



# **Case-based learning session-3**

## **Ischemic heart**

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**Vice-President of Azerbaijan Society of Cardiology**



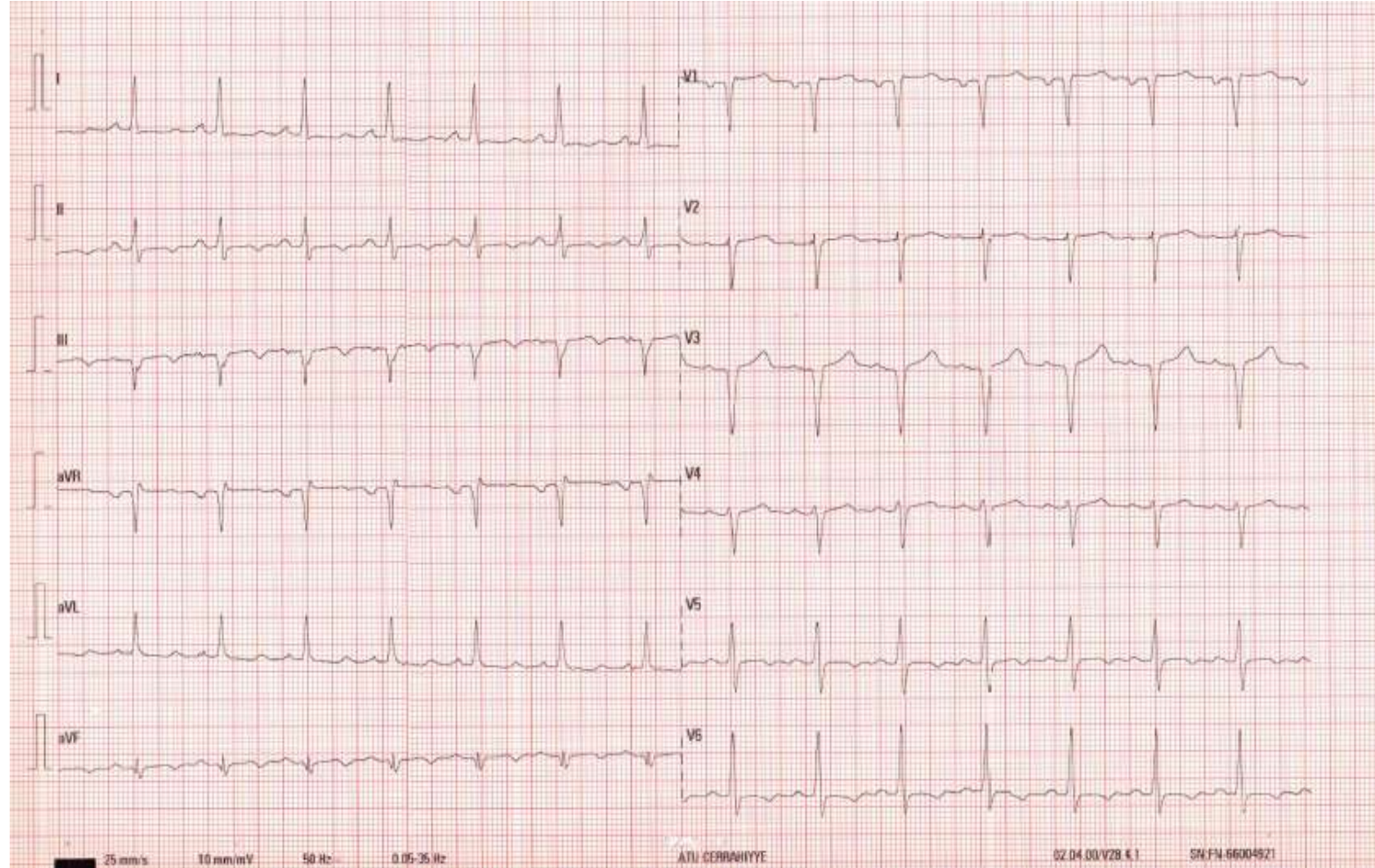
# Case 1

# Case 1 Ms.M.

- 61 y.o woman Patient M.Q., with signs&symptoms of HF

- ECG

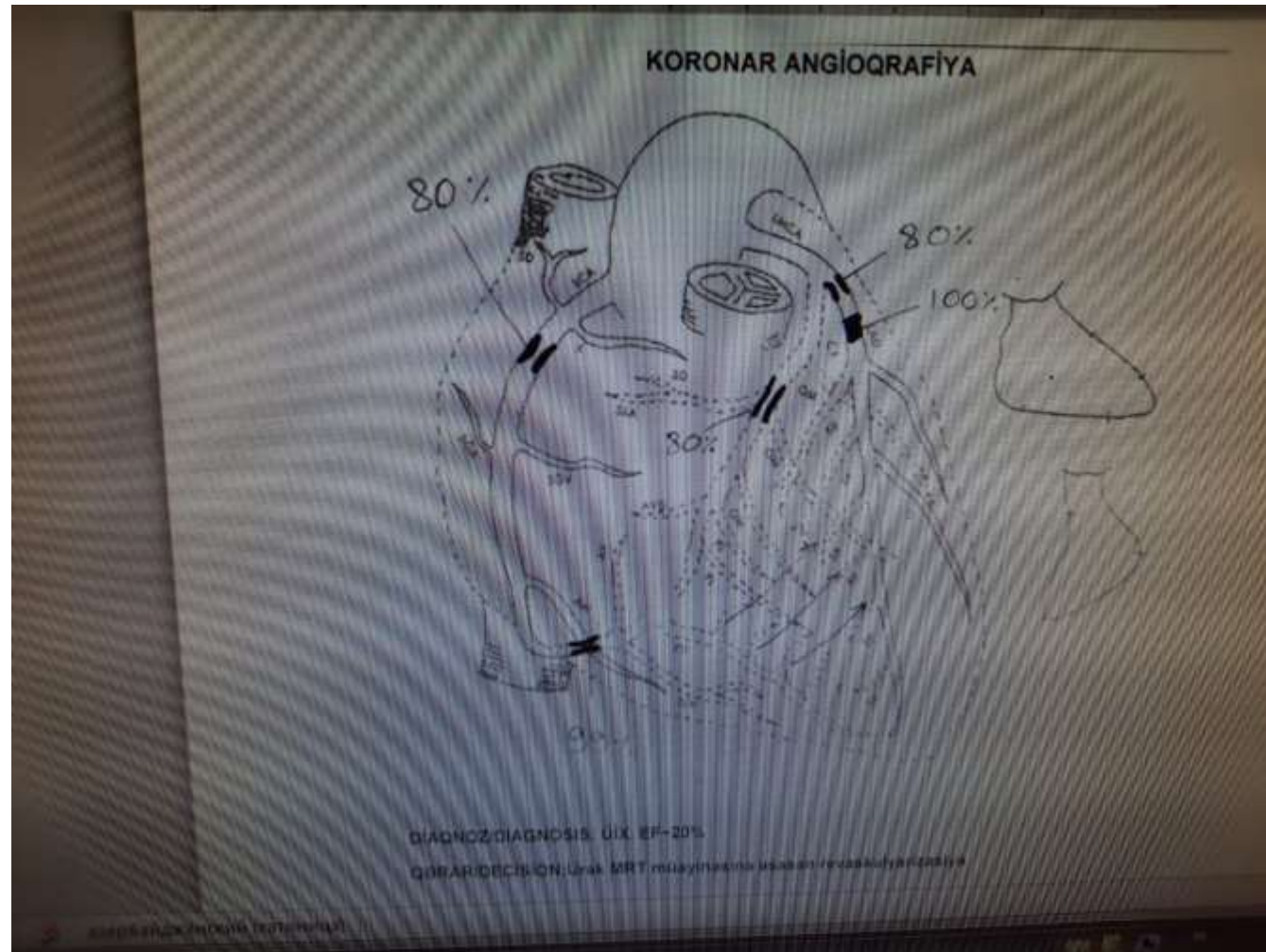
Previous MI, HF III f.s. DM



# EchoCG

- LV dilatation
- LVEF 25 %
- WMA: ANT hypo-, INF, IS, AS basal, mid, all apical segments & apex akynetic
- Mild-to-moderate Mitral regurgitation

# Coronary angiography Syntax Score: 27



# Revasc strategy

## FAVOURS PCI

### Clinical characteristics

Presence of severe co-morbidity (not adequately reflected by scores)

Advanced age/frailty/reduced life expectancy

Restricted mobility and conditions that affect the rehabilitation process

### Anatomical and technical aspects

MVD with SYNTAX score 0-22

Anatomy likely resulting in incomplete revascularization with CABG due to poor quality or missing conduits

Severe chest deformation or scoliosis

Sequelae of chest radiation

Porcelain aorta<sup>a</sup>

## FAVOURS CABG

### Clinical characteristics

Diabetes

Reduced LV function (EF  $\leq$ 35%)

Contraindication to DAPT

Recurrent diffuse in-stent restenosis

### Anatomical and technical aspects

MVD with SYNTAX score  $\geq$ 23

Anatomy likely resulting in incomplete revascularization with PCI

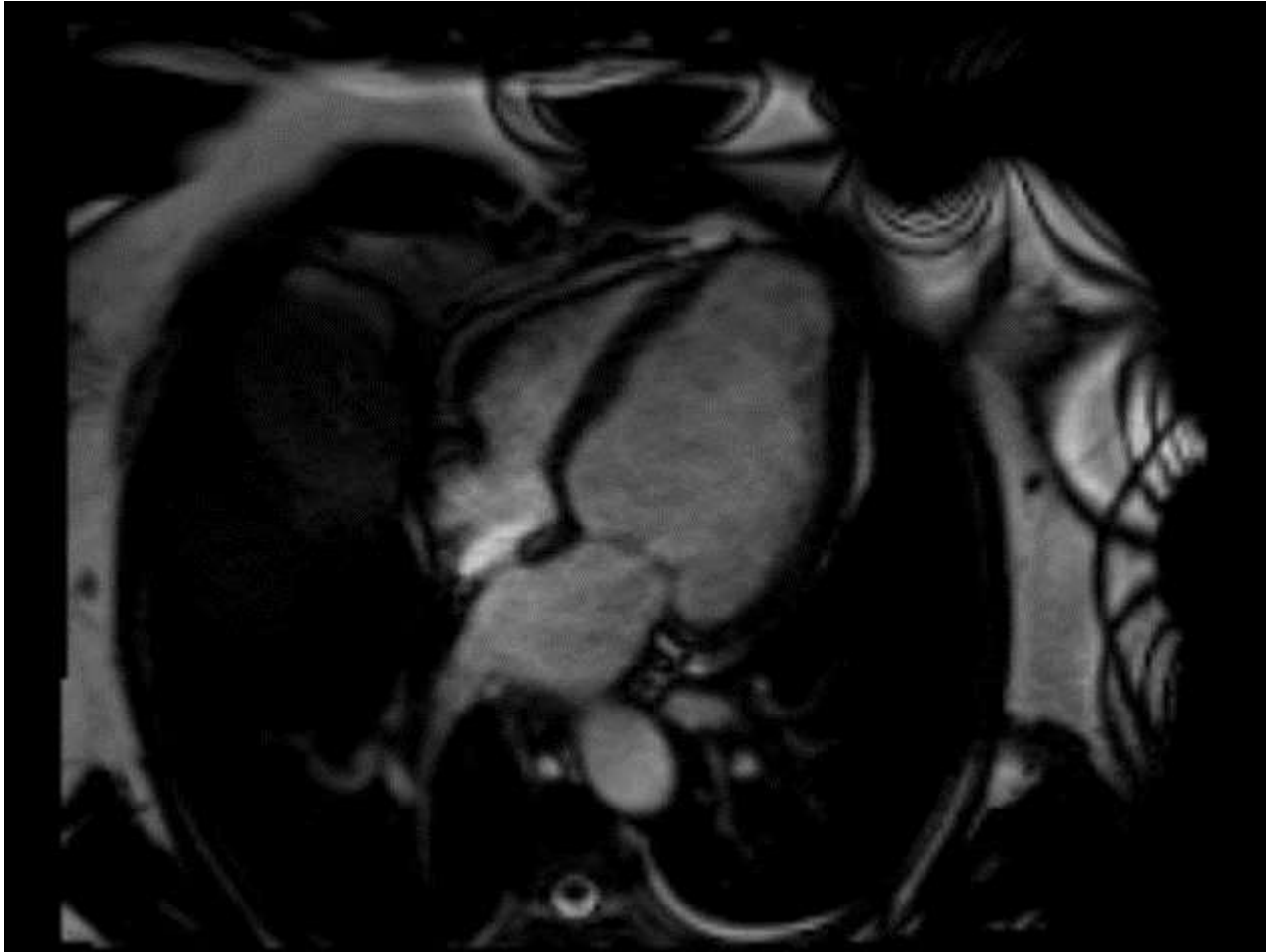
Severely calcified coronary artery lesions limiting lesion expansion

