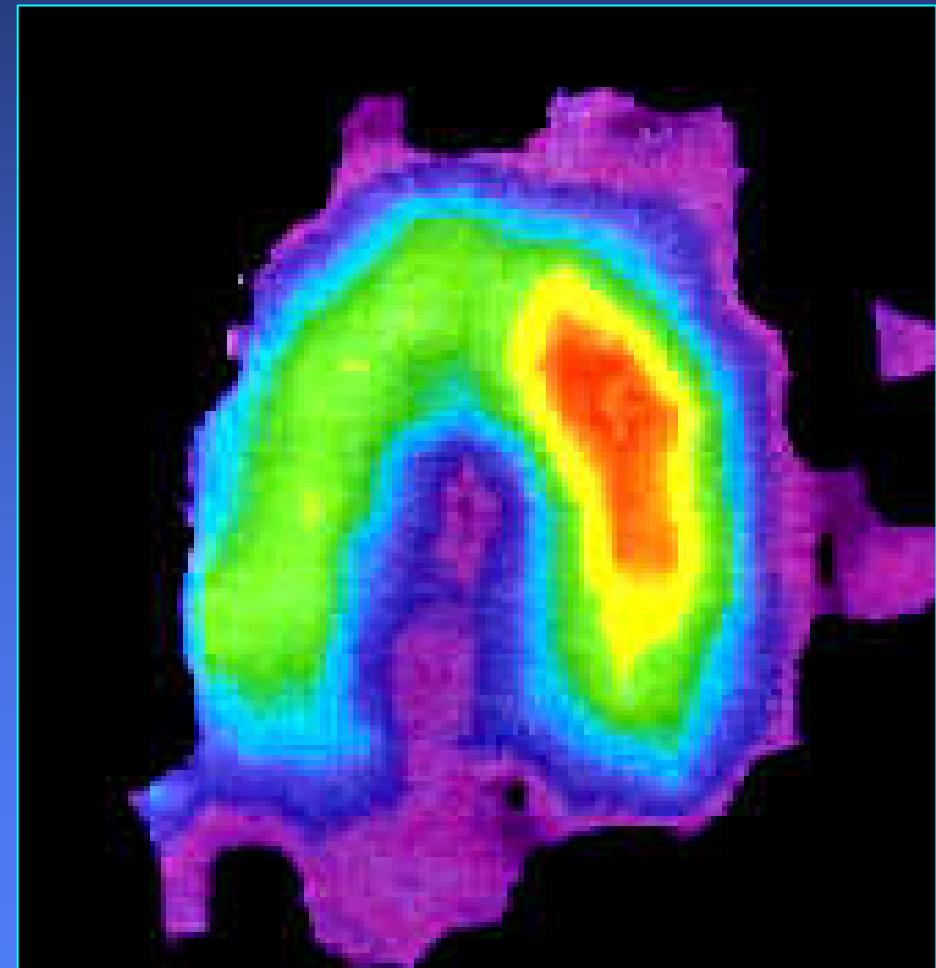
# Contrast Echocardiography

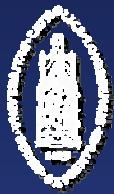
MN, 50 y.o. male

## DIPYRIDAMOLE MCE



## DIPYRIDAMOLE SPECT

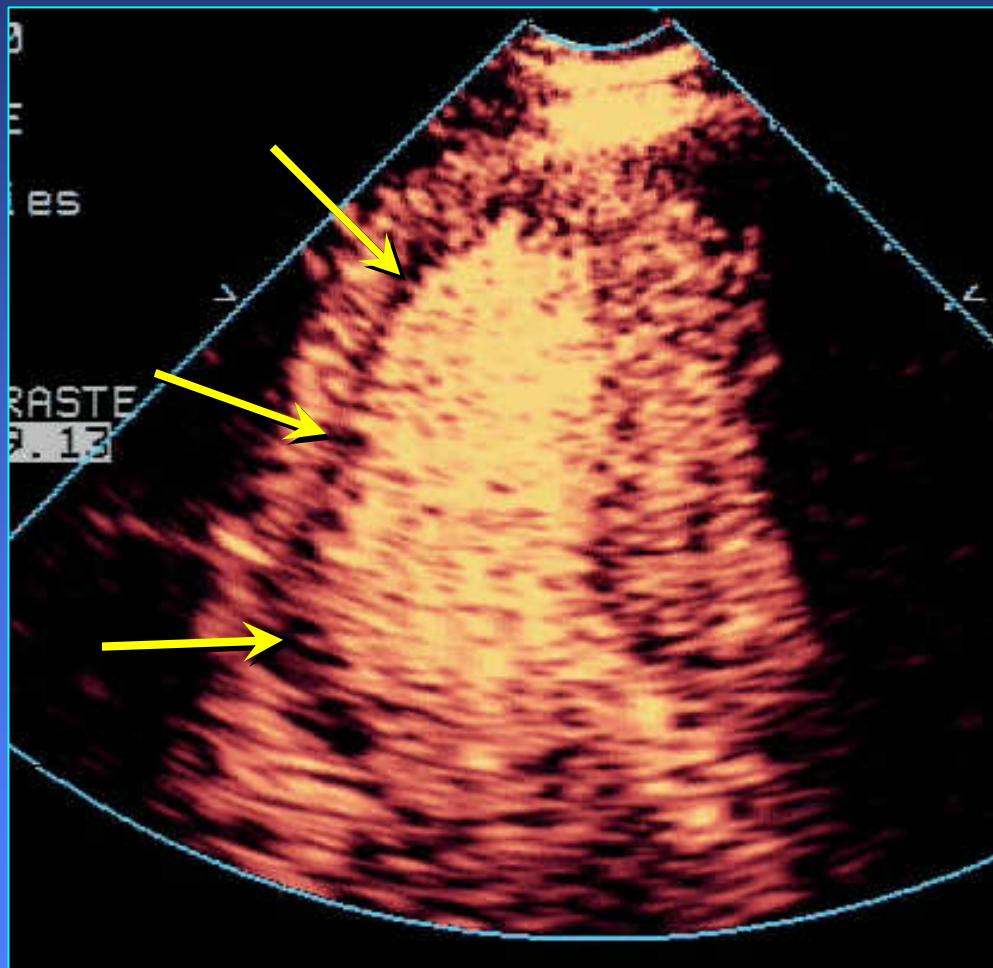




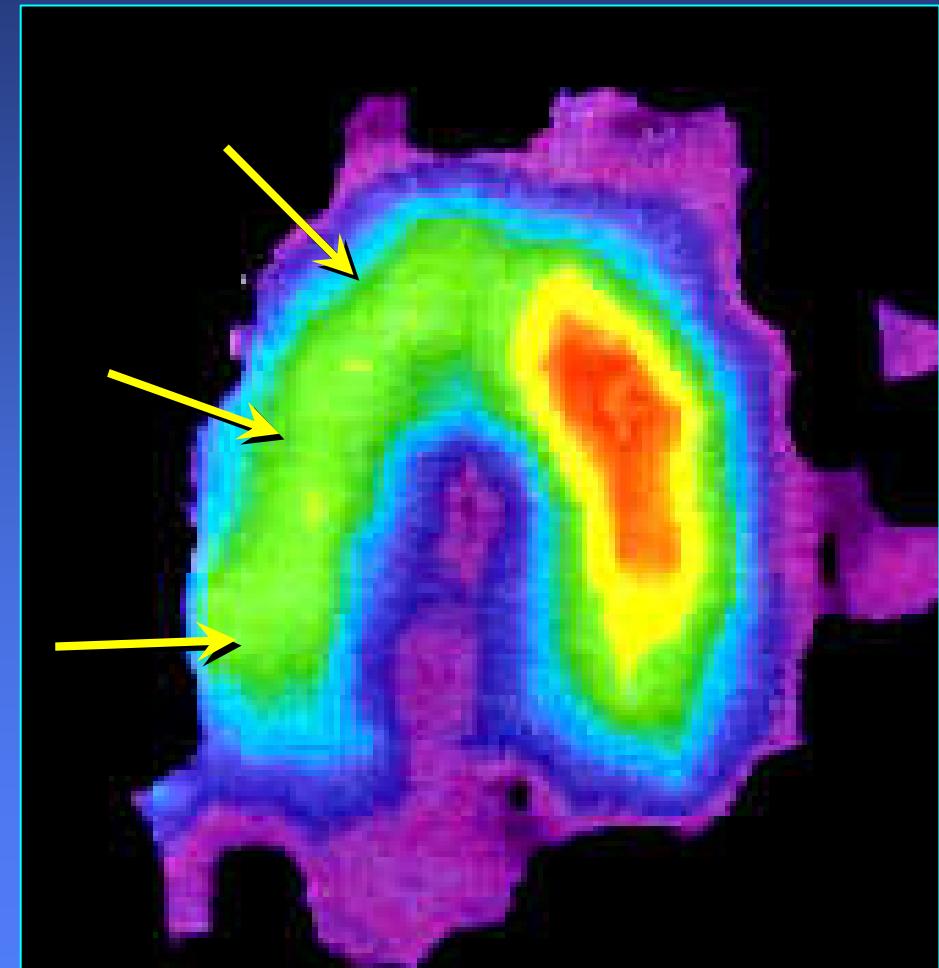
