#### TGA

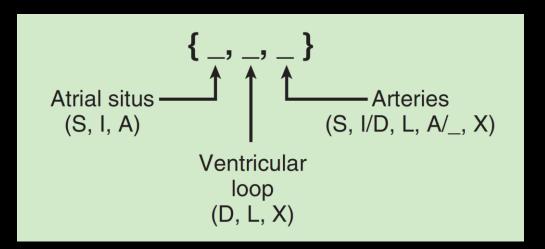
(Transposition of the Great Arteries)

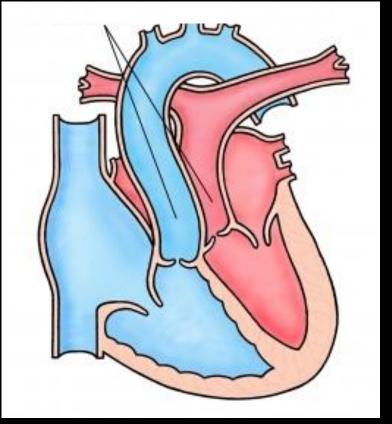
서울아산병원 소아심장외과 최은석





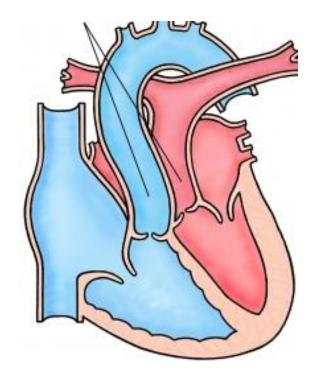
### Segmental analysis





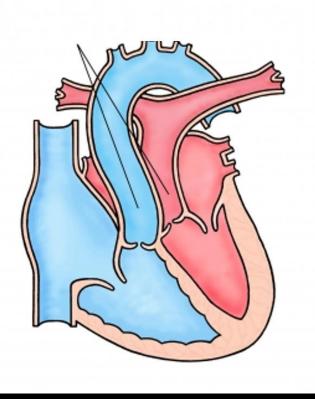
### Transposition of the great arteries

- D-TGA or complete TGA
- 10%
- Male predominance
- Associated malformations



VSD / PS (LVOTO) / Arch obstruction

# Anatomic and Physiologic features

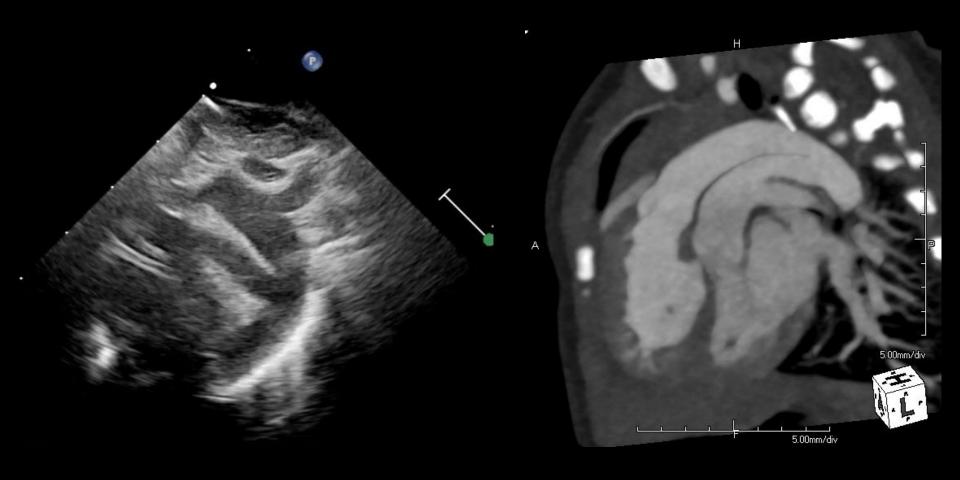


Ao from RV / PA from LV
(Ventriculoarterial discordance)

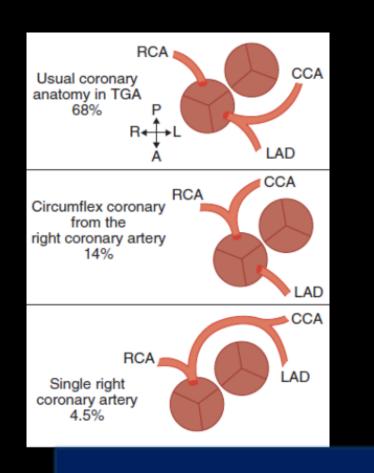
Parallel circulation (hypoxia)