### Need for concomitant interventions

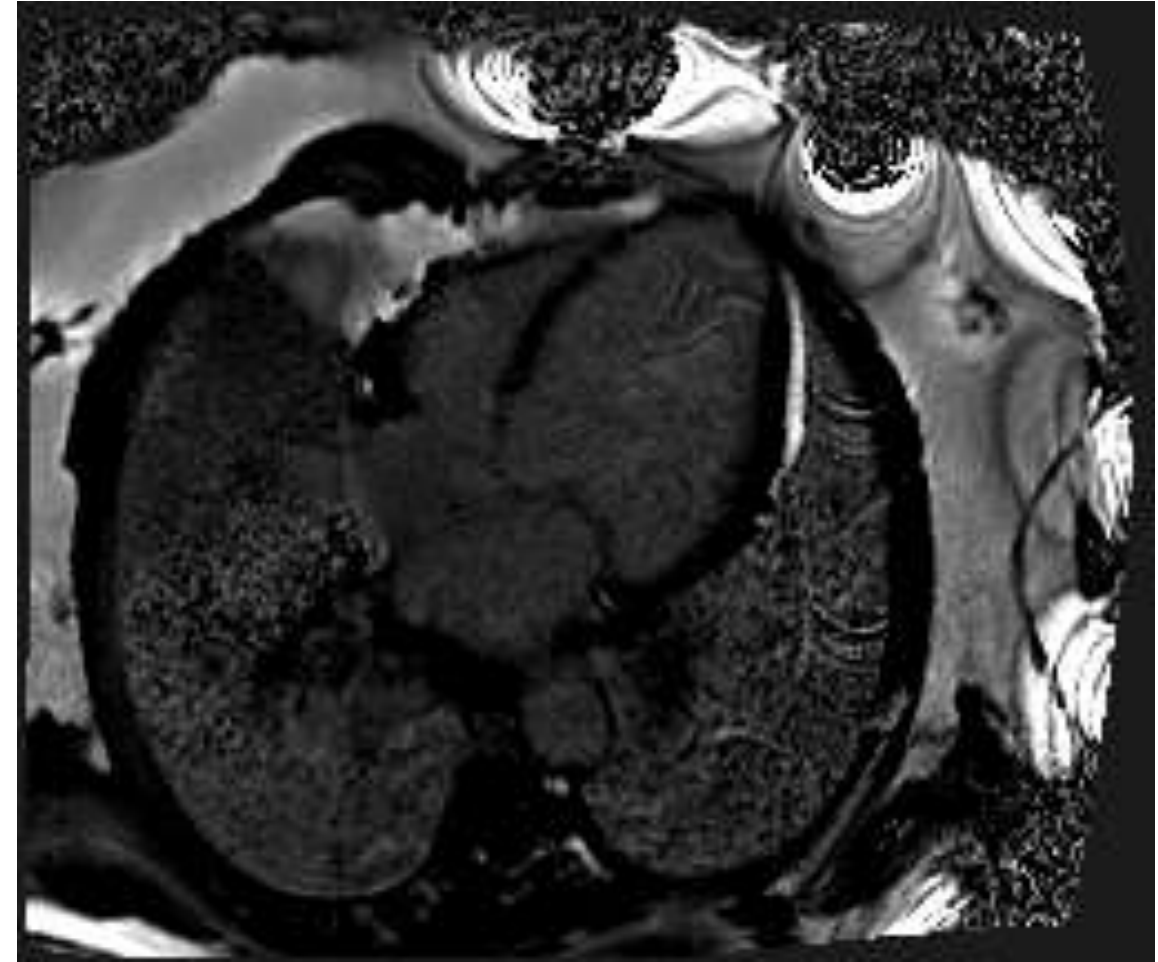
Ascending aortic pathology with indication for surgery

Concomitant cardiac surgery

# CMR

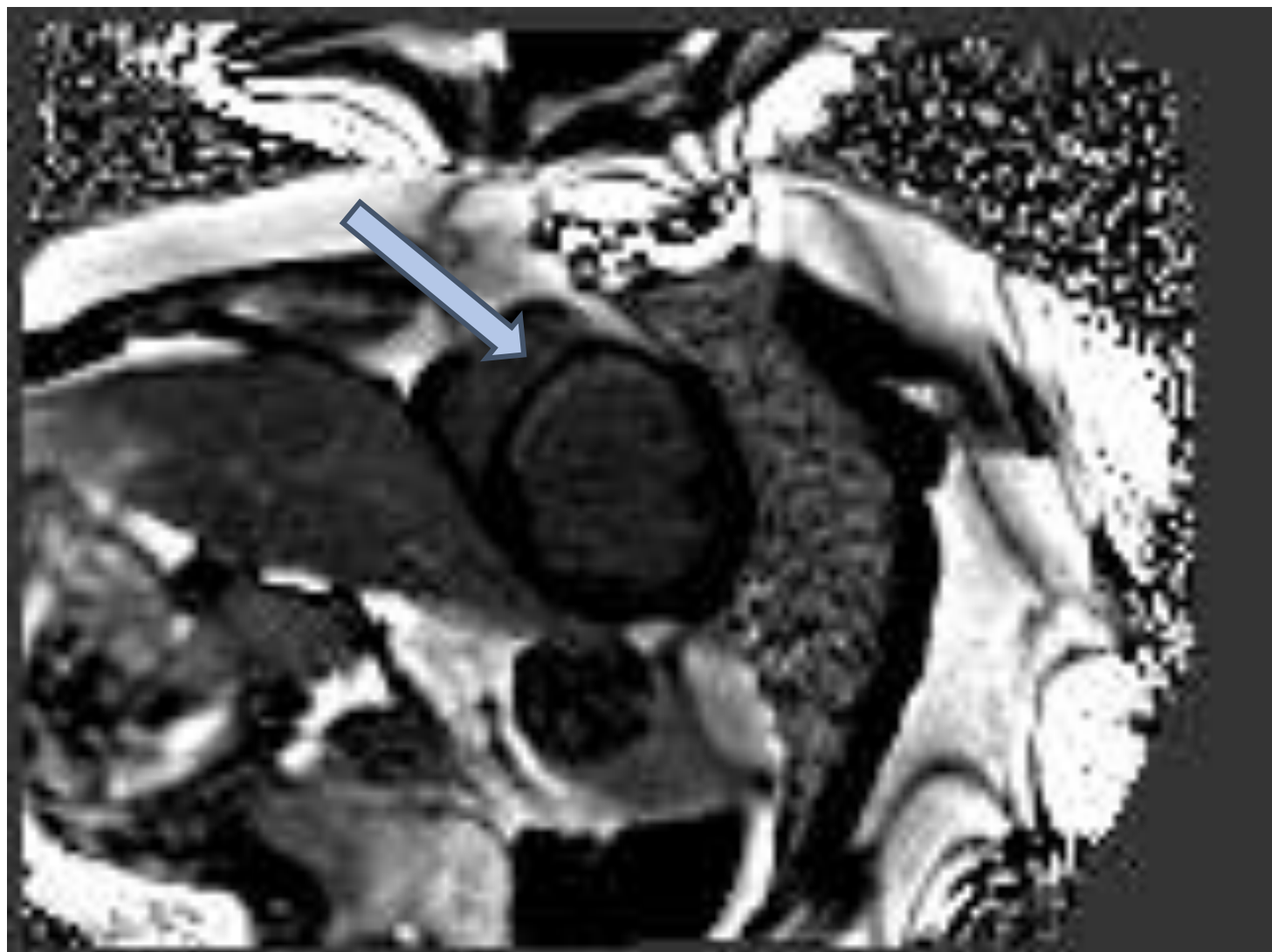


4CH görüntüsü  
CINE images



**4CH LGE**

# CMR (LGE)





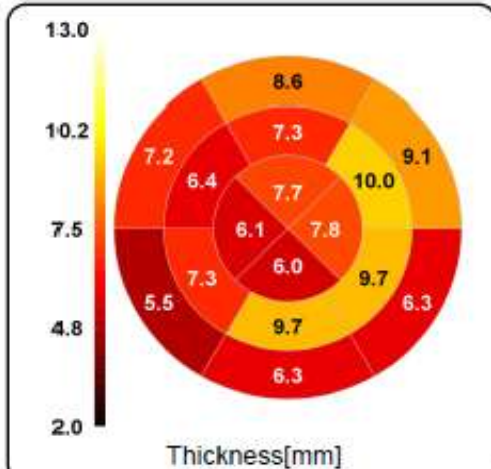


NeoSoft, LLC  
suiteHEART 4.0.6

N27 W23910A Paul Rd  
Pewaukee, WI 53072

**[REDACTED]**

Study Date Sep 26, 2017  
 ID 17.09.26-16:49:55-DST-  
 Age 66 year(s)  
 Sex Female  
 Weight 75 kg  
 Height 160 cm  
 BSA 1.78 m<sup>2</sup>  
 Referred By Rustemova Y.



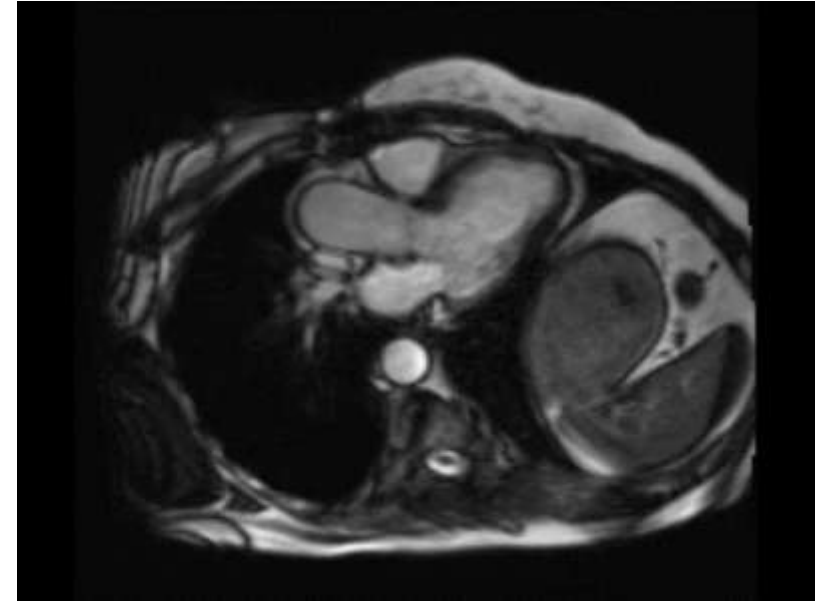
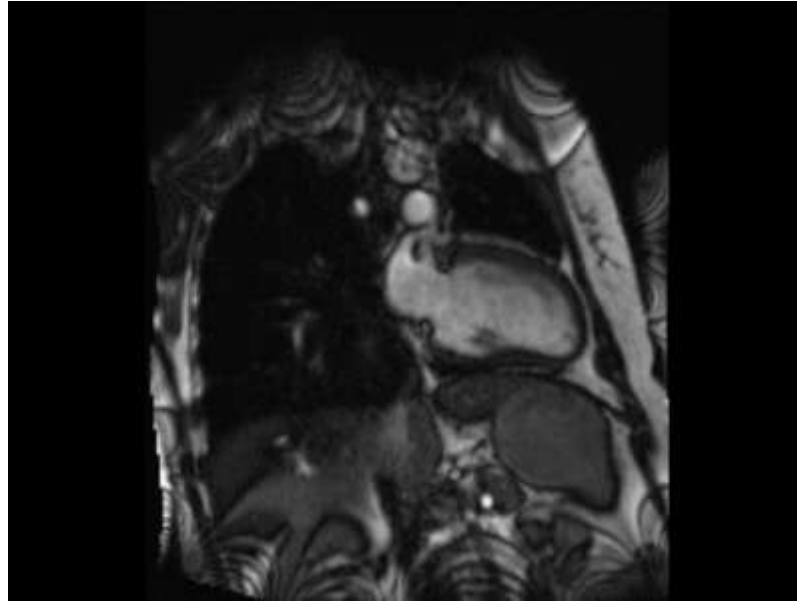
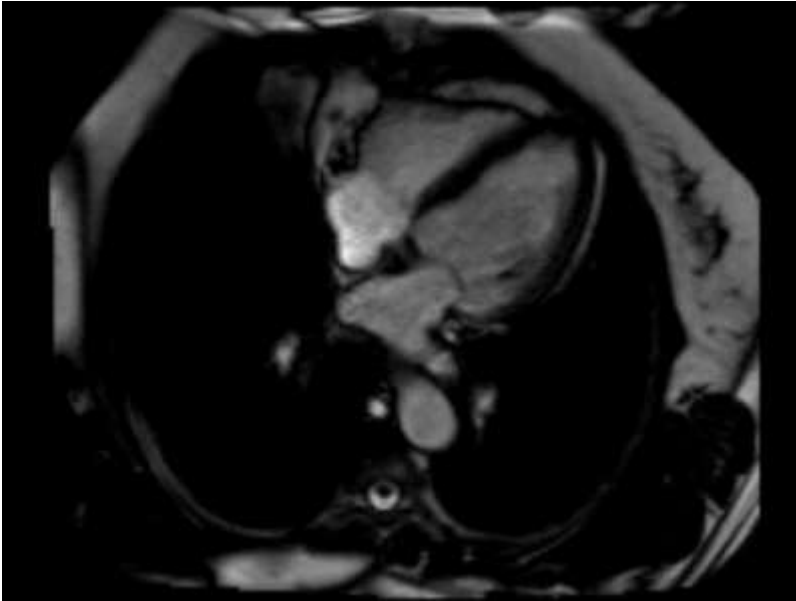
Ventricles	LV	RV
Ejection Fraction	16 % (50 - 75)	58 % (40 - 60)
Stroke Volume	46.0 ml	46.9 ml
End-Diastolic Volume Index	161 ml/m <sup>2</sup> (50 - 84)	45.0 ml/m <sup>2</sup> (62 - 88)
End-Systolic Volume Index	135 ml/m <sup>2</sup> (17 - 37)	18.7 ml/m <sup>2</sup> (19 - 30)
End-Diastolic Volume	287 ml (89 - 166)	80.2 ml
End-Systolic Volume	241 ml (22 - 59)	33.3 ml
Heart Rate	91 bpm	91 bpm
Cardiac Output	4.2 l/min	4.3 l/min
Cardiac Output Index	2.35 l/min/m <sup>2</sup>	2.39 l/min/m <sup>2</sup>

