

Aortic Regurgitation

Evaluation by 2-D and Doppler Echocardiography

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DISCLOSURES

Relevant Financial Relationship(s)

None

Off Label Usage

None

Etiology of Aortic Regurgitation

Valvular

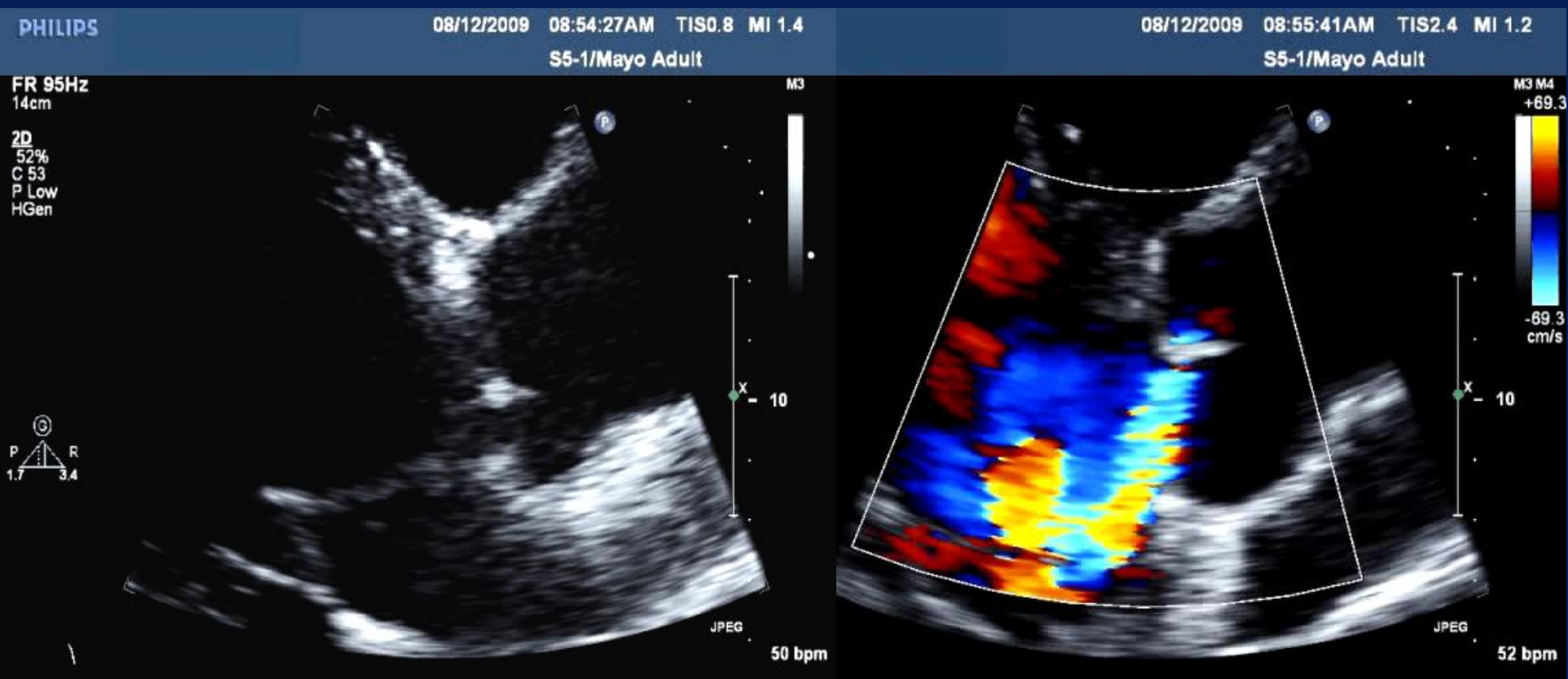
Chronic

- Degenerative/calcific
- Bicuspid aortic valve
- Infective endocarditis
- Prosthetic valve failure
- Rheumatic fever
- **Inflammatory** (RA, SLE, Crohn's, Whipple, Ankylosing Spondylitis)
- **Congenital** (SubAo Stenosis, VSD)
- **Myxomatous disease**
- **Drug induced**

