Quantification of Aortic Cusp Parameters Using Computed Tomography in Valvesparing Aortic Root Replacement Surgery: A Prospective Study

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Objectives

Determining the feasibility of valve-sparing aortic root replacement (VSRR)

Achieving a successful aortic valve repair

- Requires a comprehensive understanding of the aortic root

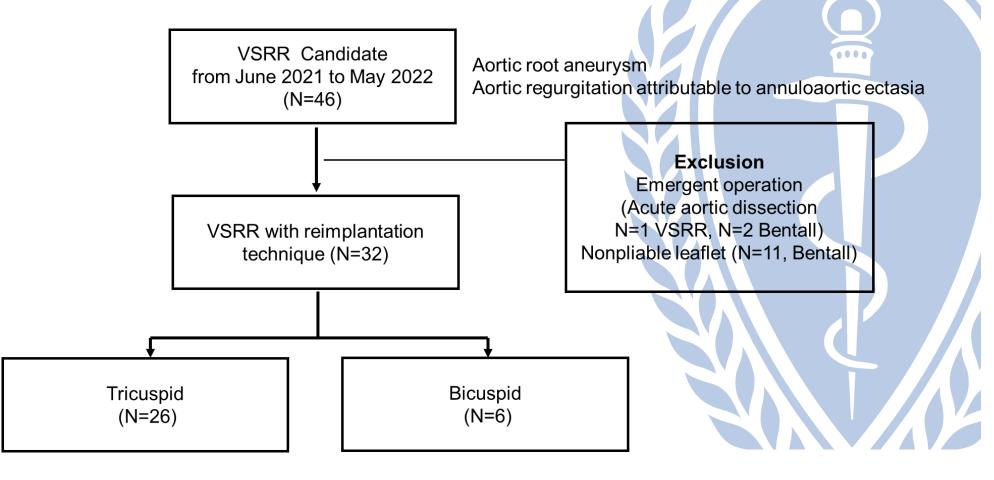
- Accurate preoperative measurements using currently available imaging modalities

Most relevant prior studies focused on parameters of the aorta, and only a few studies have evaluated the cusp parameters, which play a critical role in competent valve function.

Can computed tomography (CT) offer reliable values for the planning of VSRR ?

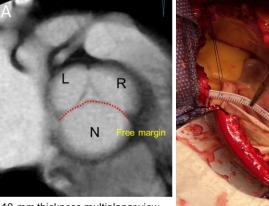
Methods

Prospective trial



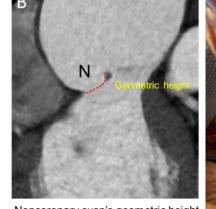
- The aortic cusp profiles, including the free-margin length and geometric height, were measured on preoperative cardiac CT.
- Comparisons between preoperative cardiac CT and intraoperative measurement of the aortic valve cusp
 - > performed by Bland–Altman plots and the interclass-correlation method.