Late Enhancement	
Infarct Mass	7.03 g
Left Ventricular Mass	160 g
Infarct	4.41 %

# **Decision : full anatomical revasc – CABG**

- **MRT – LVEF 16%, viable myocardium**

**1 year control CMR  
LVEF=48%**

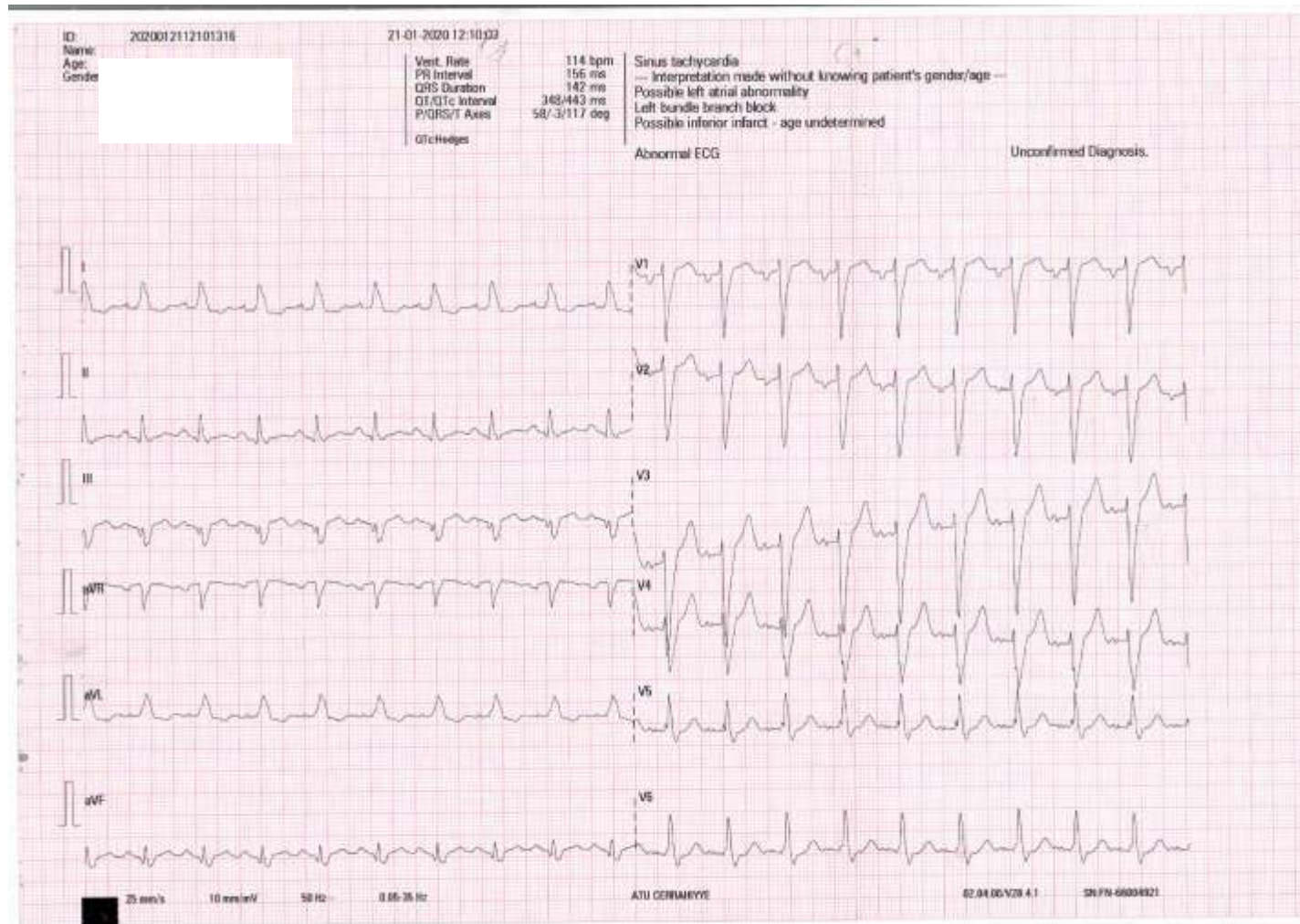


# Case 2

## Case 2 Mr.D.

- 55 y/o male patient with signs&symptoms of HF
- EKG : Sinus ritmi, III, avF aparamalarında Q diři
- Koronar angiografiya: LAD 90%, D1 90%, RCA 80%, LCx 100%
- Dz: Üix: ÜÇ IV f.s.

# ECG



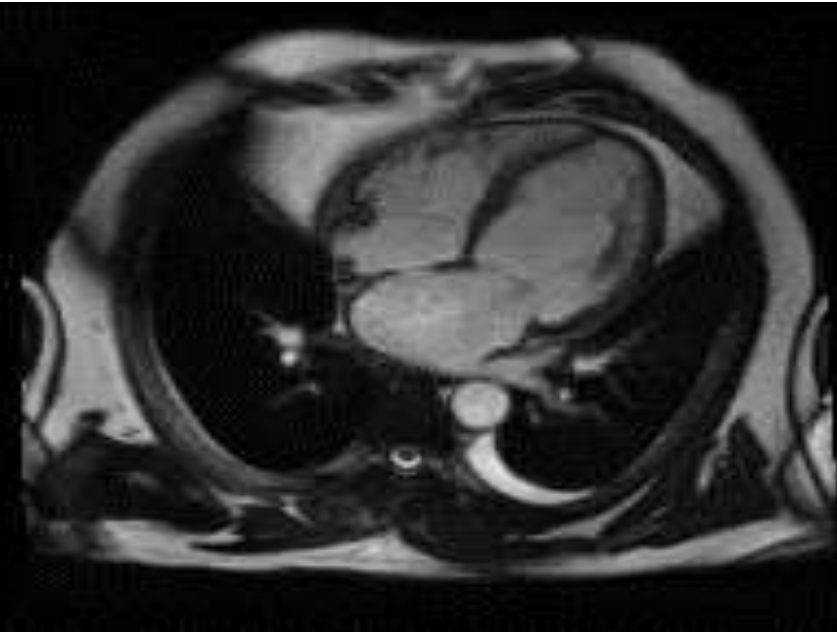
# EchoCG

- LVEF 20%
- Global hypokinetisia with IS bazal, mid aneurisma & IL bazal, mid akinesi,
- MR eroa 0.33sm<sup>2</sup>-mild-to-moderate