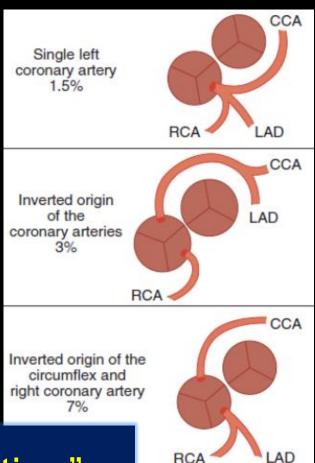
Need mixing to survive

# **D-TGA**



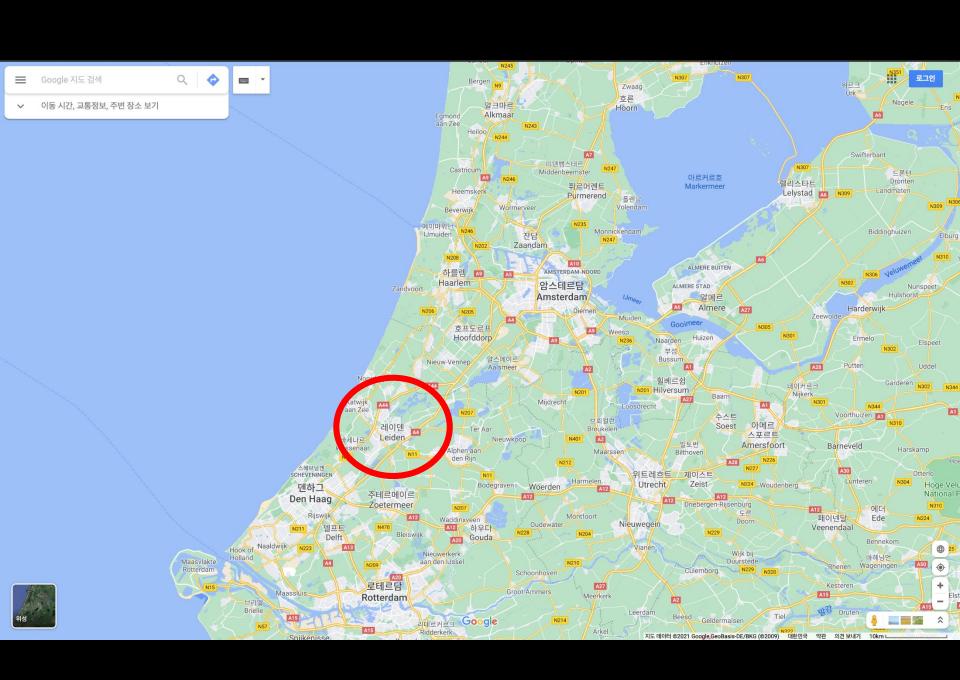
#### **Coronary artery**





"Leiden convention"

Surgery of the Chest, 9th ed.



#### **Modified Leiden convention**

#### Step 1

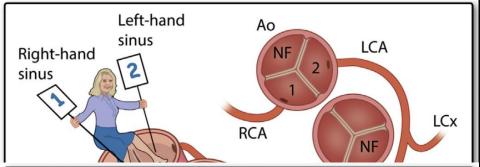
#### Position in the non-facing sinus

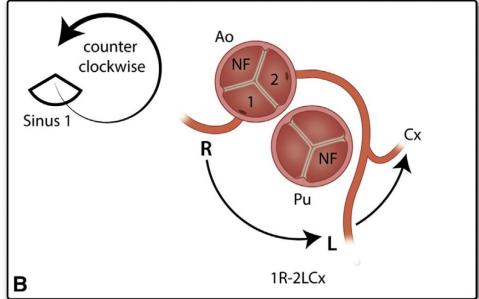
- Right-hand sinus: sinus 1
- Left-hand sinus: sinus 2

#### Step 2

#### **Annotation coronary arteries**

- Start with sinus 1
- Name encountered branches in counter clockwise order
- R= right coronary artery
- L= left anterior descending coronary artery (LAD)
- Cx= left circumflex artery (LCx)