Free margin length



10-mm thickness multiplanar view of noncoronary cusp's free margin





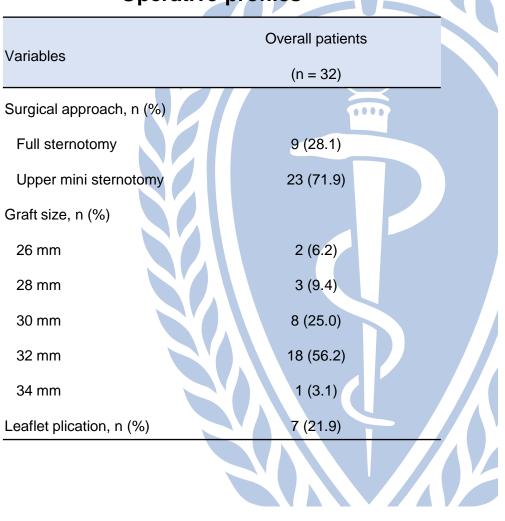
Noncoronary cusp's geometric height

Results

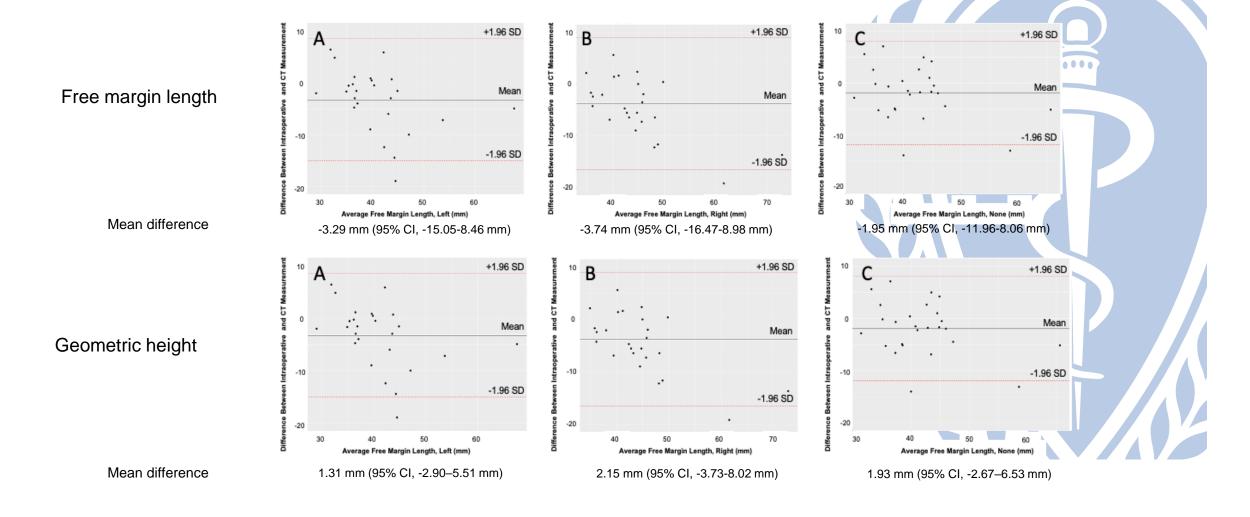
Baseline characteristics

Operative profiles

Veriekles	Overall patients				
Variables	(n = 32)				
Age, years	53.5 [39.5–61.0]				
Female sex, n (%)	5 (15.6)				
Hypertension, n (%)	17 (53.1)				
Diabetes mellitus, n (%)	2 (6.2)				
Atrial fibrillation, n (%)	1 (3.1)				
Chronic renal failure, n (%)	2 (6.2)				
Bicuspid aortic valve, n (%)	6 (18.8)				
Aortic regurgitation, n (%)					
None to trivial	2 (6.3)				
Mild	3 (9.4)				
Moderate	5 (15.6)				
Severe	22 (68.8)				
LV ejection fraction, %	56.5 [52.0 - 63.0]				
LVESD, mm	41.5 [33.5 - 48.5]				



Measurement reliability-Tricuspid

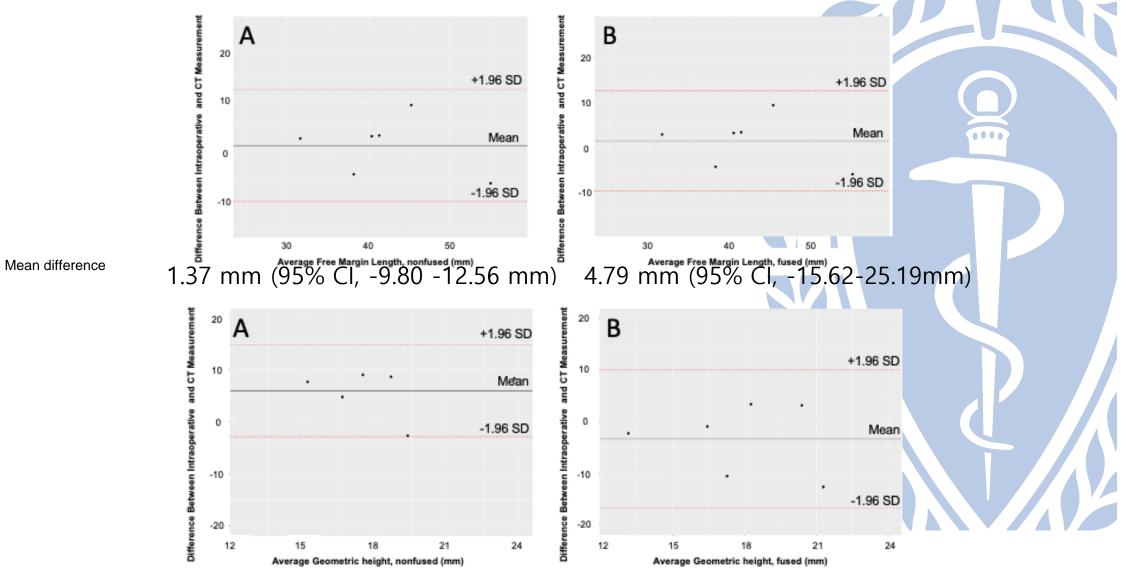


Measurement reliability-Tricuspid

Variable	Intraoperative	СТ	ICC	95% CI	p-value	Pearson	p-value
Free margin length, left	36.5 [35.0-42.0]	39.4 [36.3-46.0]	0.81	0.51-0.92	<0.001	0.76	<0.001
Free margin length, right	42.0 [40.0-45.0]	45.2 [39.0–49.2]	0.80	0.47-0.92	<0.001	0.80	<0.001
Free margin length, non	40.0 [36.0-45.0]	41.4 [38.3-45.7]	0.87	0.70-0.94	<0.001	0.80	<0.001
Geometric height, left	20.0 [19.8-20.0]	18.8 [15.8-20.5]	0.69	0.21-0.87	0.006	0.67	<0.001
Geometric height, right	20.0 [20.0-20.0]	18.1 [15.7-19.4]	0.44	-0.23-0.75	0.08	0.39	0.04
Geometric height, none	21.0 [20.0-23.0]	19.4 [18.1-21.8]	0.60	-0.13-0.84	0.04	0.57	0.002

ICC, interclass correlation coefficient

Measurement reliability-Bicuspid



Mean difference

5.99 mm (95% Cl, -2.86–14.85mm) -3.26 mm (95% Cl, -16.66-10.14 mm)

Measurement reliability-Bicuspid



Variable	Intraoperative	СТ	ICC	95% CI	p-value	Pearson	p-value
Free margin length, non-fused	42.5 [36.0-50.0]	40.0 [38.8-40.6]	0.88	0.16-0.98	0.02	0.78	0.06
Free margin length, fused	39.5 [37.2-40.3]	39.5 [36.4-40.5]	0.23	-3.14-0.89	0.38	0.13	0.80
Geometric height, non-fused	20.5 [19.0-22.8]	14.3 [12.9-19.6]	0.22	-0.45-0.82	0.30	0.27	0.60
Geometric height, fused	15.5 [12.8-19.0]	17.8 [16.5-22.5]	-0.33	-9.23-0.82	0.65	-0.15	0.77

Conclusions

 The preoperative CT measurements of the aortic valve cusp showed reasonable predictive power for the free-margin length, albeit only limited accuracy for the geometric height measurement.