Acute

- **Infective endocarditis**
- **Traumatic**

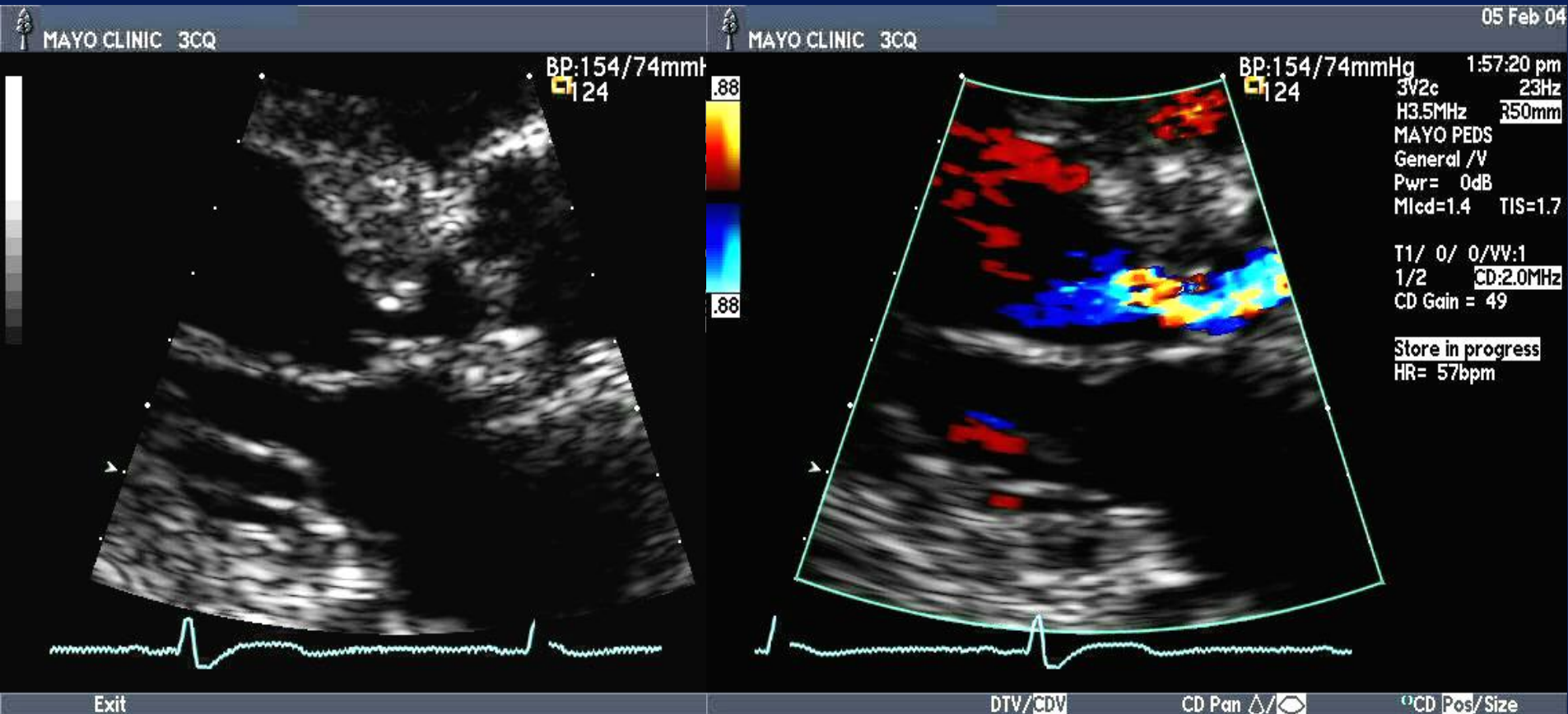
Bicuspid Aortic Valve and Aortopathy