# Contrast Echocardiography

MN, 50 y.o. male

## DIPYRIDAMOLE MCE



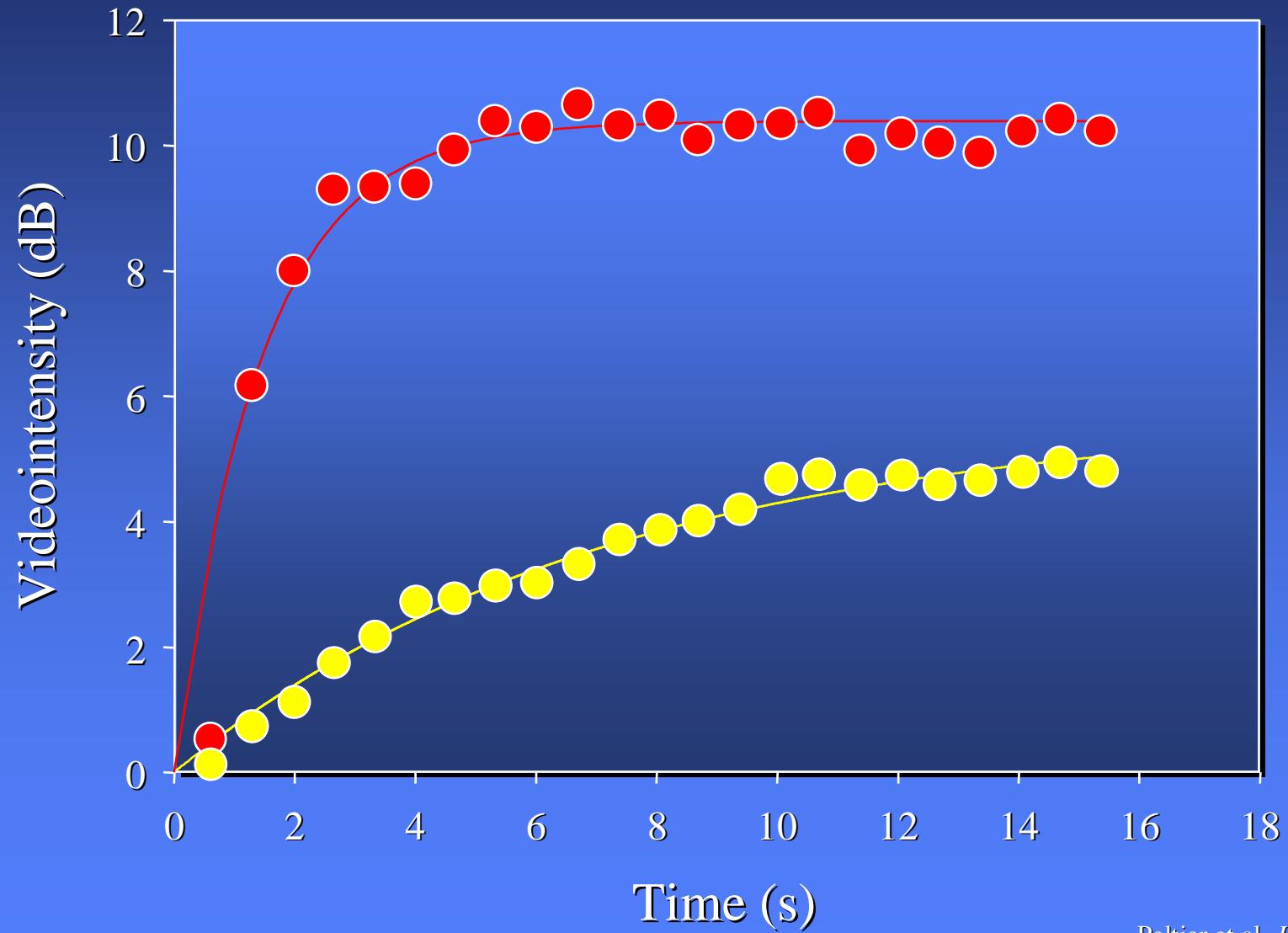
## DIPYRIDAMOLE SPECT





# Contrast Echocardiography

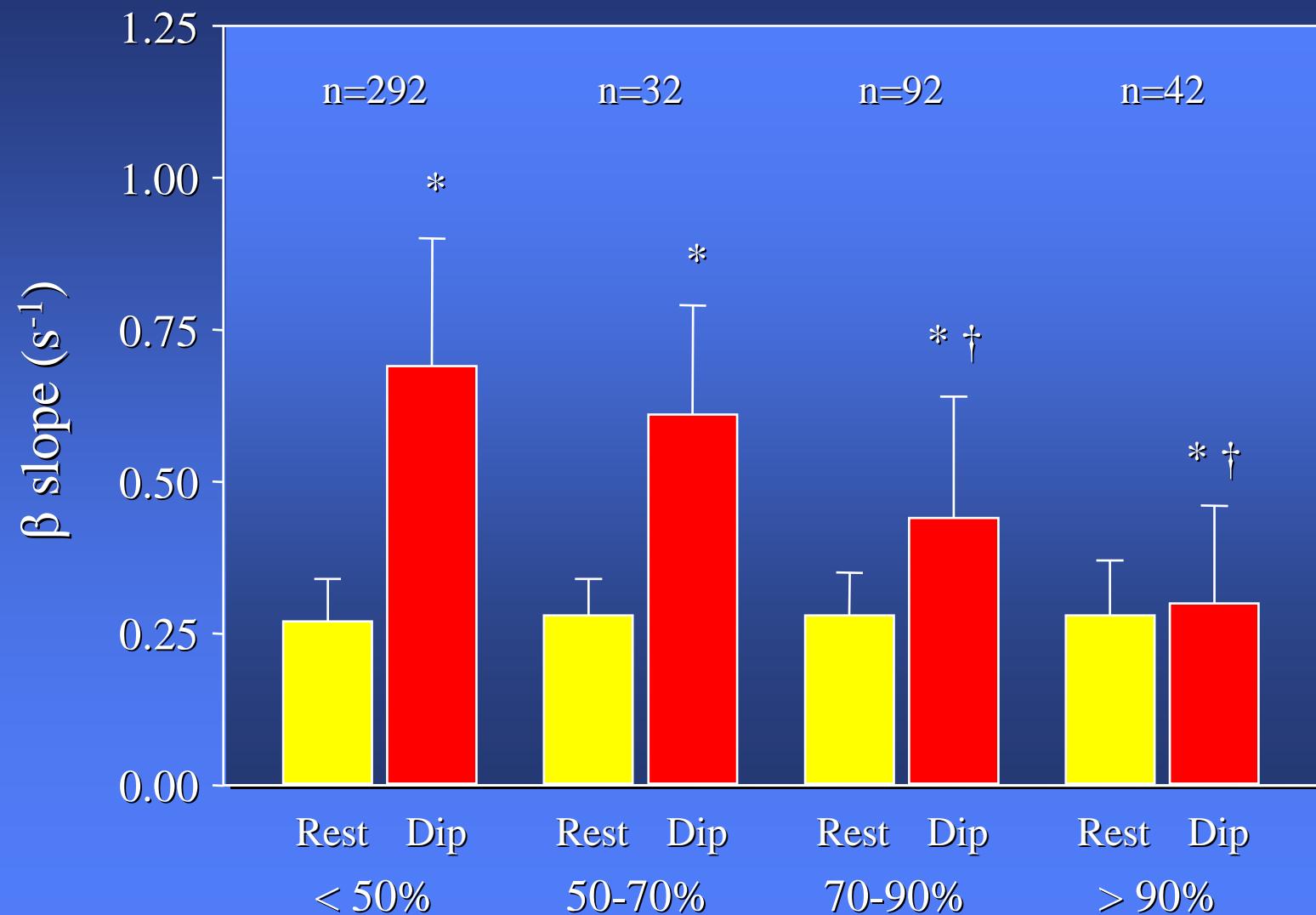
## Dipyridamole real-time Power Modulation