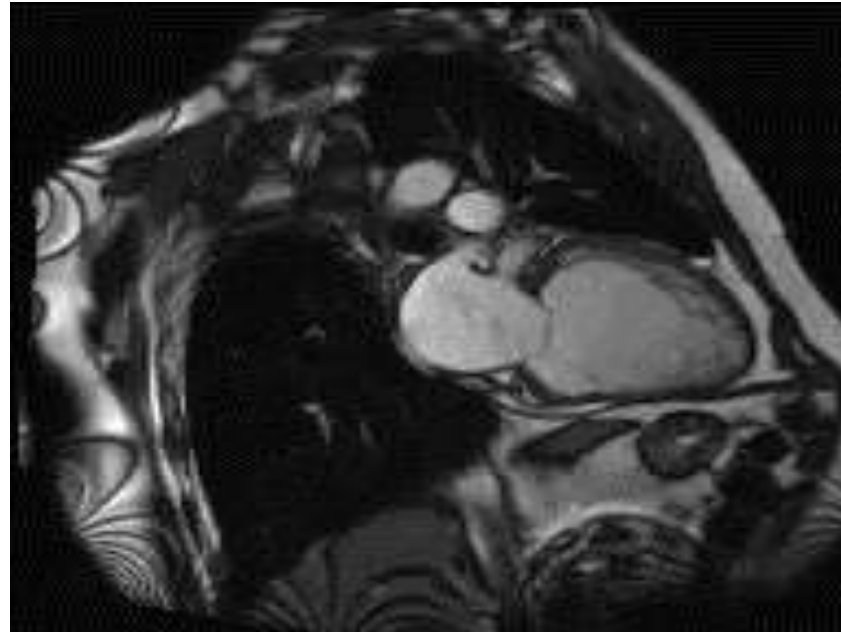
# Coro

LAD 90%, D1 90%,  
RCA 80%,  
LCx 100%

# CMR SSFP cine-images



4CH



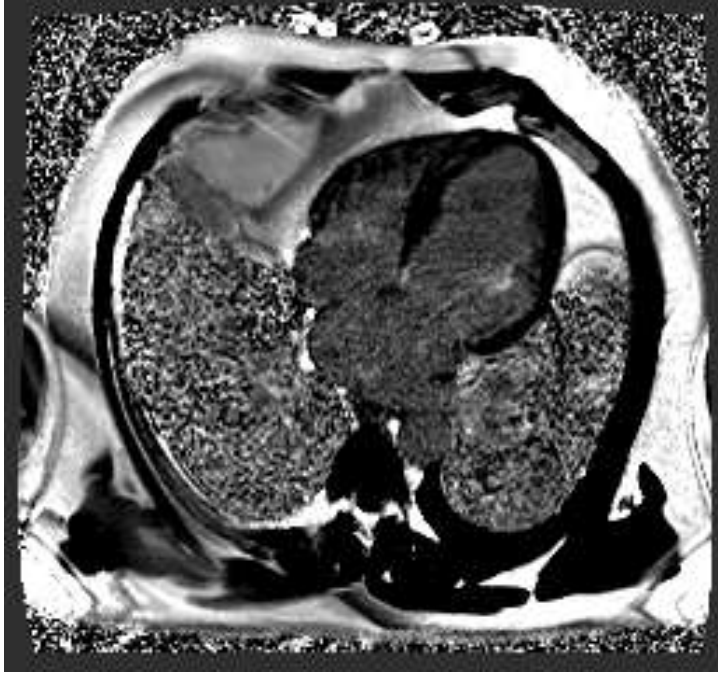
2CH



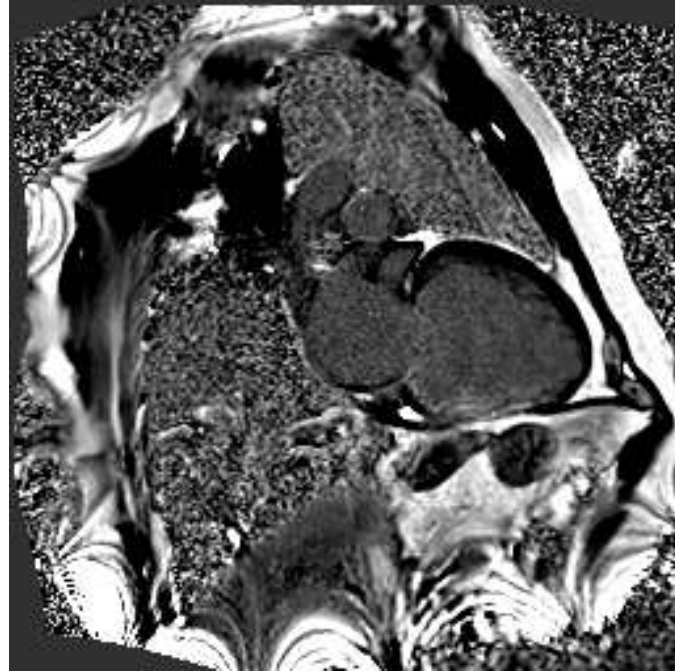
3CH



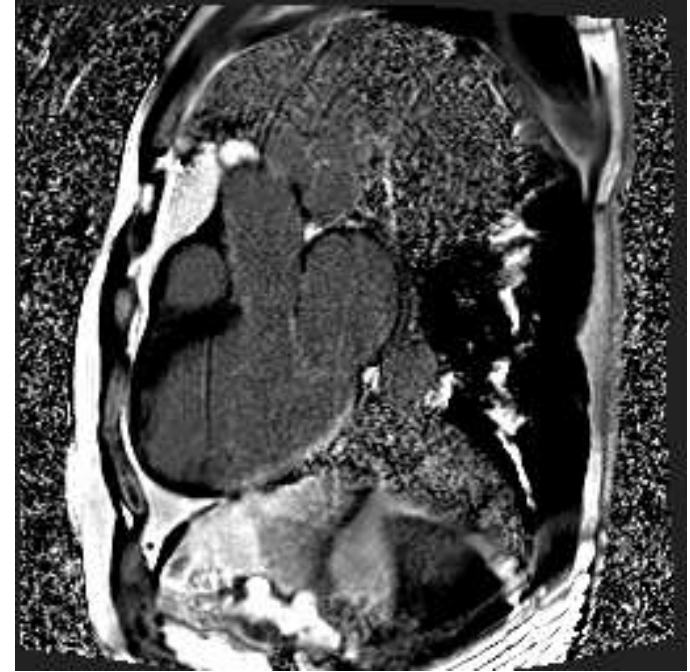
# CMR – LGE



• 4CH

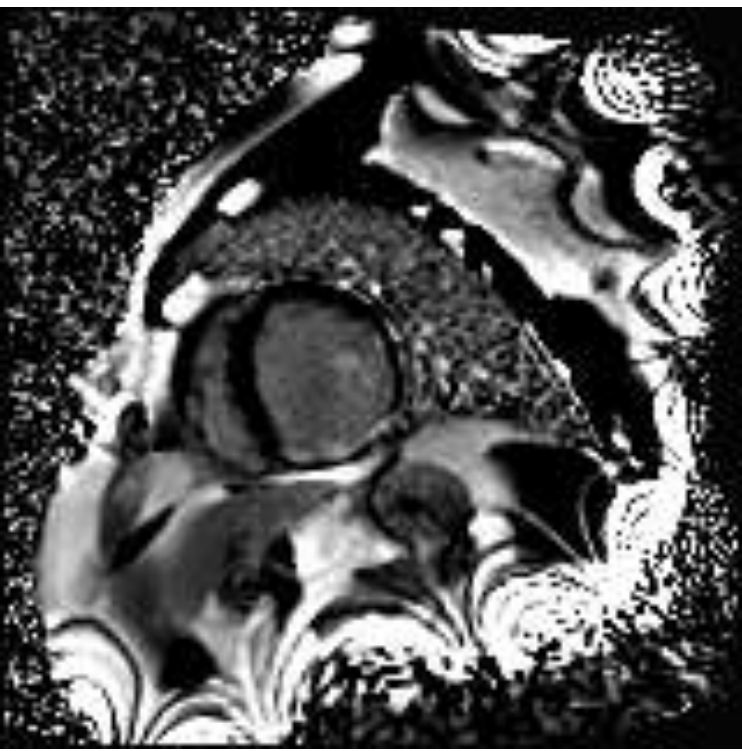


• 2CH

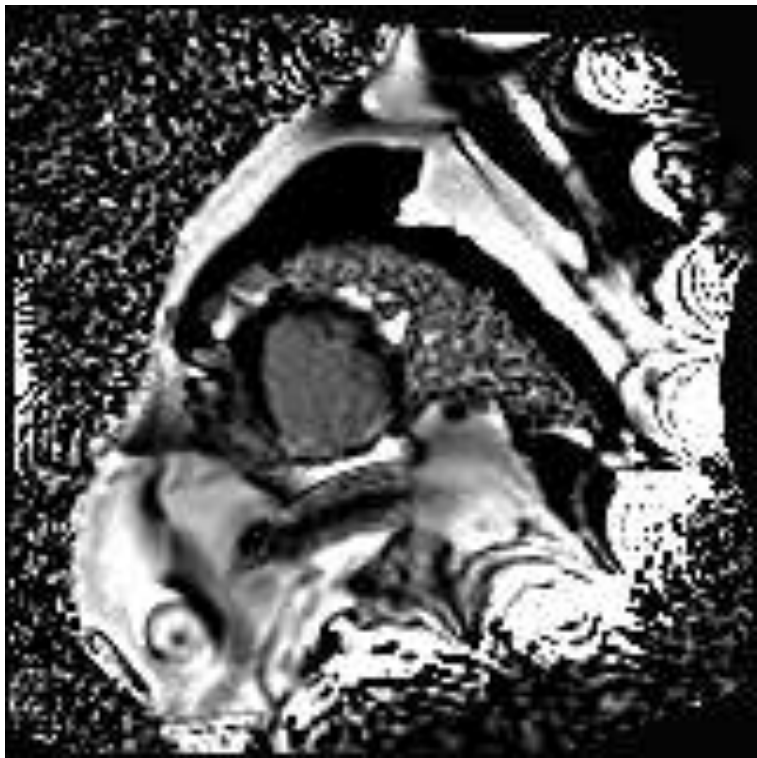


• 3CH

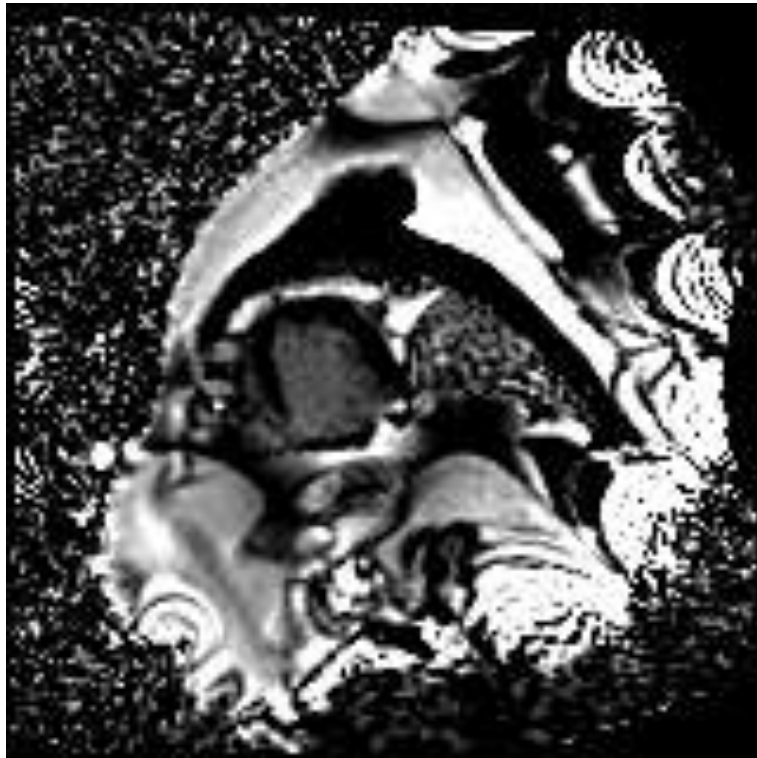
# CMR – LGE SA view



basal



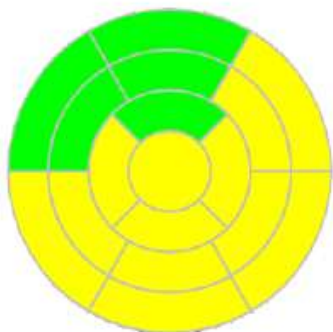
mid



apikal

# CMR report

Study Date Jan 11, 2020  
 ID 64-px-TS-RY  
 Age 55 year(s)  
 Sex Male  
 Weight 70 kg  
 Height 160 cm  
 BSA 1.73 m<sup>2</sup>  
 Referred By Rustemova Y.Dr



■ Normal    ■ Dyskinetic  
■ Hypokinetic    ■ Asynchronous Contraction  
■ Akinetic

Function

## Ventricles

	LV	RV
Ejection Fraction	18 % (57 - 74)	10 % (40 - 60)
Stroke Volume	42.8 ml	12.3 ml
End-Diastolic Volume Index	137 ml/m <sup>2</sup> (68 - 103)	69.1 ml/m <sup>2</sup> (62 - 88)
End-Systolic Volume Index	113 ml/m <sup>2</sup> (19 - 41)	61.9 ml/m <sup>2</sup> (19 - 30)
End-Diastolic Volume	238 ml (113 - 196)	120 ml
End-Systolic Volume	195 ml (29 - 74)	107 ml
Heart Rate	126 bpm	126 bpm
End-Diastolic Mass	116 g (74 - 146)	
End-Diastolic Mass Index	67 g/m <sup>2</sup> (47 - 77)	
Peak Filling Rate	739 ml/s	120 ml/s
Peak Ejection Rate	1084 ml/s	179 ml/s
Cardiac Output	5.4 l/min	1.6 l/min
Cardiac Output Index	3.11 l/min/m <sup>2</sup>	0.90 l/min/m <sup>2</sup>
Stroke Volume Index	24.7 ml/m <sup>2</sup>	7.1 ml/m <sup>2</sup>
End-Systolic Mass	101 g	
End-Systolic Mass Index	58 g/m <sup>2</sup>	
Epicardial End-Diastolic Volume	348 ml	
Epicardial End-Systolic Volume	291 ml	

## Ventricles (Long Axis)

	LV
Ejection Fraction	17 % (56 - 75)
Stroke Volume	33.1 ml (59 - 119)
End-Diastolic Volume Index	109 ml/m <sup>2</sup> (59 - 99)
End-Systolic Volume Index	90.3 ml/m <sup>2</sup> (25 - 37)

# CMR report -2

Heyderov, Dadash 64-px-TS-RY Jan 11, 2020 03:35:32 PM.pdf - Adobe Reader

Файл Редактирование Просмотр Окно Справка

Инструменты Комментарии

ME

Infarct + MVO Mass %

End-Systolic Volume	156 ml	(25 - 66)
Heart Rate	112 bpm	
End-Diastolic Mass	117 g	(74 - 146)
End-Diastolic Mass Index	68 g/m <sup>2</sup>	(47 - 77)
Peak Filling Rate	414 ml/s	
Peak Ejection Rate	194 ml/s	
Cardiac Output	3.7 l/min	
Cardiac Output Index	2.14 l/min/m <sup>2</sup>	
Stroke Volume Index	19.1 ml/m <sup>2</sup>	
Mass Phase	119 g	
Mass Index Phase	69 g/m <sup>2</sup>	
End-Systolic Mass	124 g	
End-Systolic Mass Index	72 g/m <sup>2</sup>	
Epicardial End-Diastolic Volume	301 ml	
Epicardial End-Systolic Volume	275 ml	

Atria (Fast)	LA	RA
End-Diastolic Volume Index	56.1 ml/m <sup>2</sup>	40.1 ml/m <sup>2</sup>
End-Diastolic Volume	97.2 ml	69.4 ml

