ポスター発表 | 二心室修復1

歯 2025年7月12日(土) 10:40 ~ 11:40 **血** ポスター会場(文化会館棟 2F 第1・2ギャラリー)1 ポスター発表(III-P02-1) 二心室修復1

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[III-P02-1-02] Surgical Repair for Dysplastic Aortic Valve with Atretic Left Coronary Sinus Inducing Left Coronary Artery Occlusion: A Case Report

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Case presentation: A 9 months-old female was referred to our hospital for left coronary artery (LCA) ostial stenosis detected during follow-up for suspected left ventricle noncompaction. At age 3, coronary angiography revealed a slit-like LCA os with collateral vessels from right coronary artery. The multidisciplinary discussion indicated surgery, where a deformed left coronary cusp (LCC) causing dynamic obstruction of LCA was discovered. The atretic LCC was augmented with fresh auto-pericardial patch. She was discharged on postoperative day 6 without complications. Four years later, she experienced sudden syncope while climbing stairs. Computed tomography (CT) scans showed a thickened LCC but no coronary artery stenosis. A redo operation was performed. The operative findings showed that the thickened LCC leaflet was attached to the aortic wall obstructing LCA os and left coronary sinus was also atretic. The restrictive LCC leaflet was carefully dissected from aortic wall and augmented again with fresh autopericardial patch. The left coronary sinus was also augmented and widened with GA-fixed auto-pericardial patch. She was discharged on postoperative day 9 without complications. Conclusion: This case highlights coronary insufficiency caused by dysplastic aortic valve tissue obstructing coronary os. The precise diagnosis and team-approach discussions are crucial in managing this complicated and rare disease.