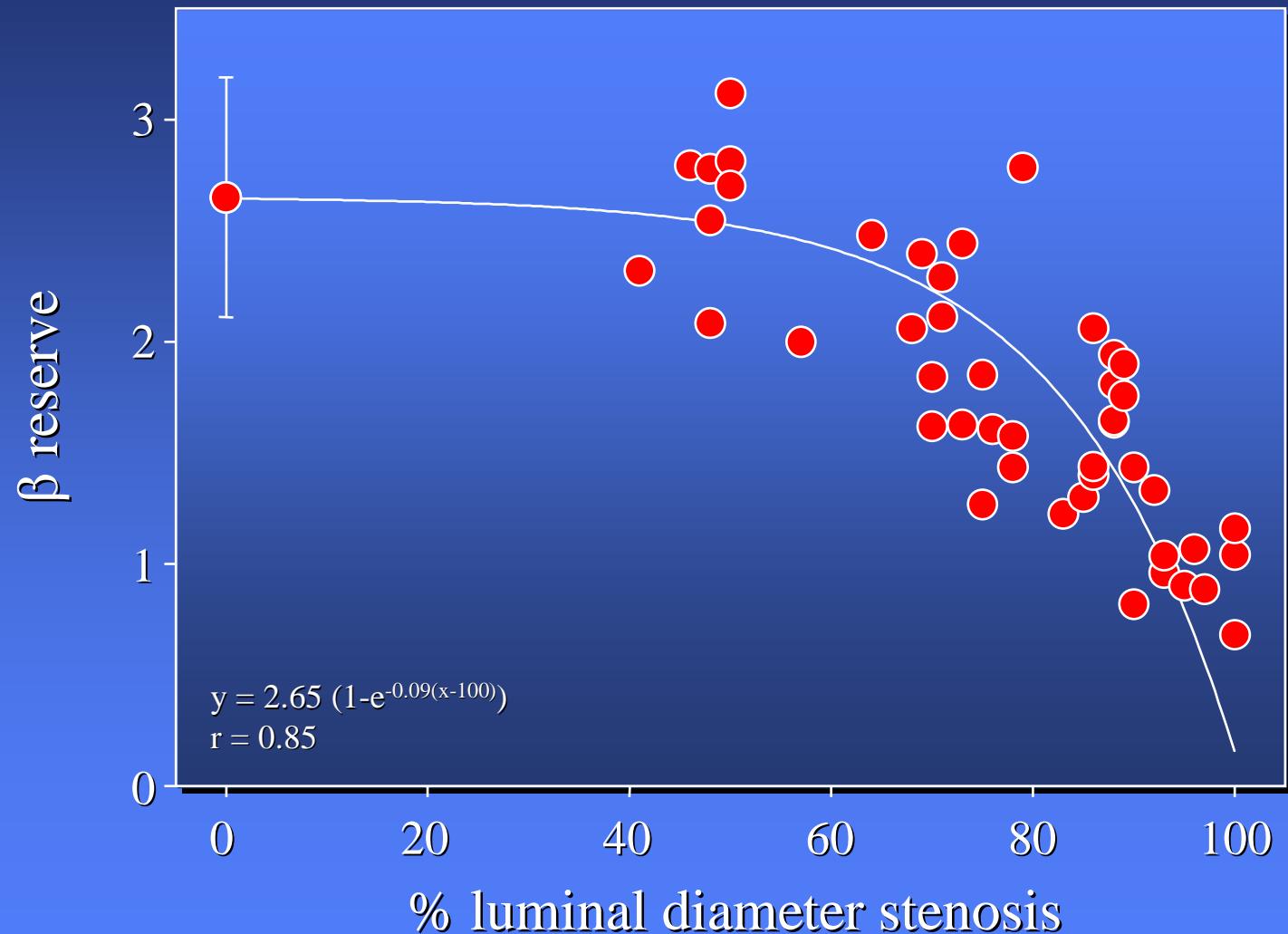
# Contrast Echocardiography

## Dipyridamole real-time Power Modulation





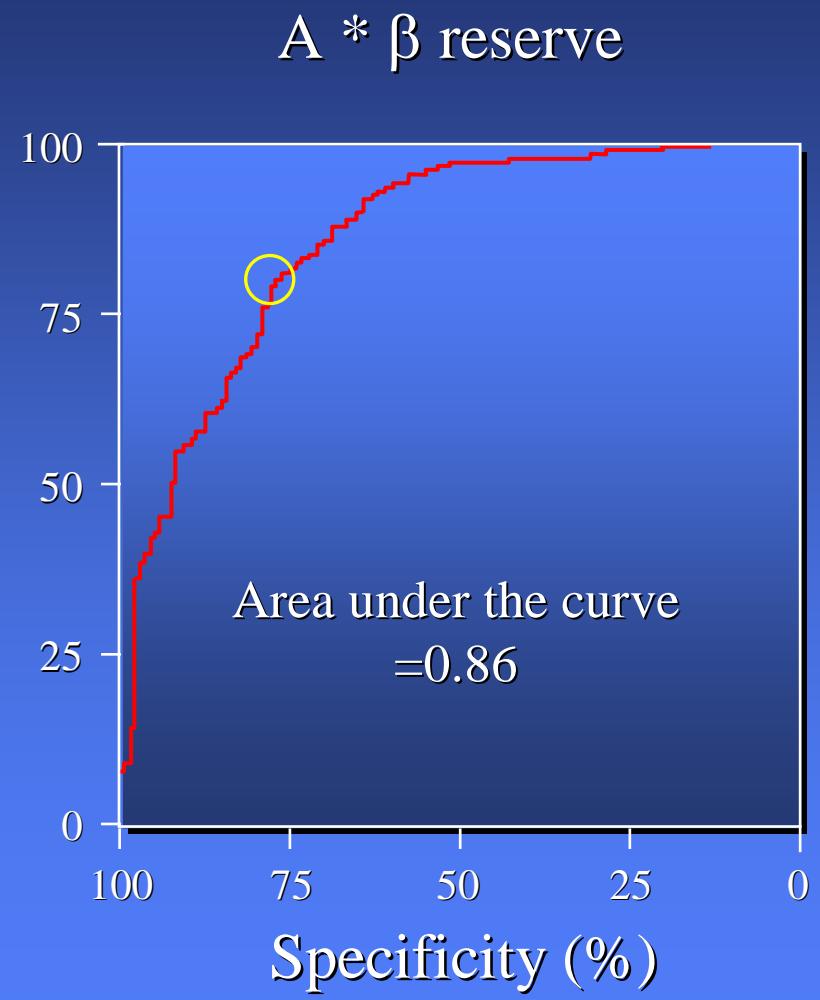
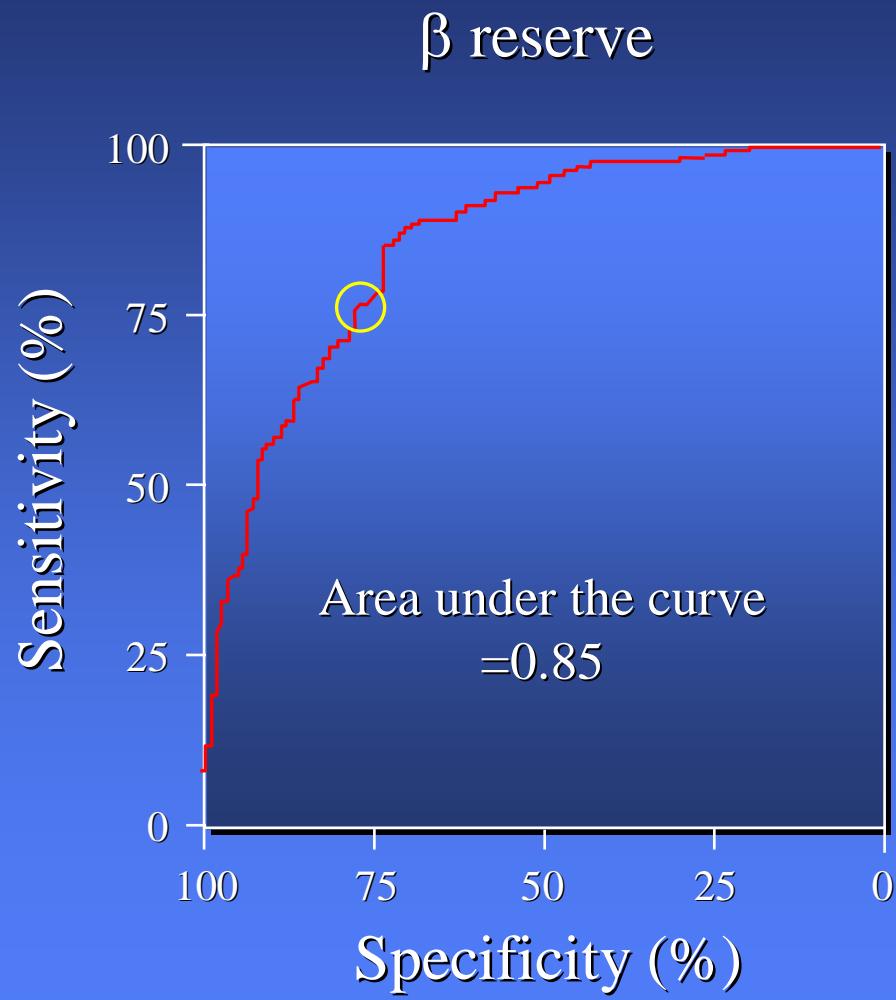
# Contrast Echocardiography Dipyridamole real-time Power Modulation