Late Enhancement	
Infarct Mass	40.8 g
Left Ventricular Mass	173 g
Infarct	23.7 %

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## **Decision :**

- **CMR – LVEF 18%, no viable myocardium in the zone of LCx**

**functional revasc of viable myocardium**

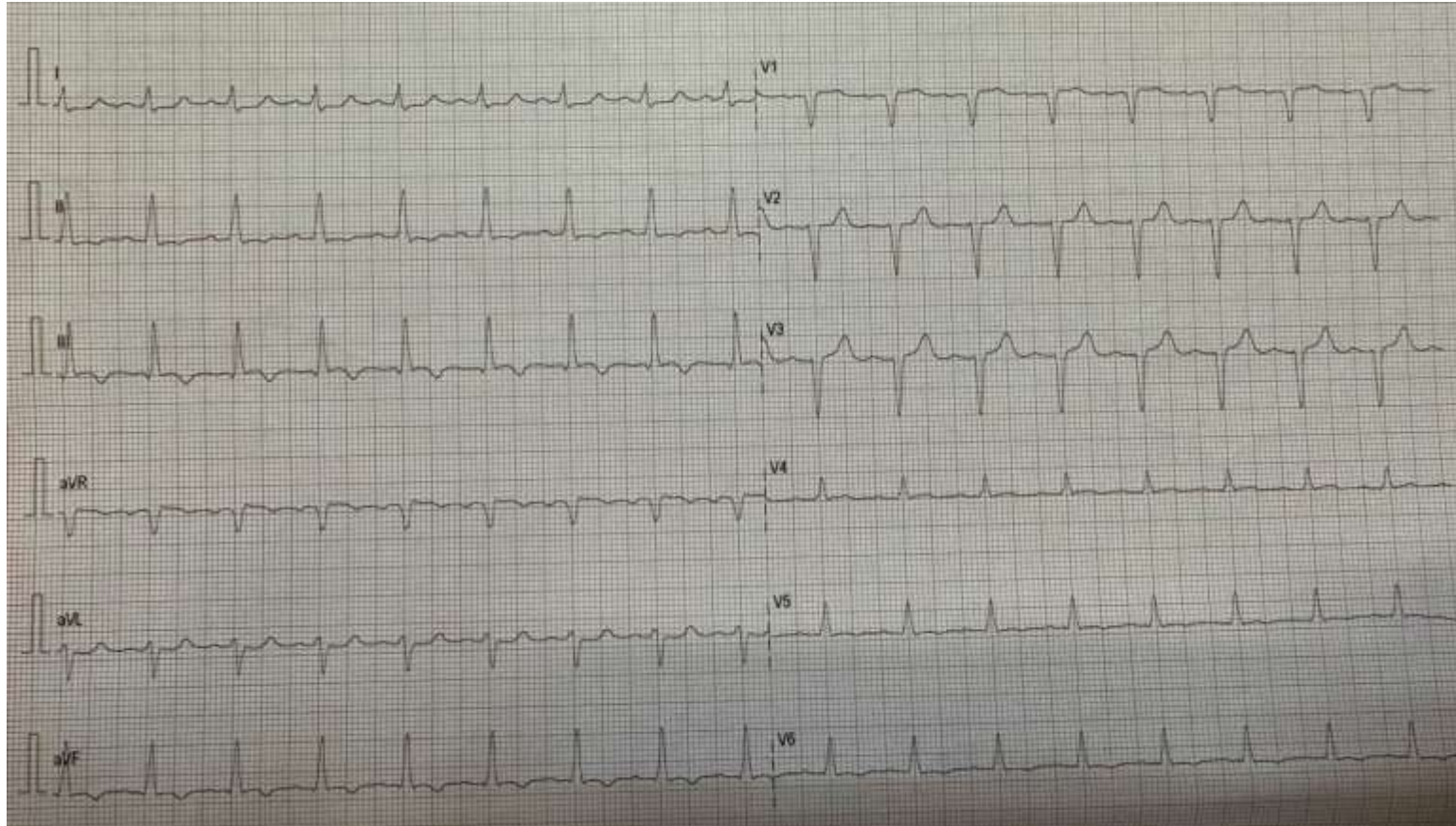
**+OMT**

**+ICD**

# Case 3

# Case -3 Ms. L.

- 54 y/o woman, with symptoms&signs of HF
- **ECG**

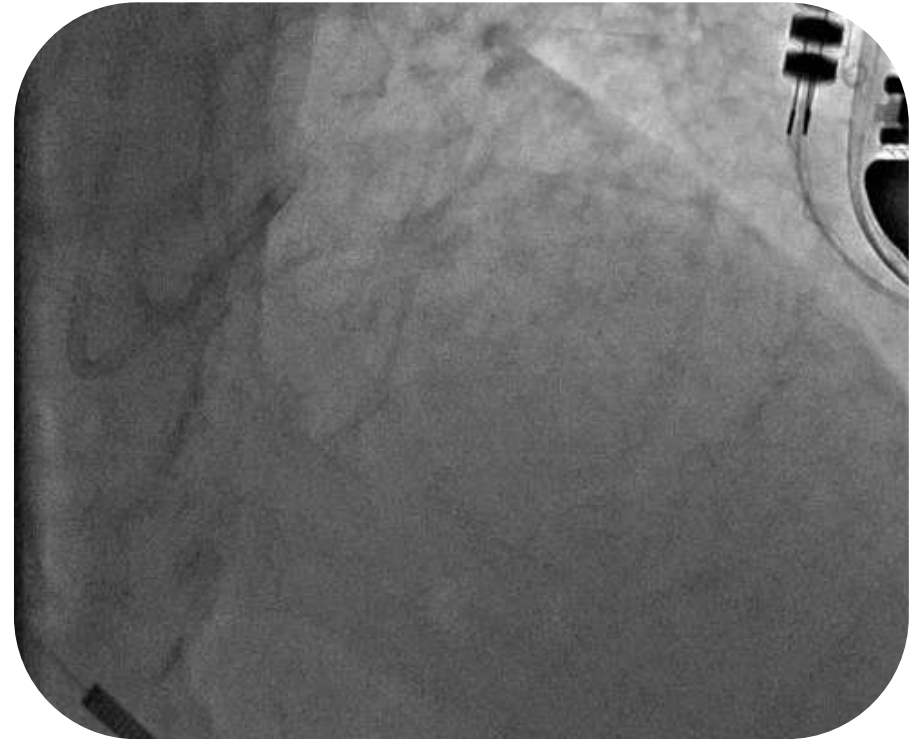


# EchoCG


- LVEF=35%
- WMA: INF, IS basal,mid, apical akynesia, AS mid, SEP apical, apex hypoknetic
- LV wall thickness 10 mm
- LA = 36 mm,
- LAVol=78 ml,
- LAVI=43 ml/m<sup>2</sup>
- MR eroa=0,24sm<sup>2</sup> , MR Vol=39ml, vena contracta 5 mm - moderate
- SPAP 35 mmHg



# Coronary angiogram



# CMR cine-images SA view



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N27 W23910A Paul Rd  
Pewaukee, WI 53072

23

ID 7-7-23 12:30 RS icba RY

Age 54 years

Sex Female

Weight 83 kg

Height 165 cm


BSA 1.90 m<sup>2</sup>

Referred By Gonderish

Ventricles	LV	Range	RV	Range
Ejection Fraction (%)	25	50 - 75	47	52 - 72
Stroke Volume (ml)	49.2		45.0	
End-Diastolic Volume Index (ml/m <sup>2</sup> )	102	50 - 84	50.3	62 - 88
End-Systolic Volume Index (ml/m <sup>2</sup> )	75.9	17 - 37	26.6	19 - 30
End-Diastolic Volume (ml)	194	89 - 166	95.7	77 - 201
End-Systolic Volume (ml)	144	22 - 59	50.7	
Heart Rate (bpm)	92		92	
Cardiac Output (l/min)	4.5		4.1	
Cardiac Output Index (l/min/m <sup>2</sup> )	2.38		2.18	
Stroke Volume Index (ml/m <sup>2</sup> )	25.8		23.7	
Mass (g)	84(ED)			
Mass Index (g/m <sup>2</sup> )	44(ED)			

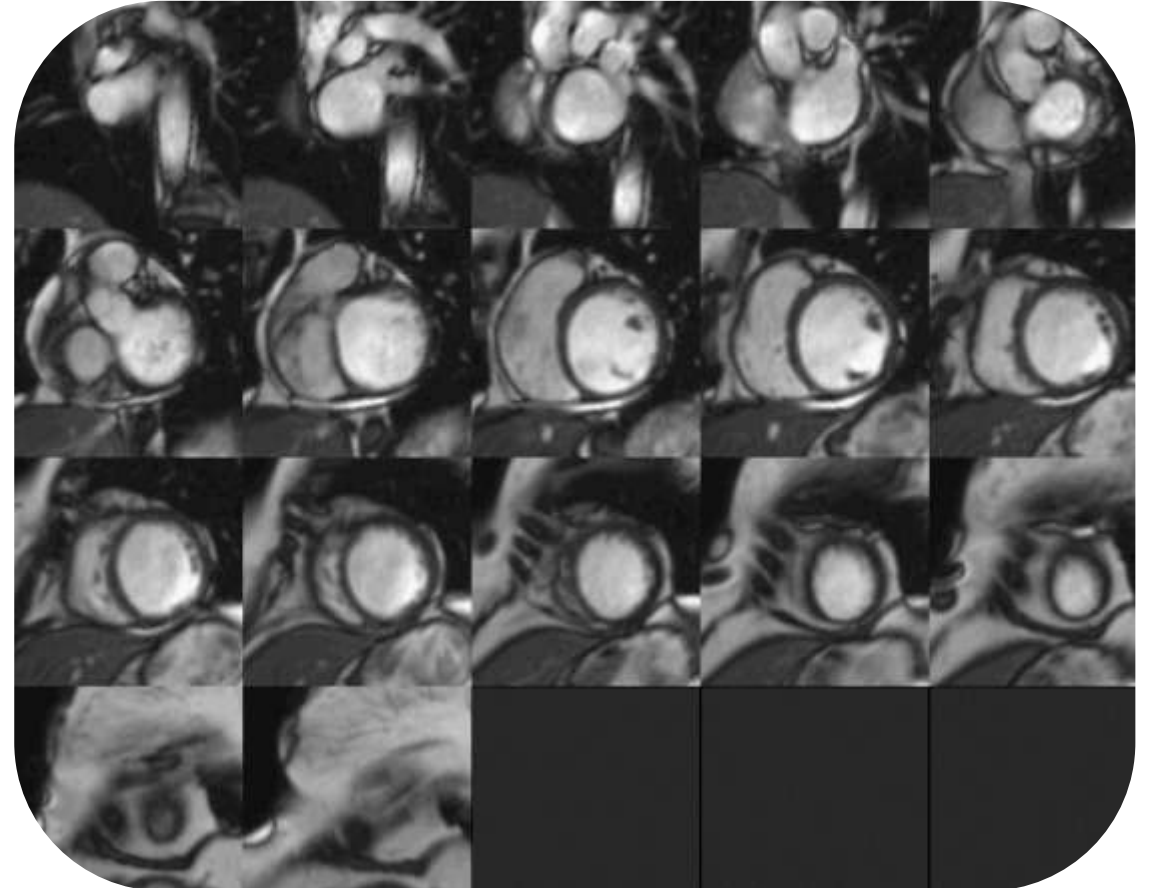
  

Ventricles (Long Axis)	LV	Range	RV	Range
Ejection Fraction (%)	25		47	
Stroke Volume (ml)	44.5		13.0	
End-Diastolic Volume Index (ml/m <sup>2</sup> )	91.7		14.6	
End-Systolic Volume Index (ml/m <sup>2</sup> )	68.3		7.8	
End-Diastolic Volume (ml)	175		27.8	
End-Systolic Volume (ml)	130		14.8	
Heart Rate (bpm)	87		87	
Peak Filling Rate (ml/s)	403		153	
Peak Ejection Rate (ml/s)	408		74.2	
Cardiac Output (l/min)	3.9		1.1	
Cardiac Output Index (l/min/m <sup>2</sup> )	2.03		0.59	
Stroke Volume Index (ml/m <sup>2</sup> )	23.4		6.8	



