

Restoration of 3D Aortic Hemodynamics after Ross Procedure for Unicuspid Aortic Valve Disease Using 4D Flow MRI

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Disclosures

- I have nothing to disclose



Unicuspid Aortic Valve (UAV) Background

- **UAV disease and demographics**
 - Rare, congenital disease
 - Often mis- and underdiagnosed
 - Presents 10-20 years earlier than bicuspid aortic valve (BAV)
- **Treatment approach**
 - No uniform approach to intervention
 - Replace > repair
 - Ross procedure has recently re-emerged as an option for patients under 50

Methods

- Identified 25 patients who underwent pulmonary autograft replacement of their UAV between February 2020 and August 2023
 - 13 patients had both pre- and post-op 4D Flow MRI's (*n*=26)
- Patients were age and gender-matched 1:1 with healthy control patient with no history of heart disease (*n*=13)

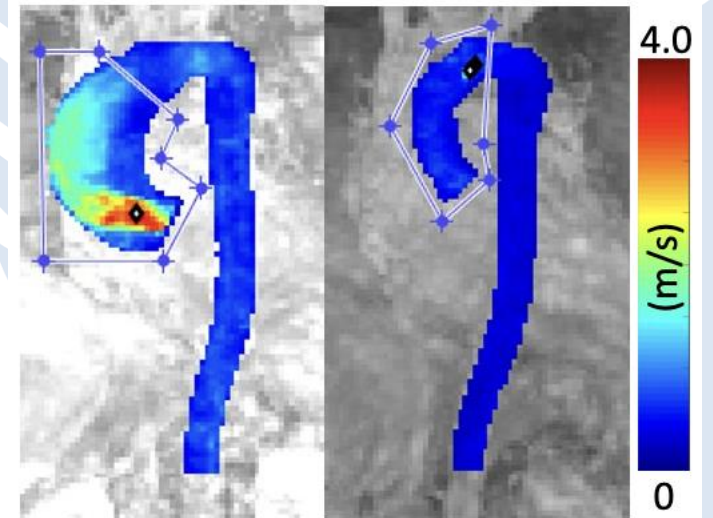
Characteristics at Baseline (<i>n</i> =13)	
Age	36.7 ± 9.8
Male Sex	11 (85%)
BMI (kg/m ²)	28.2 ± 5.9
HR (beats/min)	74.2 ± 10.8
LVEDV (mL)	187.4 ± 54.1
LVESV (mL)	82.5 ± 50.3
SV (mL)	104.8 ± 21.2
EF (%)	58.7 ± 13.1
CO (L/min)	7.1 ± 1.3
Aortic Stenosis Grade	
None to trace	1
Mild	1
Moderate to severe	11
Aortic Regurgitation Grade	
None to trivial	5
Mild	5
Moderate to severe	3
Concomitant Procedures	
Aorta Replacement	12
Hemiarch Repair	8
Aortoplasty	4
External Aorta Annuloplasty	5

Methods

- kji

Velocity MIP Comparison

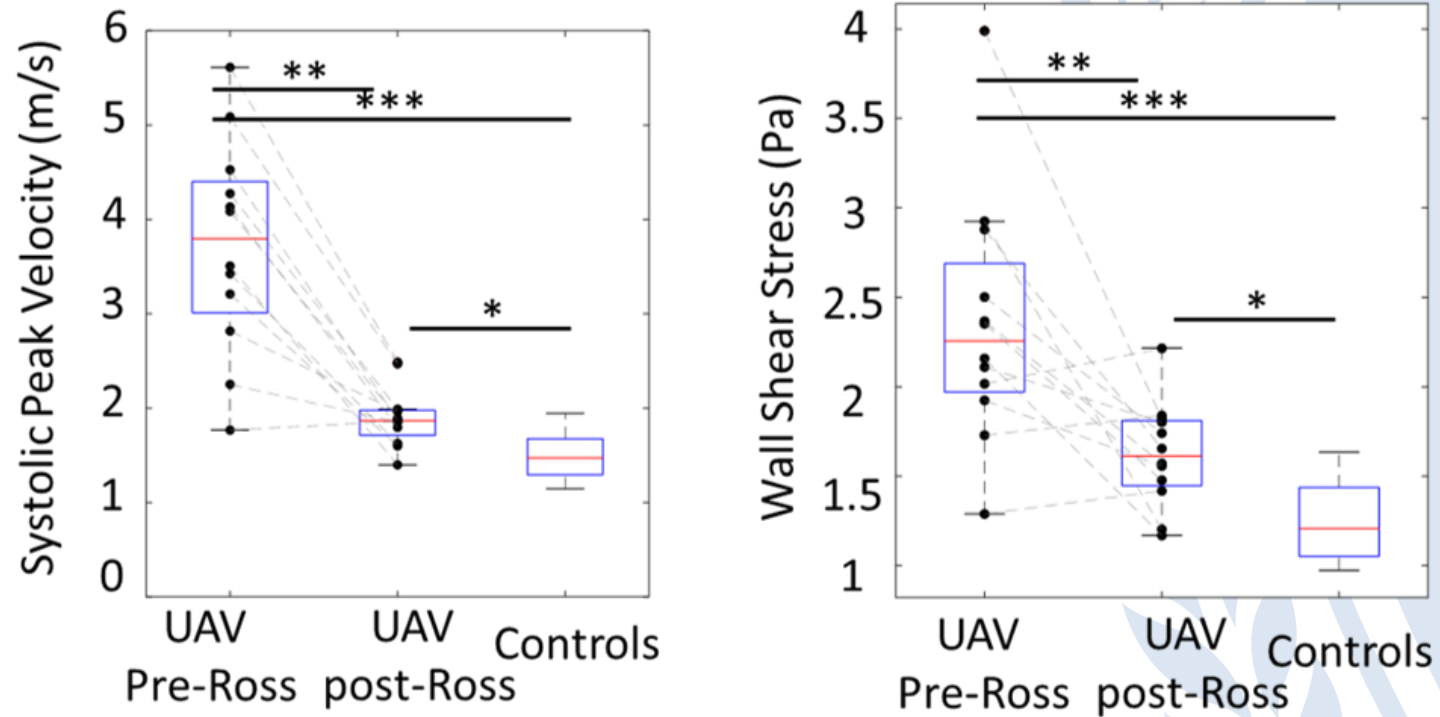
Median UAV Patient Pre-Ross Median UAV Patient Pre-Ross



Peak Vel = 3.70 m/s Peak Vel = 1.34 m/s

Results

Peak Velocity and Wall Shear Stress Comparison



* = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.0001$

Title Only – Open for Graphics, etc.