# Contrast Echocardiography

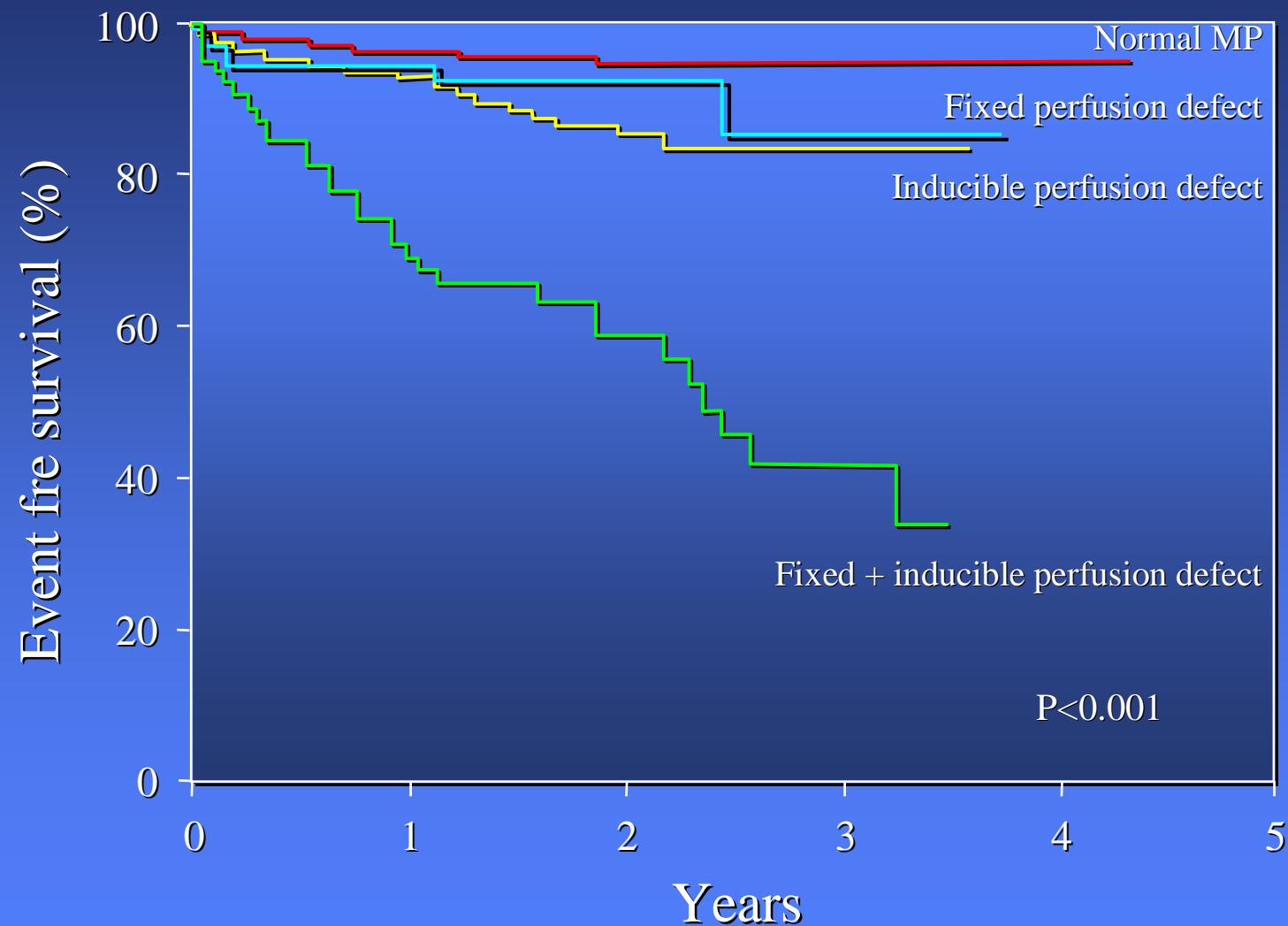
## Dipyridamole real-time Power Modulation





# Contrast Echocardiography

## Dipyridamole RTCE: Prognostic implications

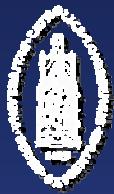




# Contrast Echocardiography

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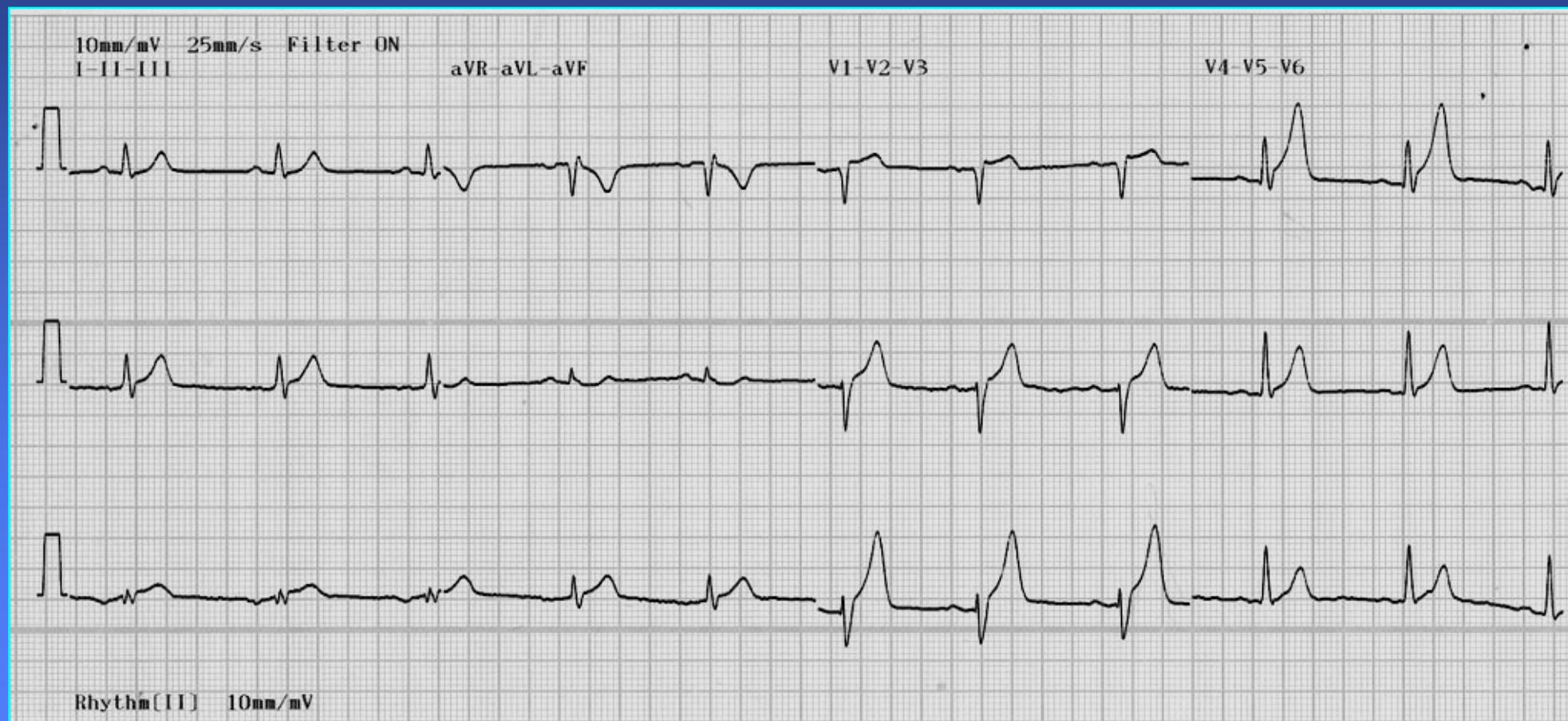
- Left ventricular opacification
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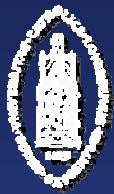