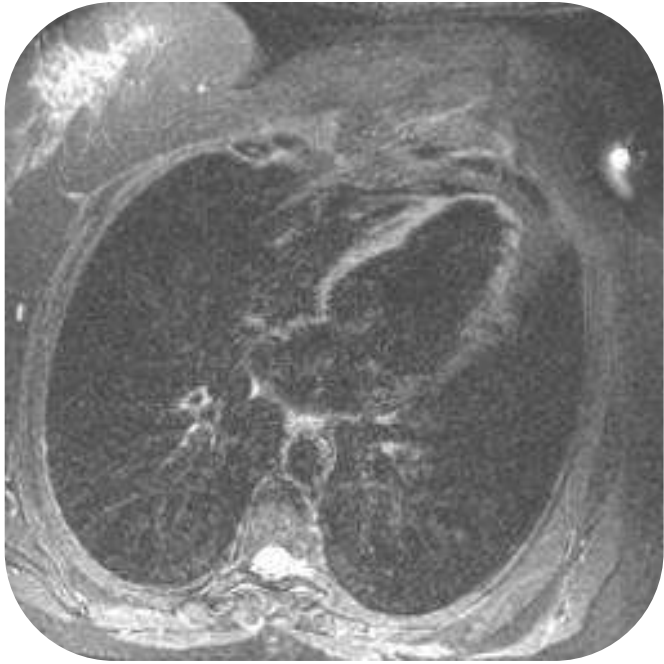
■ Normal    ■ Dyskinetic  
■ Hypokinetic    ■ Asynchronous Contraction  
■ Akinetic

Function

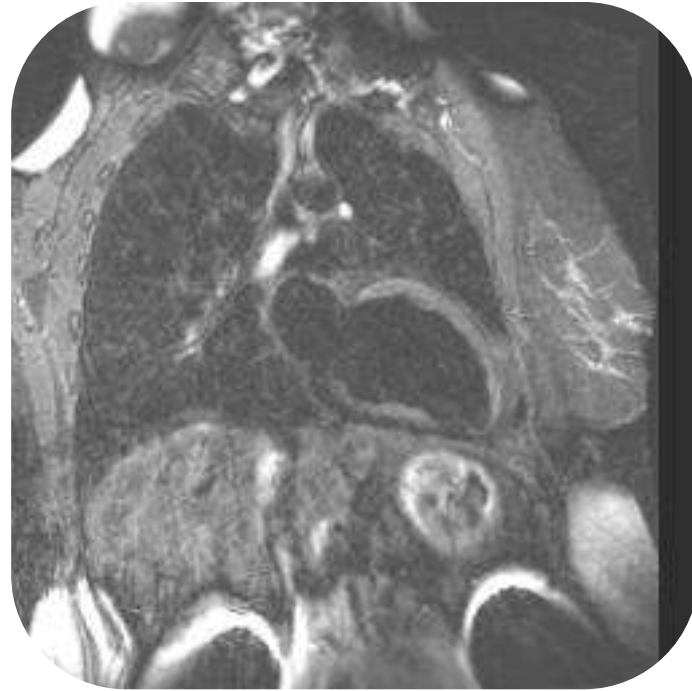


# CMR SSFP cine images

# CMR T2w images – no edema



**4CH View**

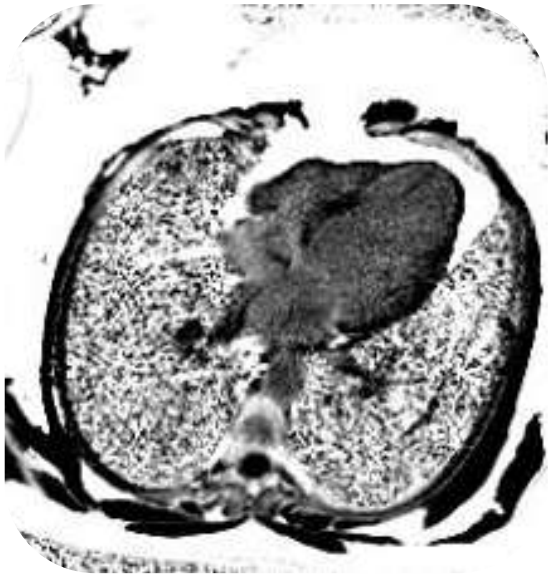


**2CH View**

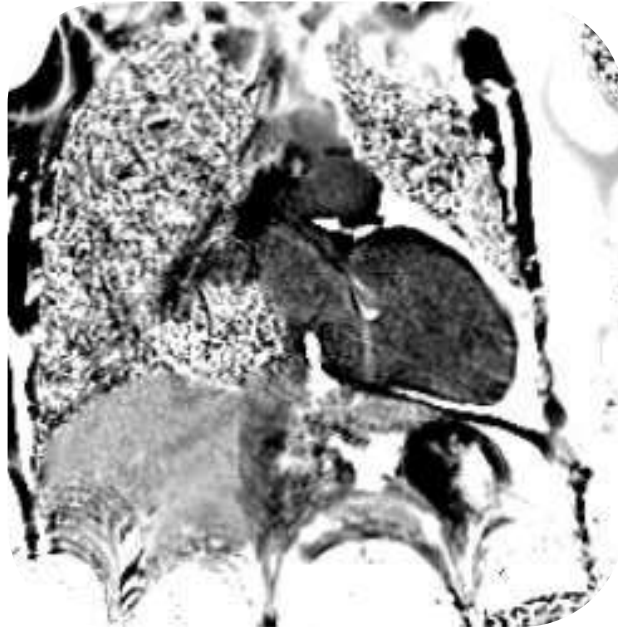


**3CH View**

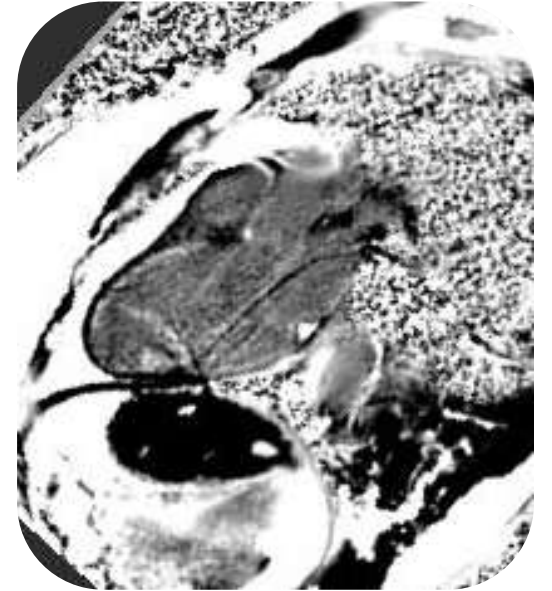
# CMR LGE images



**4CH View**

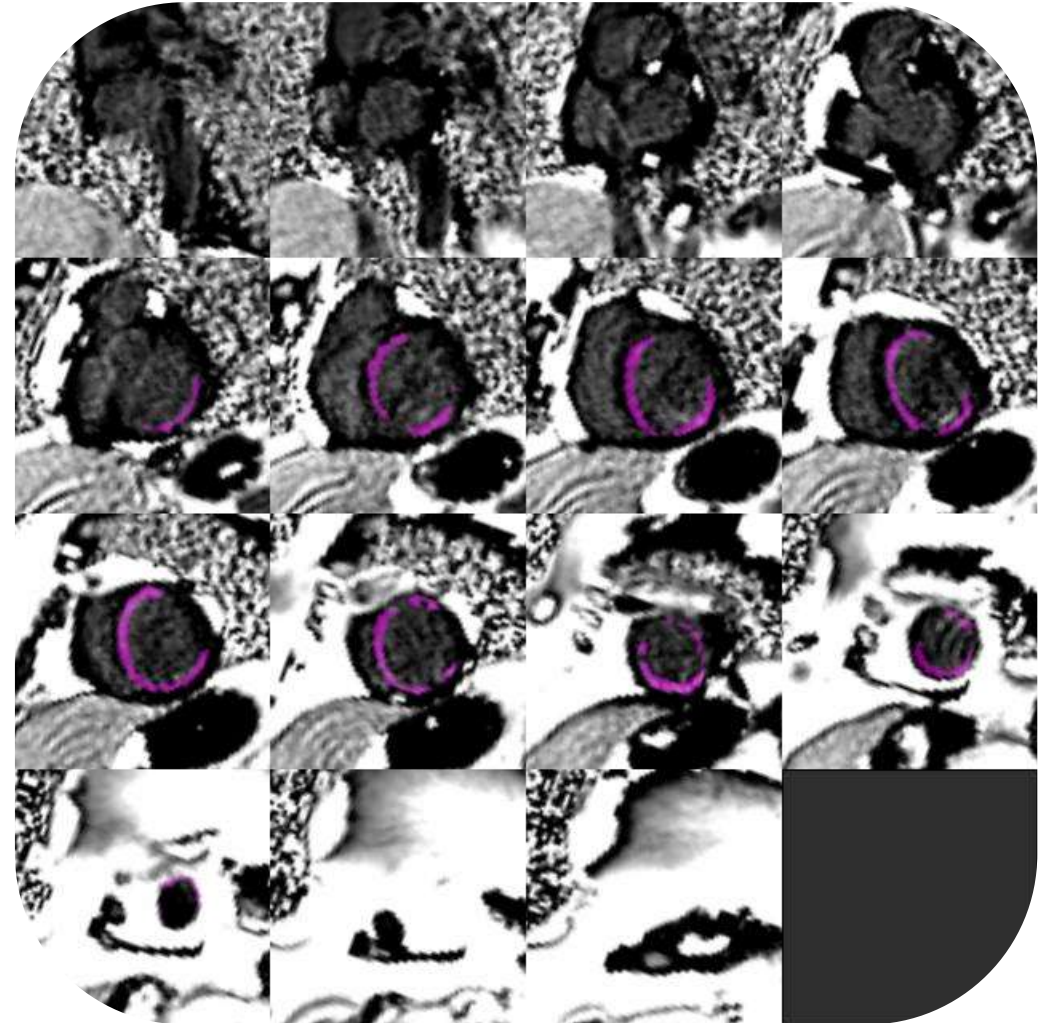
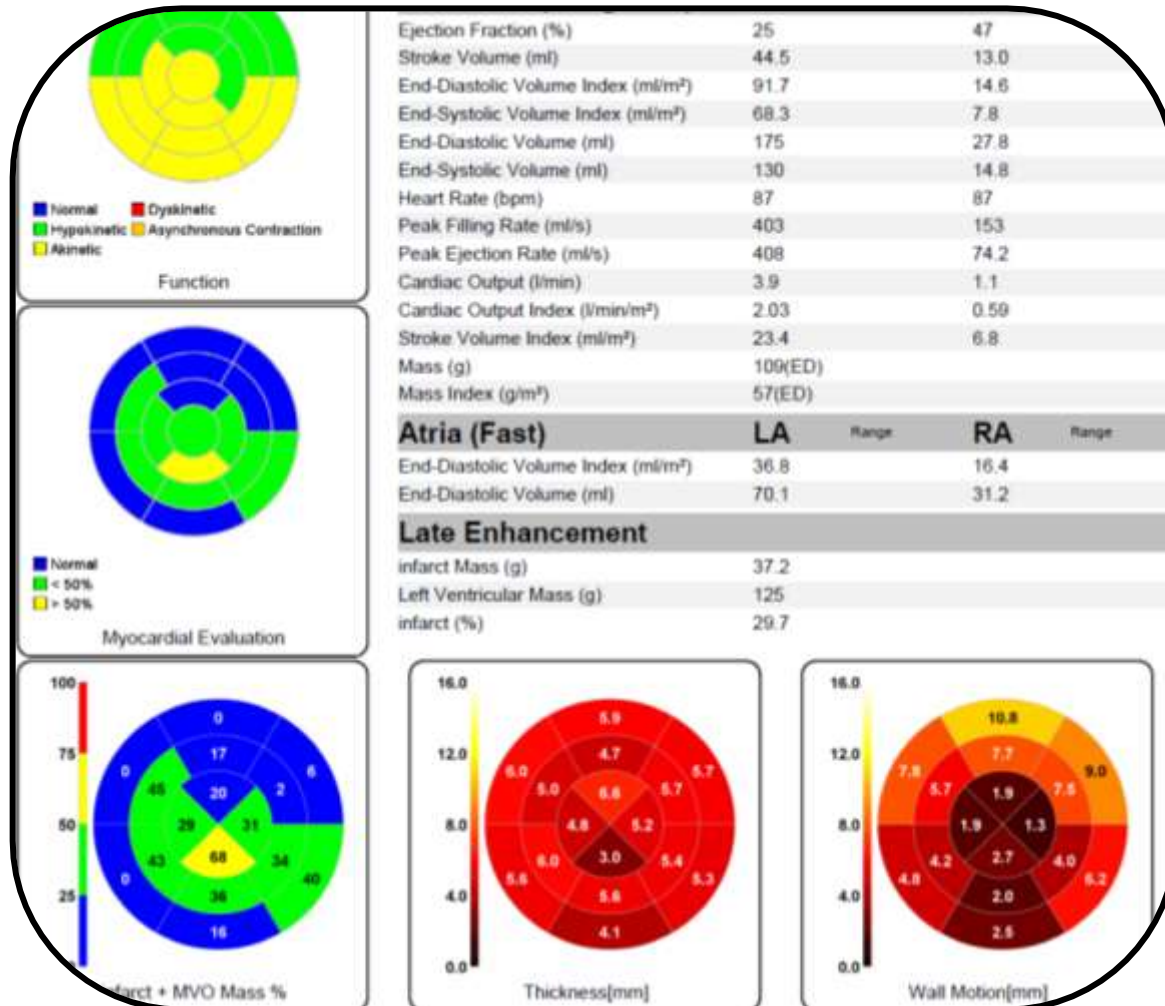