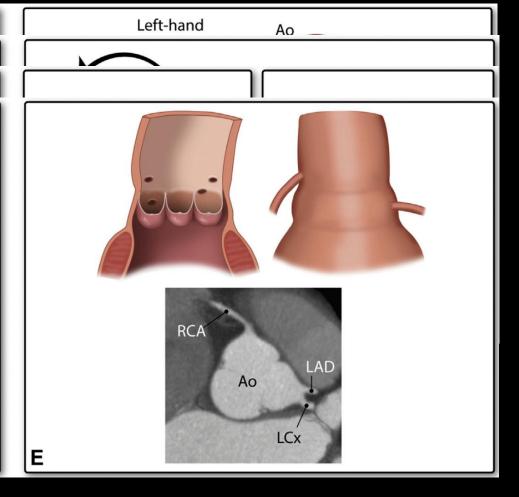


#### Modified Leiden convention

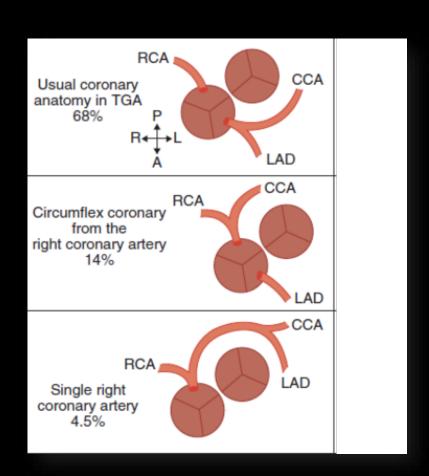
# Step 1 Step 2 Step 3

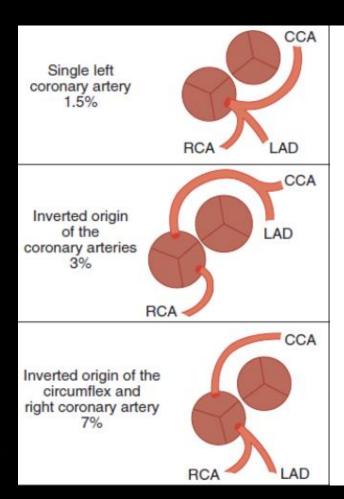
#### Associated characteristics with respect to coronary course/anatomy

- · Interarterial/intramural course
- Relative relationship of the great arterial orifices
- Acute angle (vertical/horizontal) of coronary artery
- Degree of alignment of facing commisures
- Eccentric position of coronary orifices in horizontal/vertical plane
- · Single, common, double orifices
- Accessory branches
- · Left-right dominance
- Type B BAV with inconclusive morphology: describe coronary anatomy extensively



#### **Exercise**





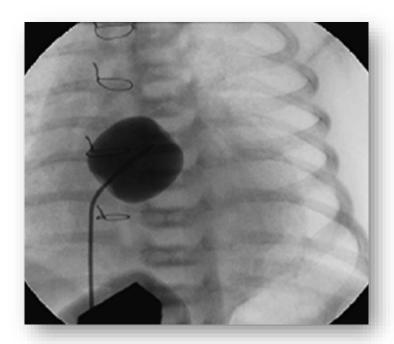
Surgery of the Chest, 9th ed. J Thorac Cardiovasc Surg 2018;156:2260-9

# Diagnosis and Preop. Mx

- Echocardiography
- Hypoxemia
  - Hydration
  - PGE1
  - BAS
  - Emergency operation

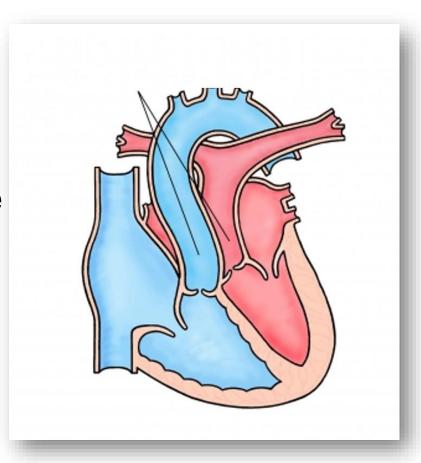
### BAS

- Balloon atrial septostomy (1966)
- For adequate mixing



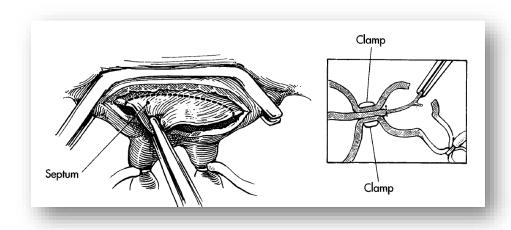
# Surgical Management

- Early operation
- Physiologic repair
  - RV as systemic ventricle
- Anatomic repair
  - LV as systemic ventricle