# Contrast Echocardiography

T.V.H. - ♂ - 46 year old

10.43 am : ECG





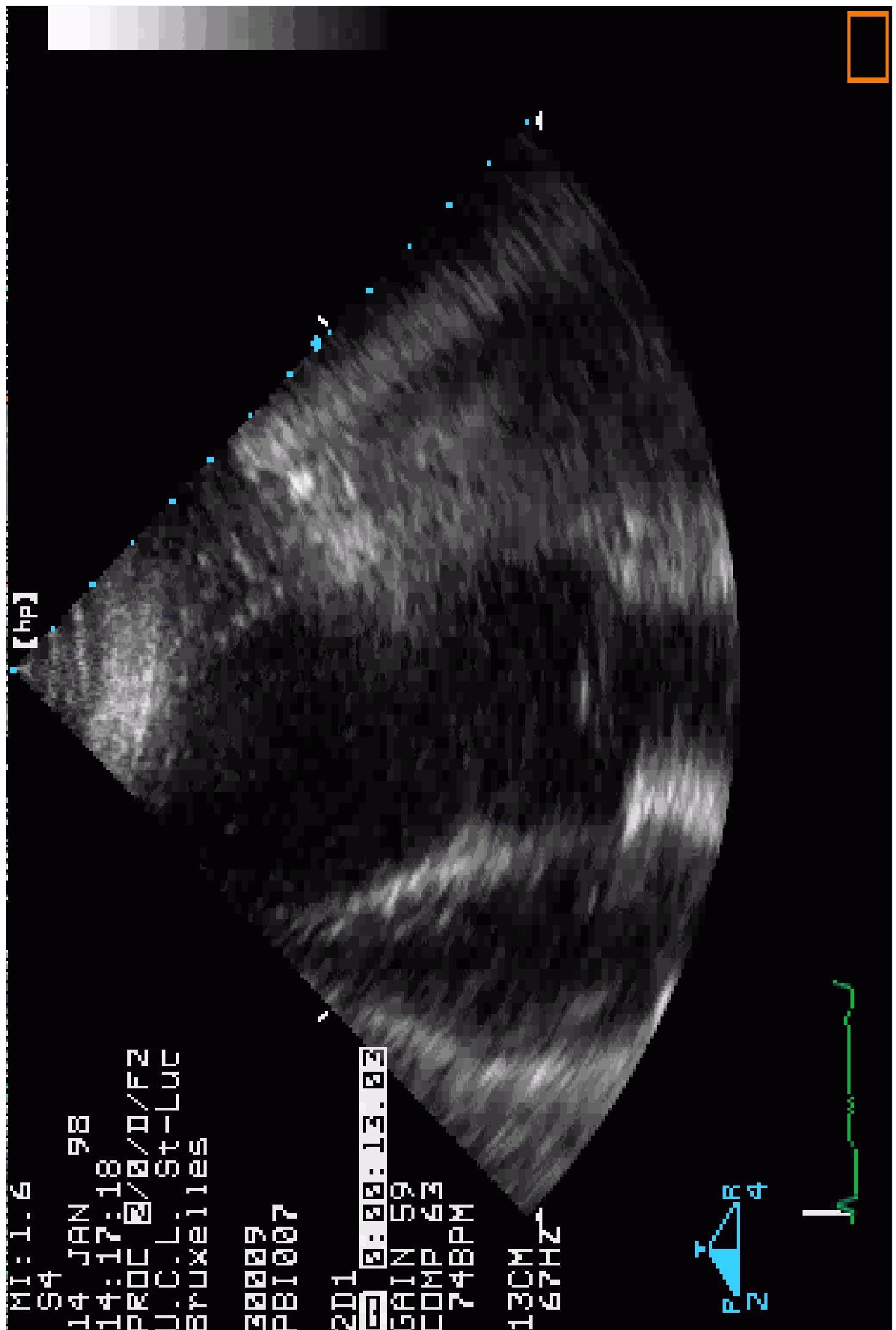
# Contrast Echocardiography

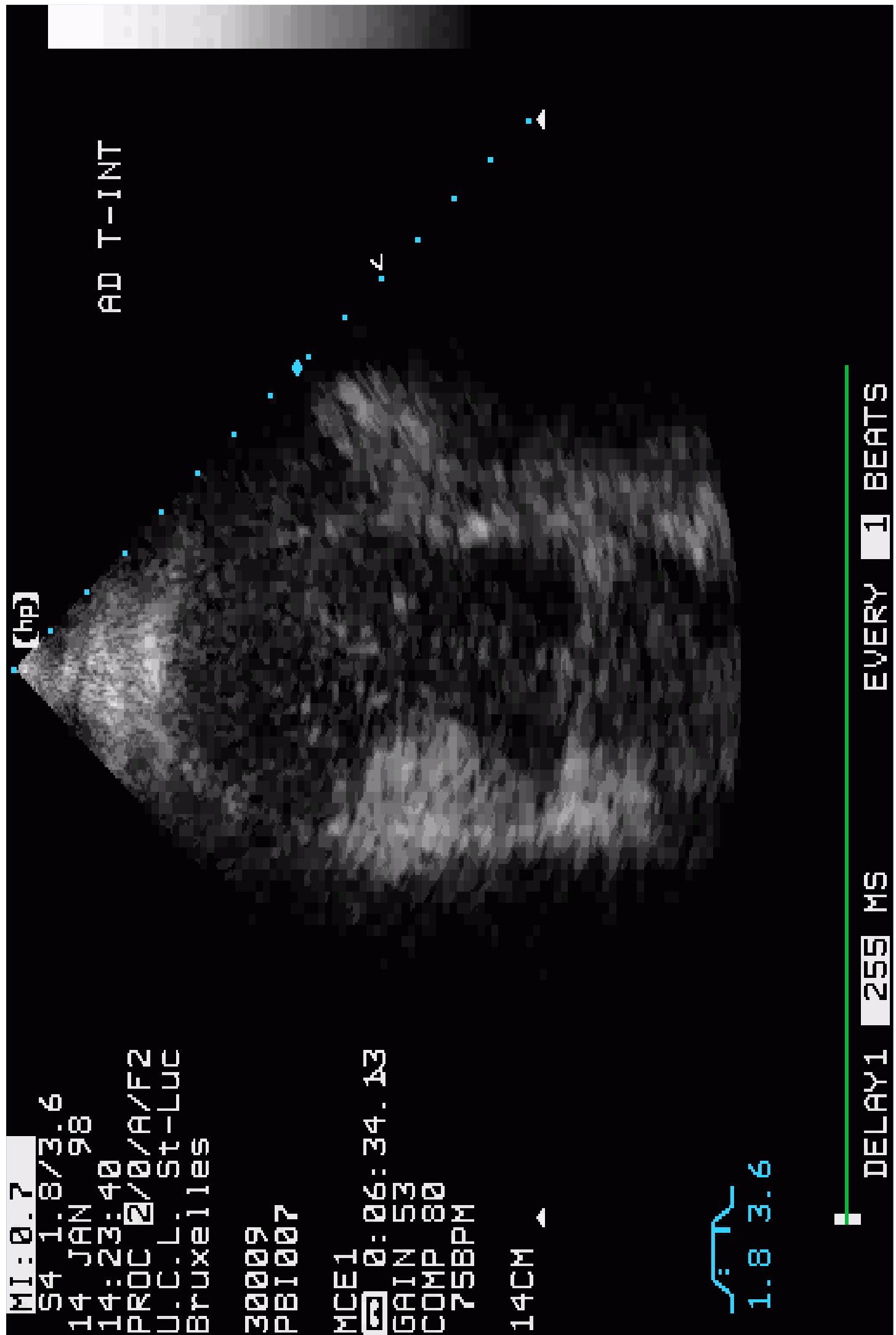
T.V.H. - ♂ - 46 year old

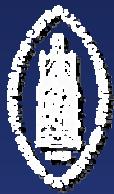
11.43 am

*Coronary angiography*





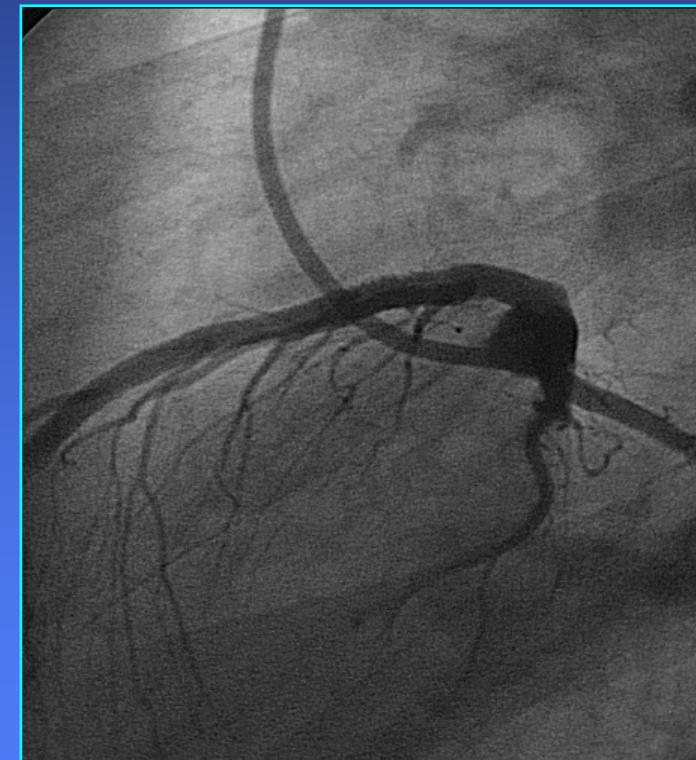


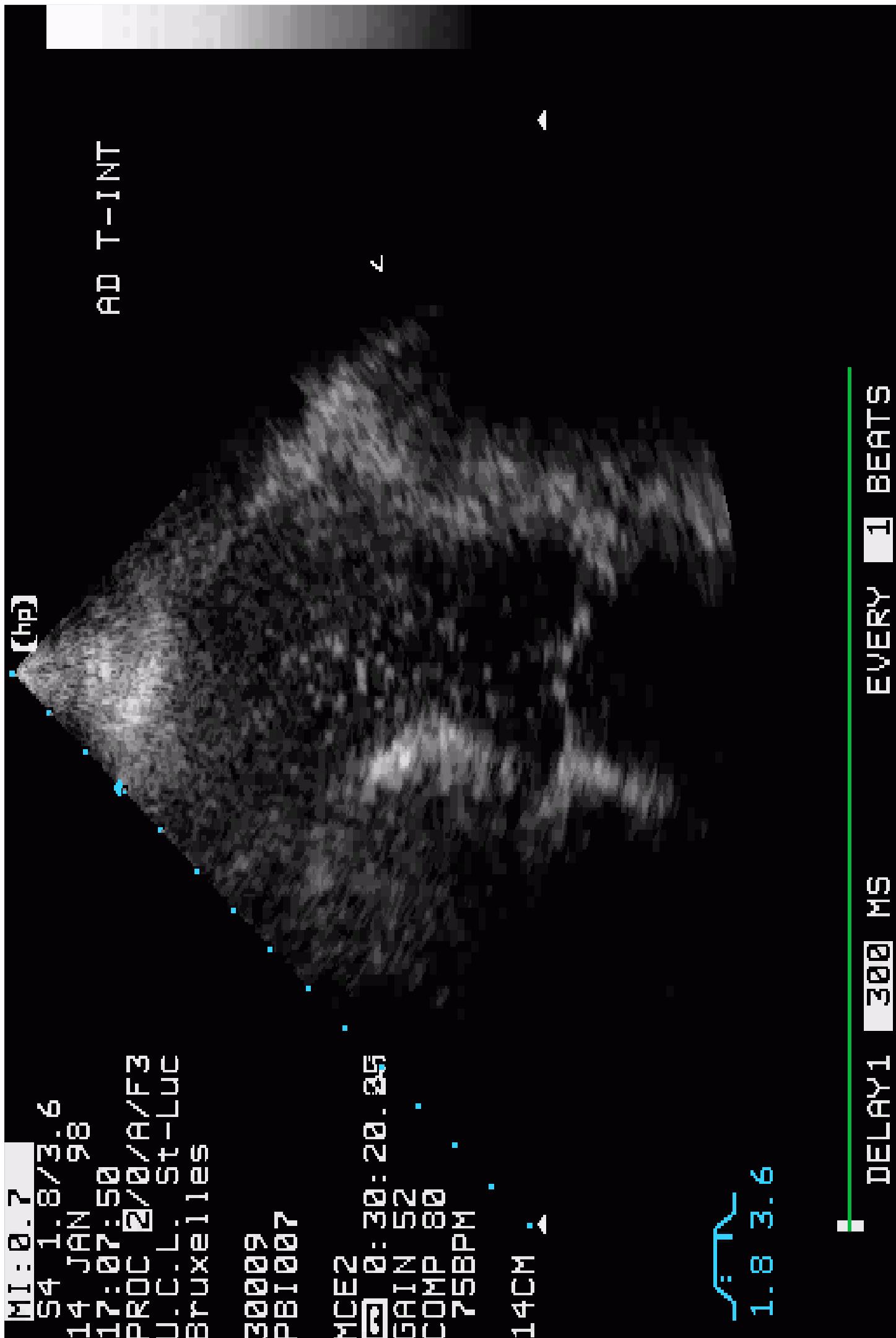


