

Clinical Image

Anomalous Right Coronary Artery from the Left Sinus of Valsalva

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Clinical Image

A 42-year-old man with normal resting electrocardiogram, who presented with chest tightness. Computed tomography angiography showed that the anomalous origin of the RCA from the left sinus of valsalva (Figures 1A-1C), Coronary angiography (video of the supplementary material and Figure 1D) confirmed this anomaly. Congenital anomalies of the coronary artery are uncommon, with a reported incidence of 0.3% to 1.3% in the coronary angiography studies. There are several types of course of the coronary artery; however, anomalous origin of the coronary artery from the opposite coronary sinus is a potentially serious anomaly. Myocardial ischemia or sudden death in this setting is presumed to be caused by compression of the anomalous coronary artery as it courses between the aorta and pulmonary trunk or by an intramural aortic wall, with associated ostial narrowing, as well as an acute angle of take-off of the anomalous coronary artery from the aorta. Patients who have symptoms of ischemia or arrhythmia with either form of the anomaly are candidates for surgical repair, however, some experts suggested that most patients with RCA from the left sinus of valsalva should be followed up without aggressive treatment. Since the patient did not accept surgical repair, he was commenced on β -blockers and kept on medical follow-up with advice to avoid strenuous physical exertion.

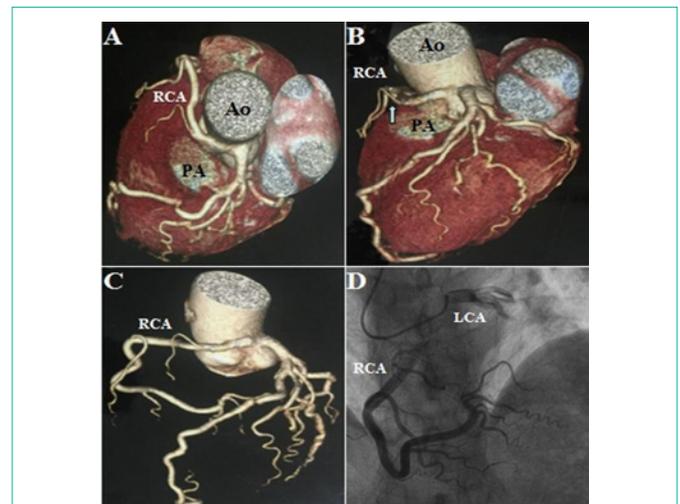


Figure 1: Anomalous Right Coronary Artery from the Left Sinus of Valsalva. (A-C) Coronary computed tomography angiography image showing anomalous right coronary artery from the left sinus of valsalva. (D) Coronary angiography showing anomalous right coronary artery from the left sinus of valsalva.



Video 1: Coronary angiography revealed anomalous right coronary artery from the left sinus of valsalva.