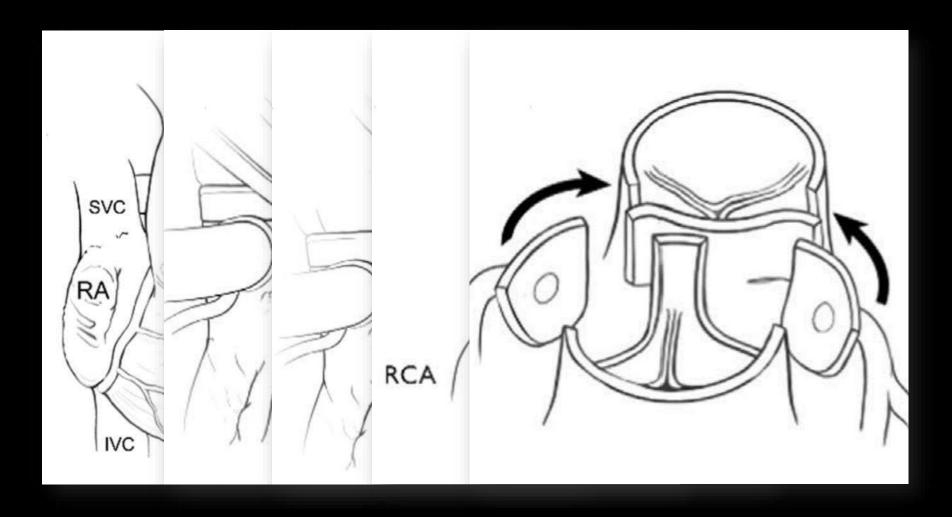
#### Palliation / Atrial switch

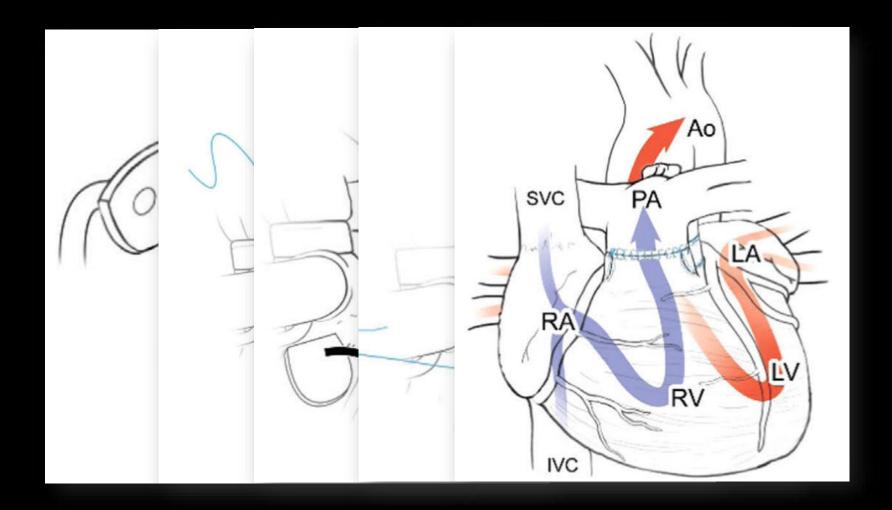
- Palliation
  - Atrial septectomy
  - PAB
- Atrial switch
  - Physiologic repair
  - Senning (1959) / Mustard (1964)



Blalock-Hanlon atrial septectomy

- First success in 1975 by Jatene
  - For neonate in 1984
- Anatomic repair
- The procedure of choice, if "switchable"
- Technique
  - Trap-door technique
  - Lecompte maneuver





# Operation

- F/6 days, 3.14kg
- Diagnosis
  - Complete TGA
  - ASD, PDA
- Operation
  - Arterial switch operation
  - ASD closure, PDA division

# Prognosis after ASO

- Good
- Causes for reoperation
  - RVOTO
  - Neo-AR or Neo-aortic root dilatation
  - Coronary artery lesion

- TGA / IVS
- TGA / VSD
- TGA / VSD / PS (LVOTO)
  - Rastelli operation
  - REV
  - Aortic translocation (Nikaidoh)

# Take-home message

#### TGA

- Ventriculo-arterial discordance
- Coronary artery anatomy & coding
- Arterial switch operation





#### Reference

- Surgery of the Chest, 9<sup>th</sup> ed., 2015
- Pediatric Cardiac Surgery, 4<sup>th</sup> ed., 2012
- Anderson's Pediatric Cardiology, 4<sup>th</sup> ed., 2019

gninihs@naver.com