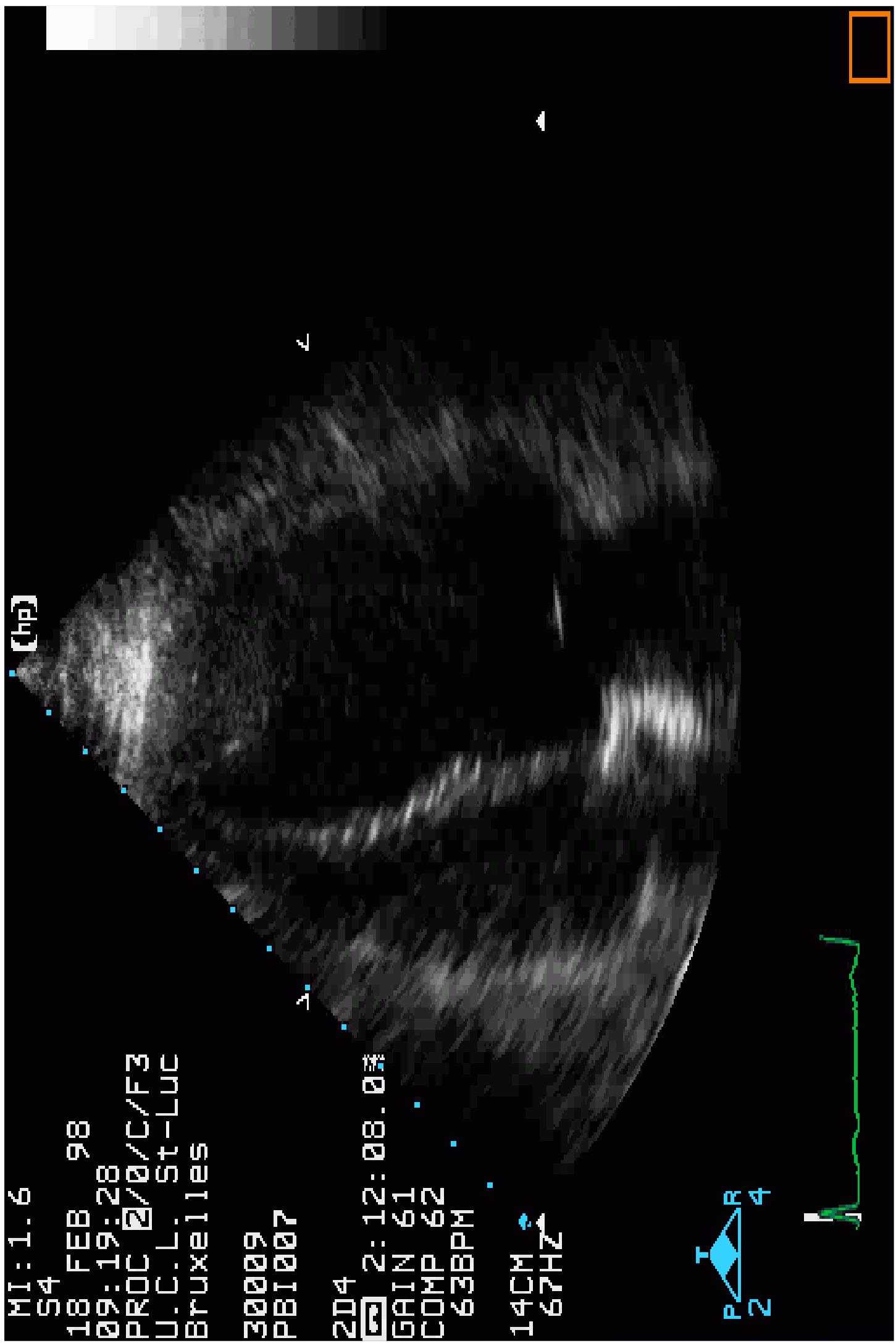
# Contrast Echocardiography

T.V.H. - ♂ - 46 year old

*11.53 am : direct angioplasty and stenting*



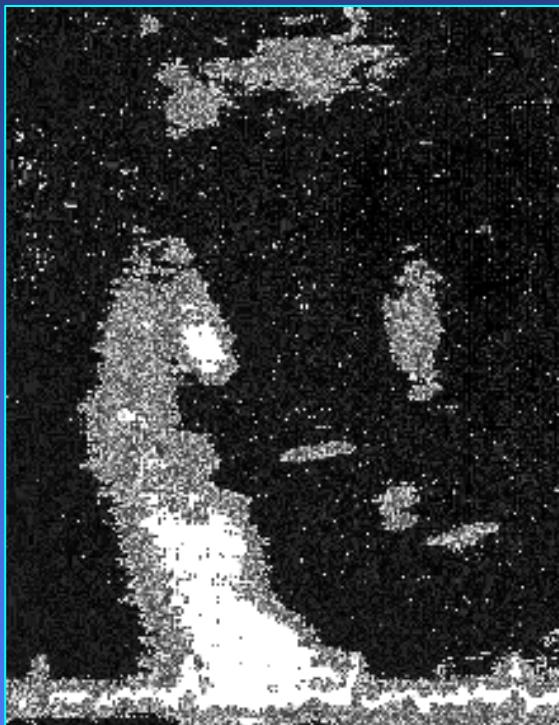




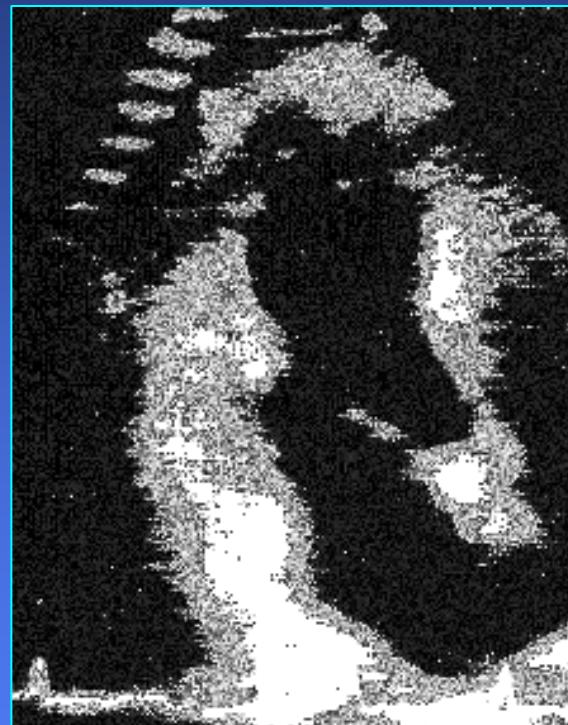


# Contrast Echocardiography

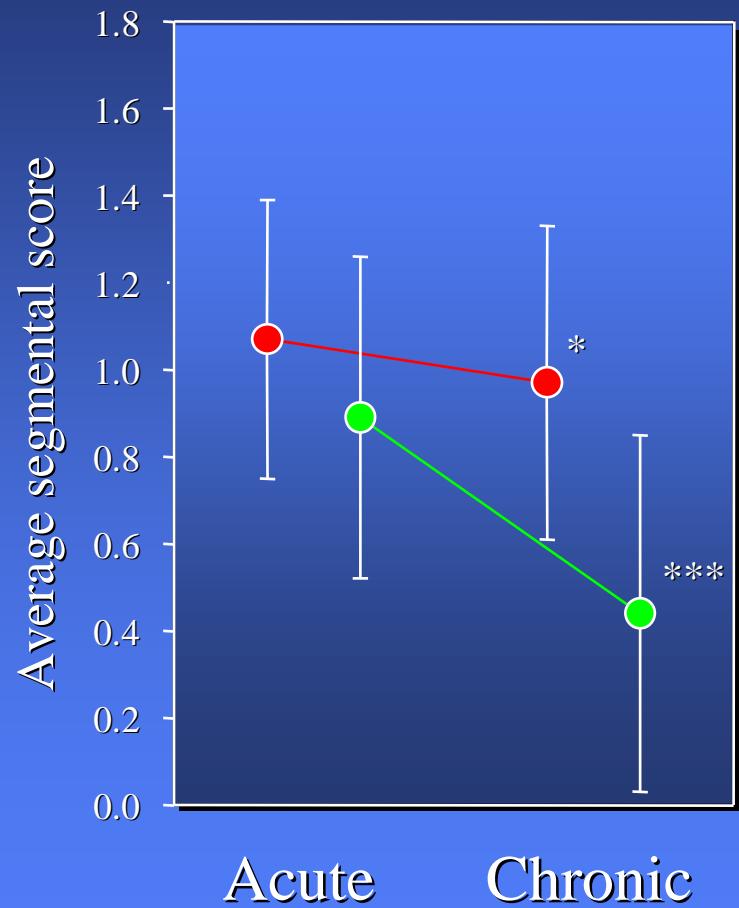
Assessment of the « no-reflow » phenomenon by i.c. MCE