**2CH View**



**3CH View**

# CMR LGE SA view

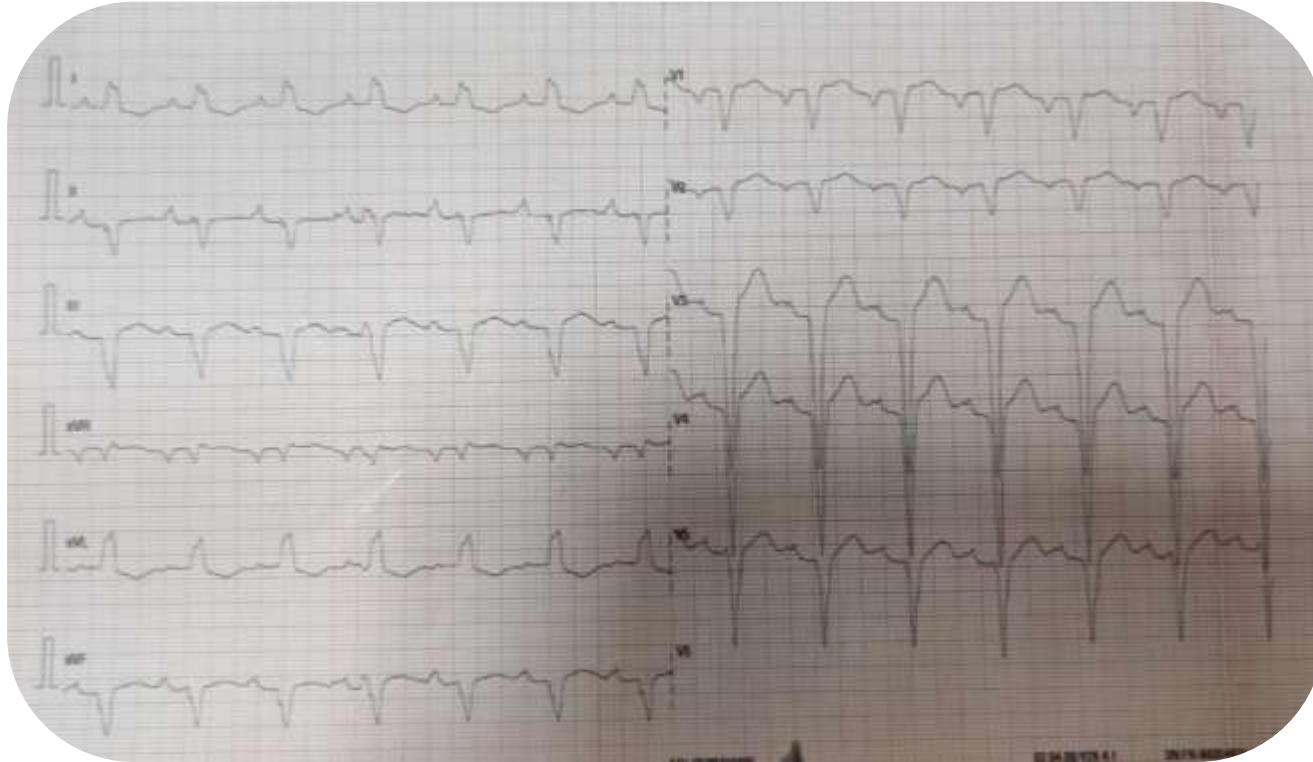


# Decision

- No transmural scar
- But extension is wide
- Moderate-to-severe Mitral regurgitation
- High risk for intervention
- ICD for primary prevention
- GDMT

# Case-4 Mr. Ch.

- 74 y/o man with signs&symptoms of HF

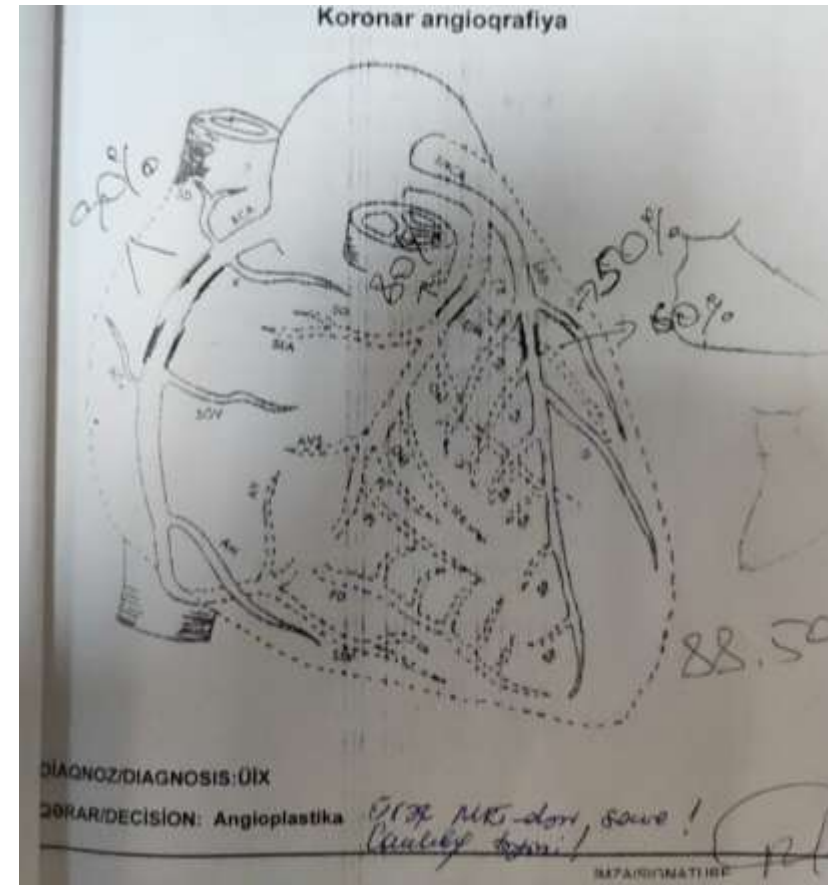




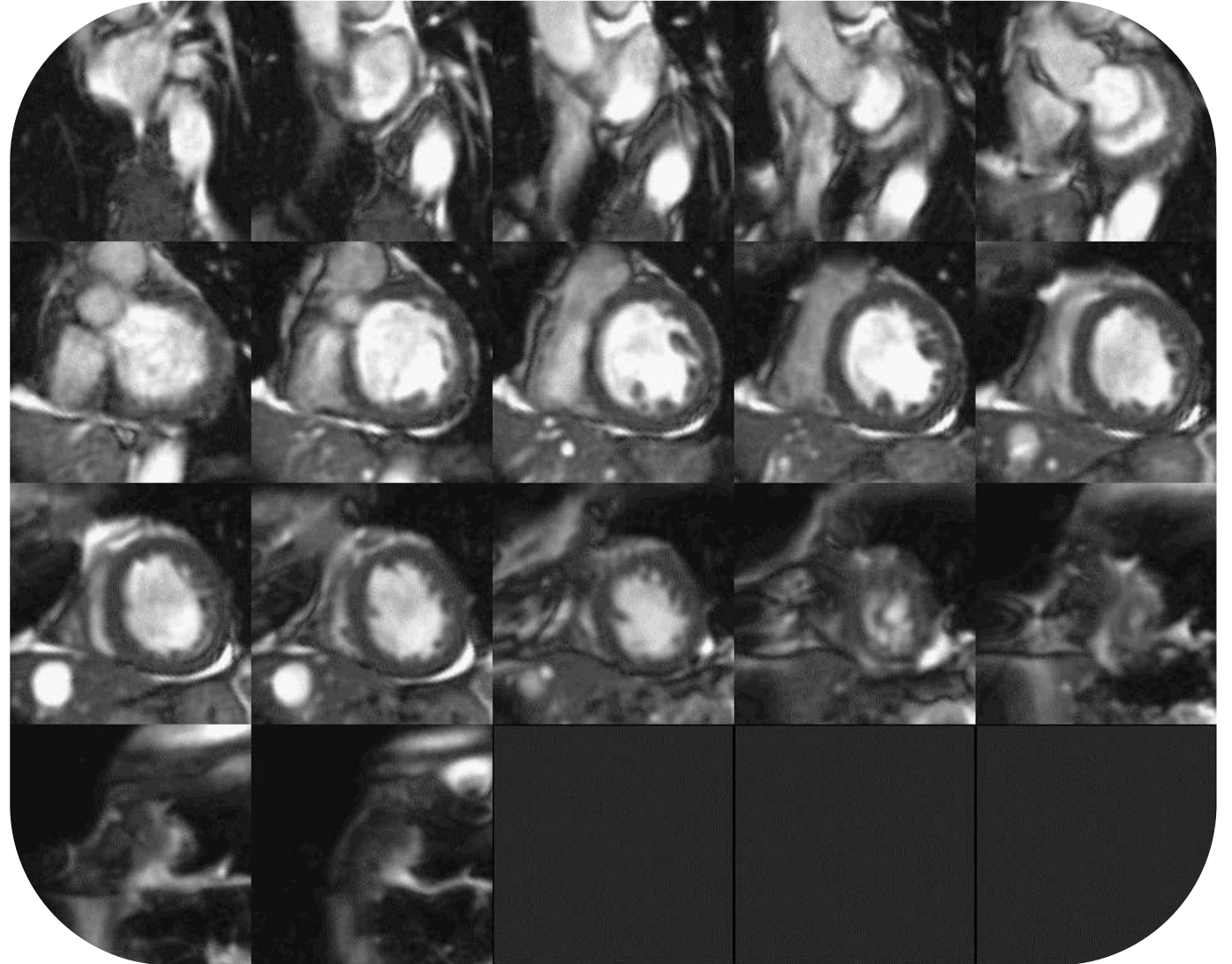
# EcoCG

- LVEF<20%
- WMA: Global hypokinesia with rotation&twist impairment
- LV wall thickness 8 mm
- LA = 43 mm,
- LAVol=80 ml,
- LAVI=42 ml/m<sup>2</sup>
- MR eroa=0,40 sm<sup>2</sup> , MR Vol=64 ml, vena contracta 7 mm - severe
- SPAP 35 mmHg