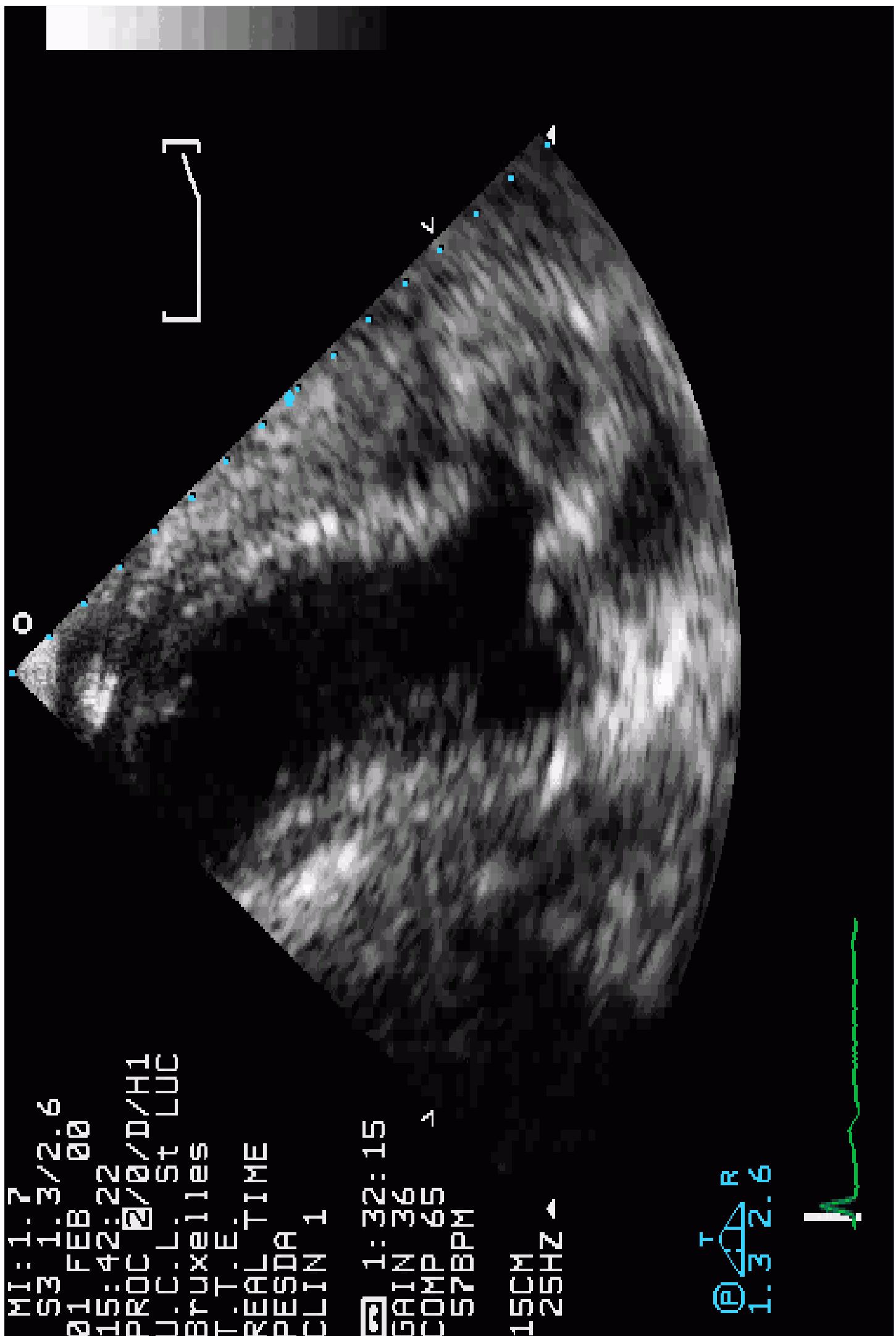


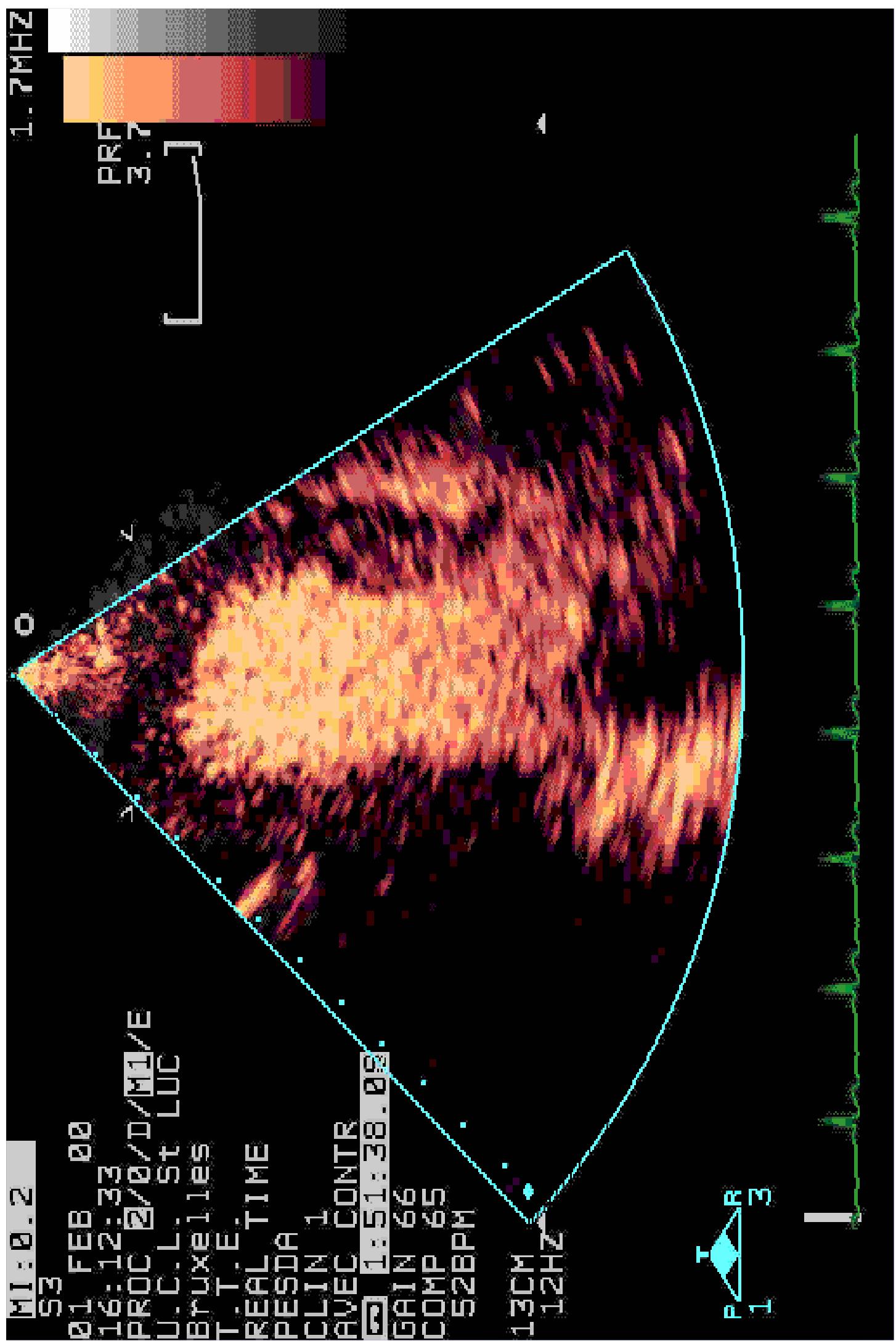
Before PTCA

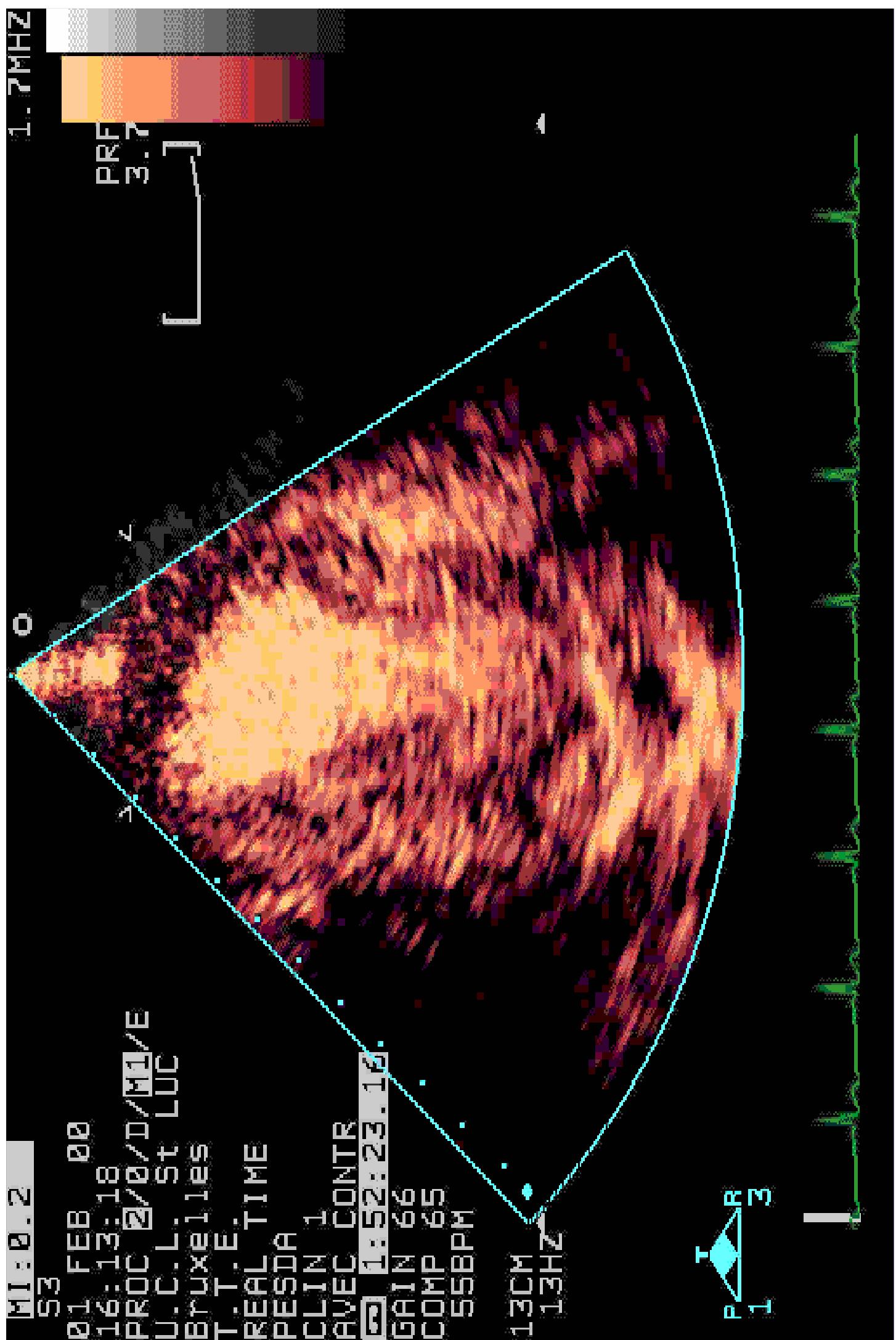


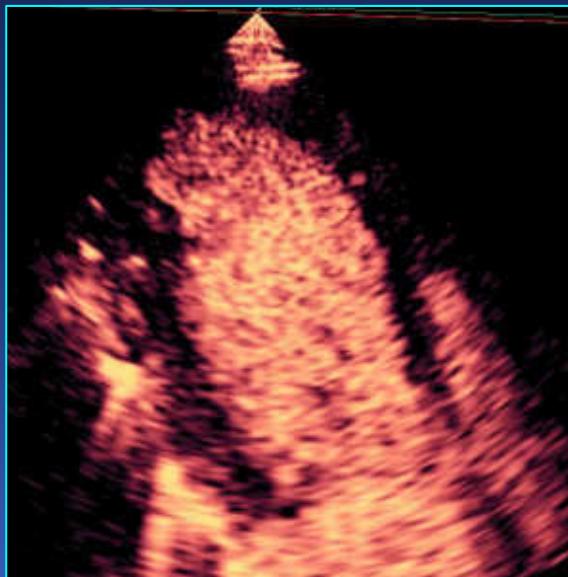
After PTCA



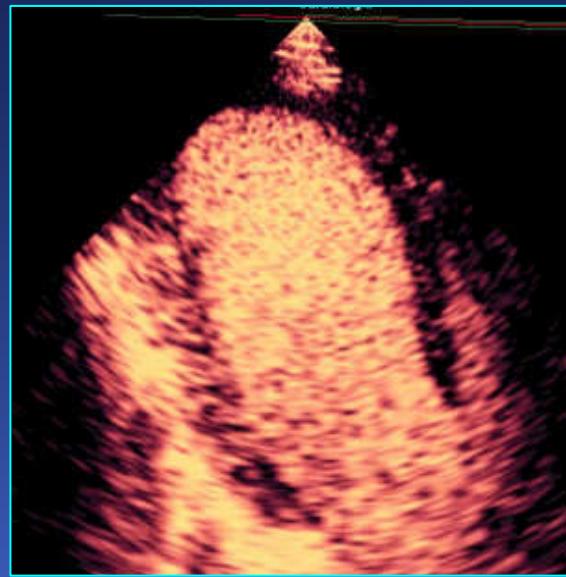




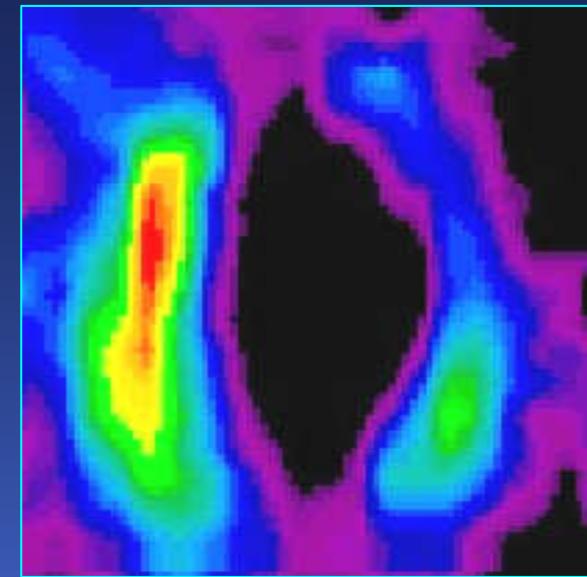




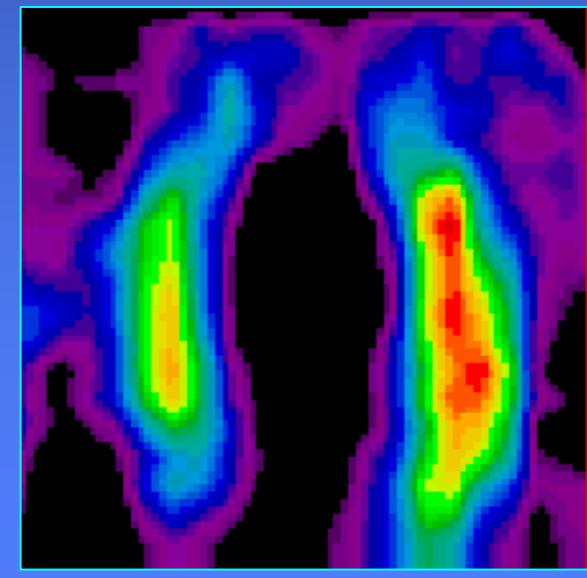
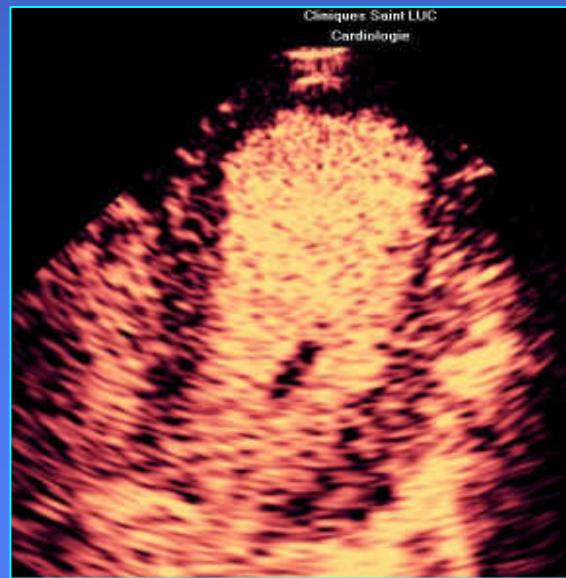
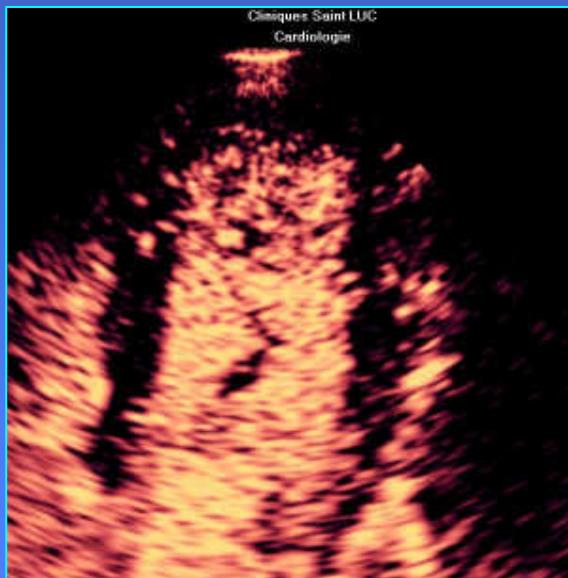
After FLASH



After refill



MIBI SPECT





## Contrast Echocardiography

### Detection of myocardial viability with intravenous MCE

	Early MCE	Late MCE
Sensitivity	21%	62%
Specificity	89%	85%
PPV	63%	78%
NPV	57%	72%



# Contrast Echocardiography

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- Left ventricular opacification
- Myocardial perfusion
- Assessment of reperfusion and myocardial viability