# Coronary angiography



# CMR SSFP SA view



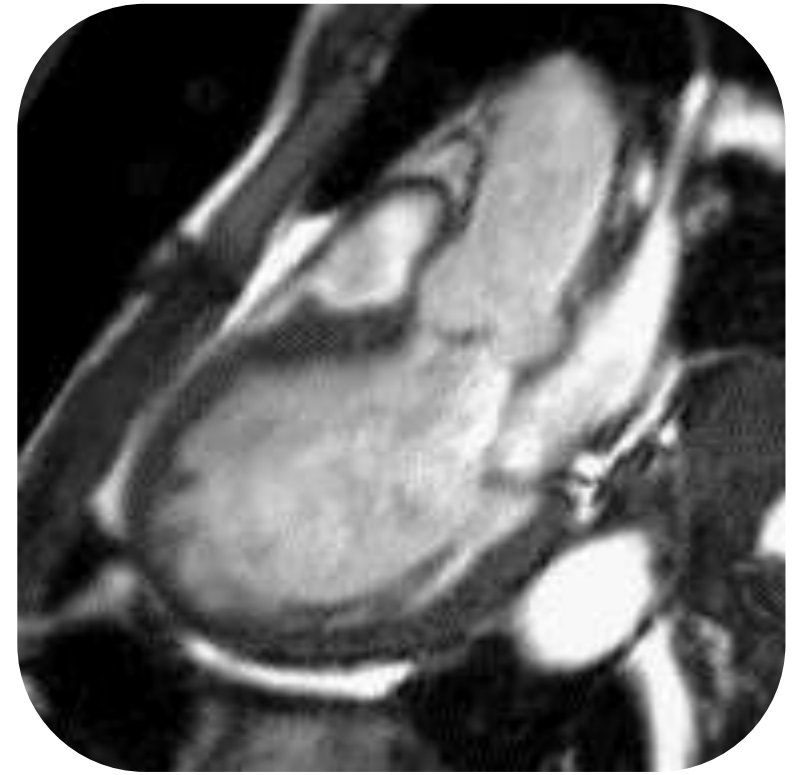
# CMR SSFP



4CH view



2CH view

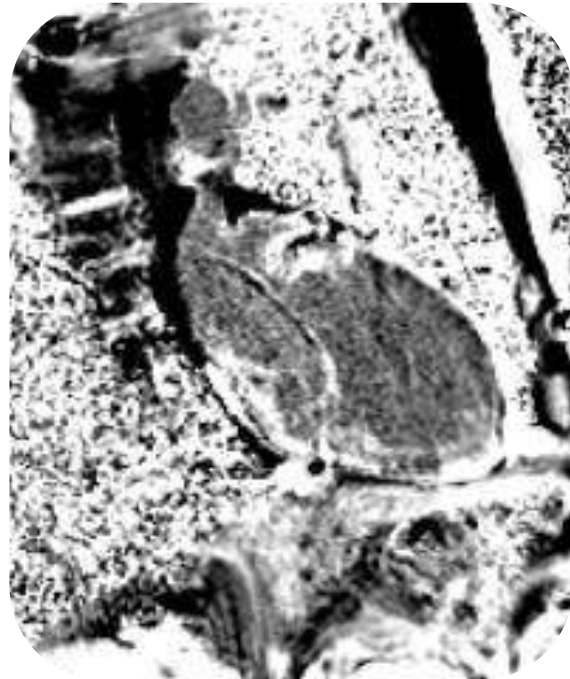


3CH view

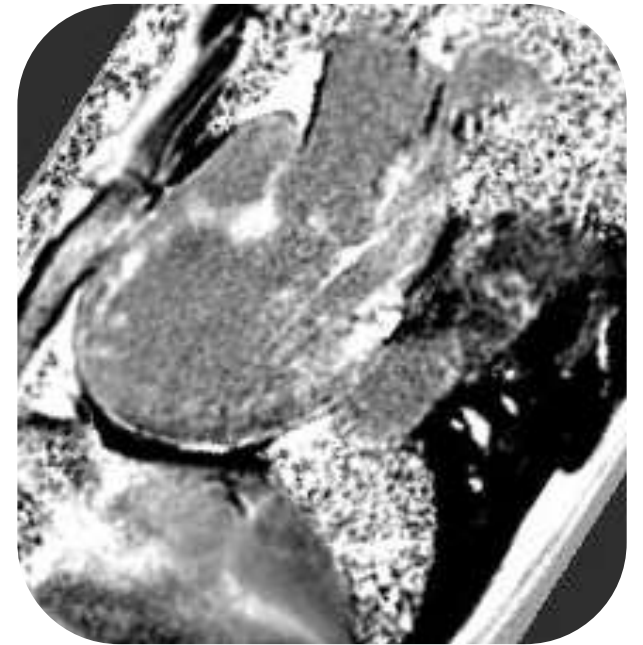
# CMR LGE images



**4CH view**



**2CH view**

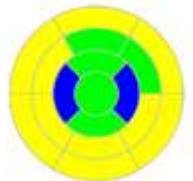


**3CH view**

Study Date Aug 17, 2023  
 ID 17.08.23.15.40.TS.RY.lcb  
 Age 75 years  
 Sex Male  
 Weight 66 kg  
 Height 172 cm  
 BSA 1.78 m<sup>2</sup>  
 Referred By Rustemova Y.Dr



Function



Late Enhancement

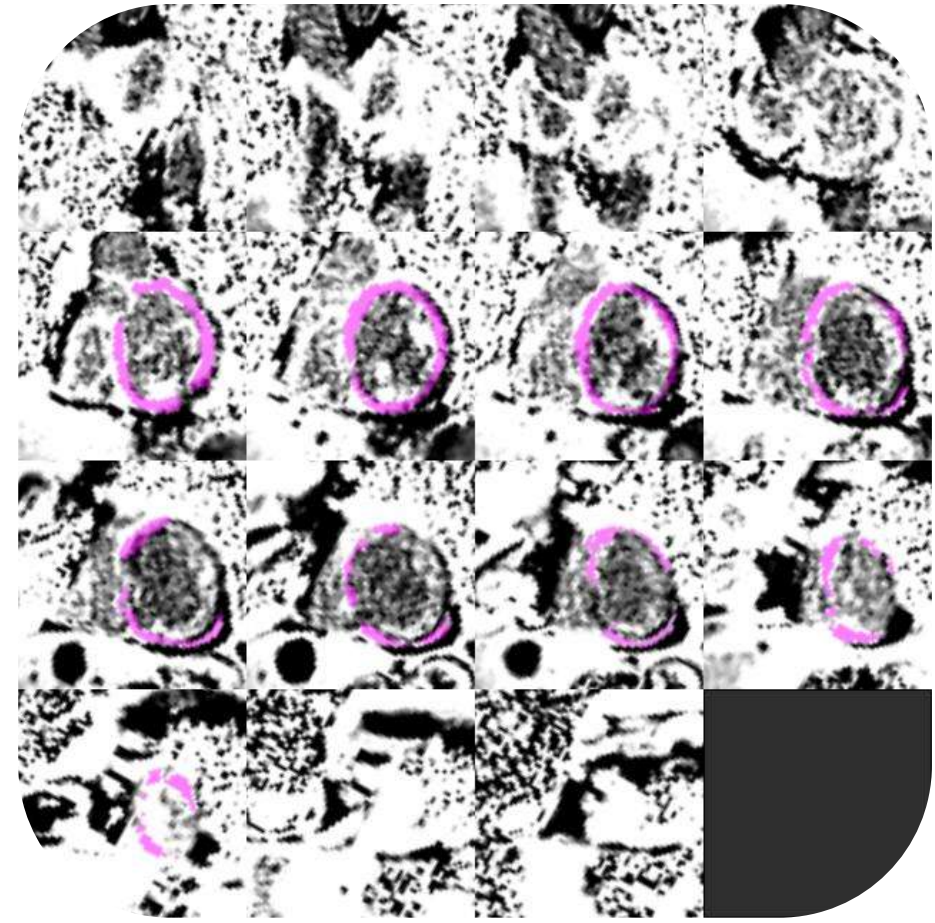
Myocardial Evaluation

Ventricles	LV	Range	RV	Range
Ejection Fraction (%)	10	51 - 71	24	40 - 60
Stroke Volume (ml)	42.1		18.9	
End-Diastolic Volume Index (ml/m <sup>2</sup> )	146	57 - 105	44.7	48 - 112
End-Systolic Volume Index (ml/m <sup>2</sup> )	122	14 - 38	34.2	41 - 117
End-Diastolic Volume (ml)	259	100 - 214	79.8	77 - 201
End-Systolic Volume (ml)	217	29 - 74	60.8	24 - 84
Heart Rate (bpm)	90		90	
Cardiac Output (l/min)	3.8		1.7	
Cardiac Output Index (l/min/m <sup>2</sup> )	2.13		0.95	
Stroke Volume Index (ml/m <sup>2</sup> )	23.6		10.6	12 - 52
Mass (g)	150(ED)	56 - 140		
Mass Index (g/m <sup>2</sup> )	84(ED)	41 - 61		

Ventricles (Long Axis)	LV	Range	RV	Range
Ejection Fraction (%)	14	56 - 75	20	
Stroke Volume (ml)	32.7	59 - 119	8.3	
End-Diastolic Volume Index (ml/m <sup>2</sup> )	131	59 - 90	23.1	
End-Systolic Volume Index (ml/m <sup>2</sup> )	113	25 - 37	18.4	
End-Diastolic Volume (ml)	234	90 - 179	41.1	
End-Systolic Volume (ml)	201	25 - 66	32.8	
Heart Rate (bpm)	89		89	
Peak Filling Rate (ml/s)	323		122	
Peak Ejection Rate (ml/s)	318		189	
Cardiac Output (l/min)	2.9		0.7	
Cardiac Output Index (l/min/m <sup>2</sup> )	1.63		0.42	
Stroke Volume Index (ml/m <sup>2</sup> )	18.4		4.7	
Mass (g)	192(ED)			
Mass Index (g/m <sup>2</sup> )	109(ED)			

Atria (Fast)	LA	Range	RA	Range
End-Diastolic Volume Index (ml/m <sup>2</sup> )	11.3		8.1	
End-Diastolic Volume (ml)	20.1		14.4	

Late Enhancement		
Infarct Mass (g)	77.2	
Left Ventricular Mass (g)	149	
Infarct (%)	52.0	



# Blood tests

TEST ADI	*	NOTİCA	VAHİD	REFERANS	KÖHNÖ NOTİCA I
WBC (Leykositlər)	↑	17,99	10 <sup>9</sup> /L	3,91 - 8,77	
RBC (Eritrositlər)	↑	7,59	10 <sup>12</sup> /L	4,18 - 5,48	
HGB (Hemoglobin)	↑	21,8	g/dL	11,9 - 15,4	
HCT (Hematokrit)	↑	69,4	%	36,2 - 46,3	
MCV (Eritrositlərin orta həcmi)		91,4	fL	80,0 - 93,6	
MCH (Eritrositdə HGB-nin orta həcmi)		28,7	pg	26,5 - 31,4	
MCHC (Eritrositdə HGB-nin orta konsentrasiyası)	↓	31,4	g/dL	31,9 - 34,8	
RDW-CV (Eritrositlərin dağılım genişliyi)	↑	18,6	%	12,3 - 14,3	
RDW-SD (Eritrositlərin dağılım genişliyi)	↑	62,1	fL	37,8 - 46,1	
PLT (Trombositlər)	↑	436	10 <sup>9</sup> /L	151 - 304	
MPV (Trombositlərin orta həcmi)		11,5	fL	9,7 - 11,9	
PCT (Trombokrit)		0,5	%	0,10 - 0,50	
P-LCR (Böyük hüceyrəli trombosit nisbəti)		38,6	%	18,5 - 42,3	
PDW (Trombositlərin dağılım genişliyi)		16,7	%	9,0 - 19,0	
NEUT# (Neytrofillər)	↑	14,64	10 <sup>9</sup> /L	1,82 - 7,42	
LYM# (Limfositlər)		2,02	10 <sup>9</sup> /L	0,85 - 3,00	
MON# (Monositlər)	↑	1,14	10 <sup>9</sup> /L	0,19 - 0,77	
EOS# (Eozinofillər)		0,14	10 <sup>9</sup> /L	0,03 - 0,44	
BAS# (Bazofillər)		0,05	10 <sup>9</sup> /L	0,01 - 0,05	
NRBC#	↓	0	10 <sup>9</sup> /L	0,03 - 0,11	
IG#		0,05	mg/dL	< 0,09	
LYM% (Limfositlər)	↓	11,2	%	12,2 - 47,1	
MON% (Monositlər)		6,3	%	4,4 - 12,3	
NEUT% (Neytrofillər)	↑	81,4	%	40,3 - 74,8	
BAS% (Bazofillər)		0,3	%	0,0 - 0,7	
EOS% (Eozinofillər)		0,8	%	0,0 - 4,4	
		0,00	%		
		0,3	%		

# Blood tests

- Polycythemia vera

## GENETİK HASTALIKLAR DEĞERLENDİRME MERKEZİ

(Ruhsat No: GHDM-SM/06.11/01)

ÖRNEK TİPİ: Periferik Kan  
KABUL TARİHİ: 18.08.2023  
RAPOR TARİHİ: 25.08.2023  
İSTENEN TETKİK KODU: 6297  
GÖNDEREN MERKEZ: Ege Hospital

## GENETİK İNCELEME BULGULARI

### İNCELENEN DEĞİŞİKLİK

JAK2 V617F

### SONUÇ

Pozitif

### Açıklama:

JAK2 V617F mutasyonu saptanmıştır.



# Decision

- Not to revasc : as it is a stable patient
- Not to revasc: no prognostic effect
- CRT-D
- GDMT : Empagliflozin+Spiro