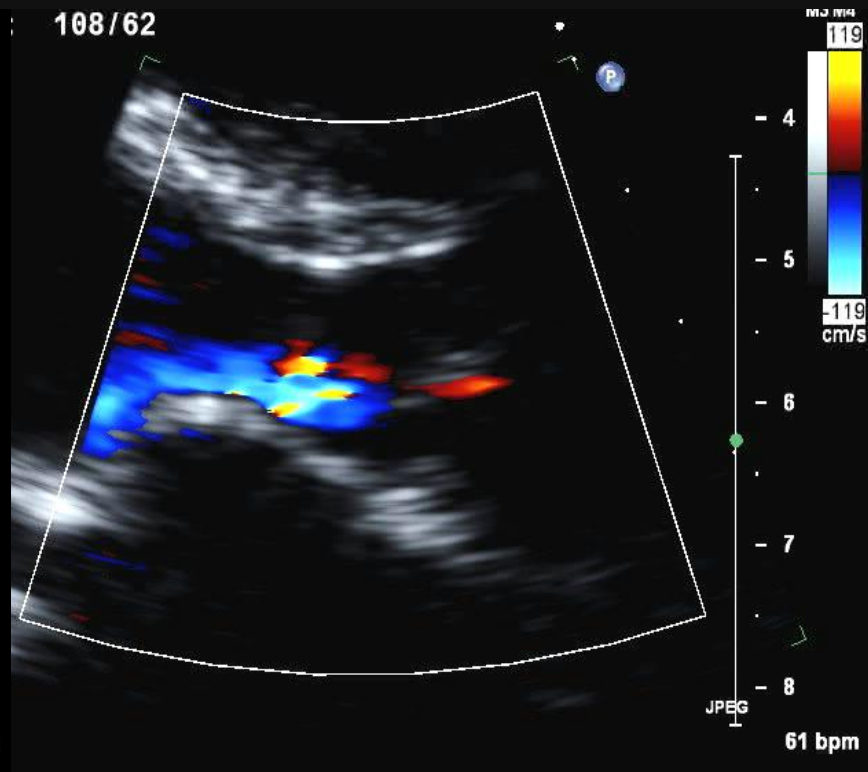
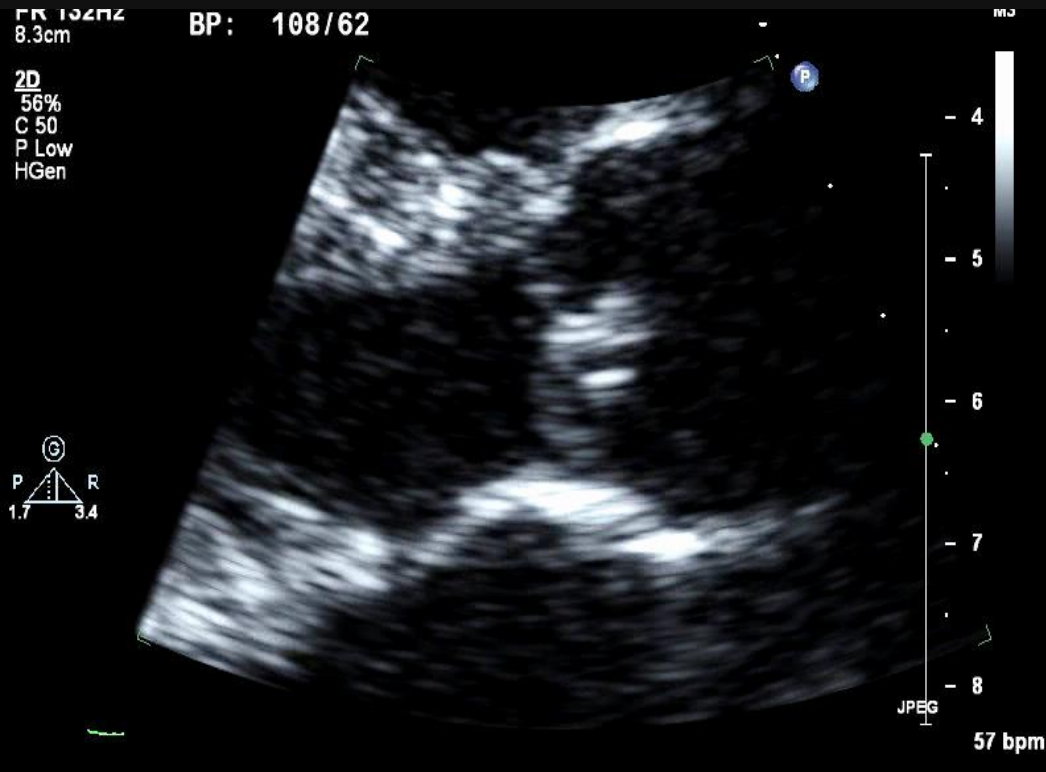
Bicuspid Aortic Valve and Aortopathy



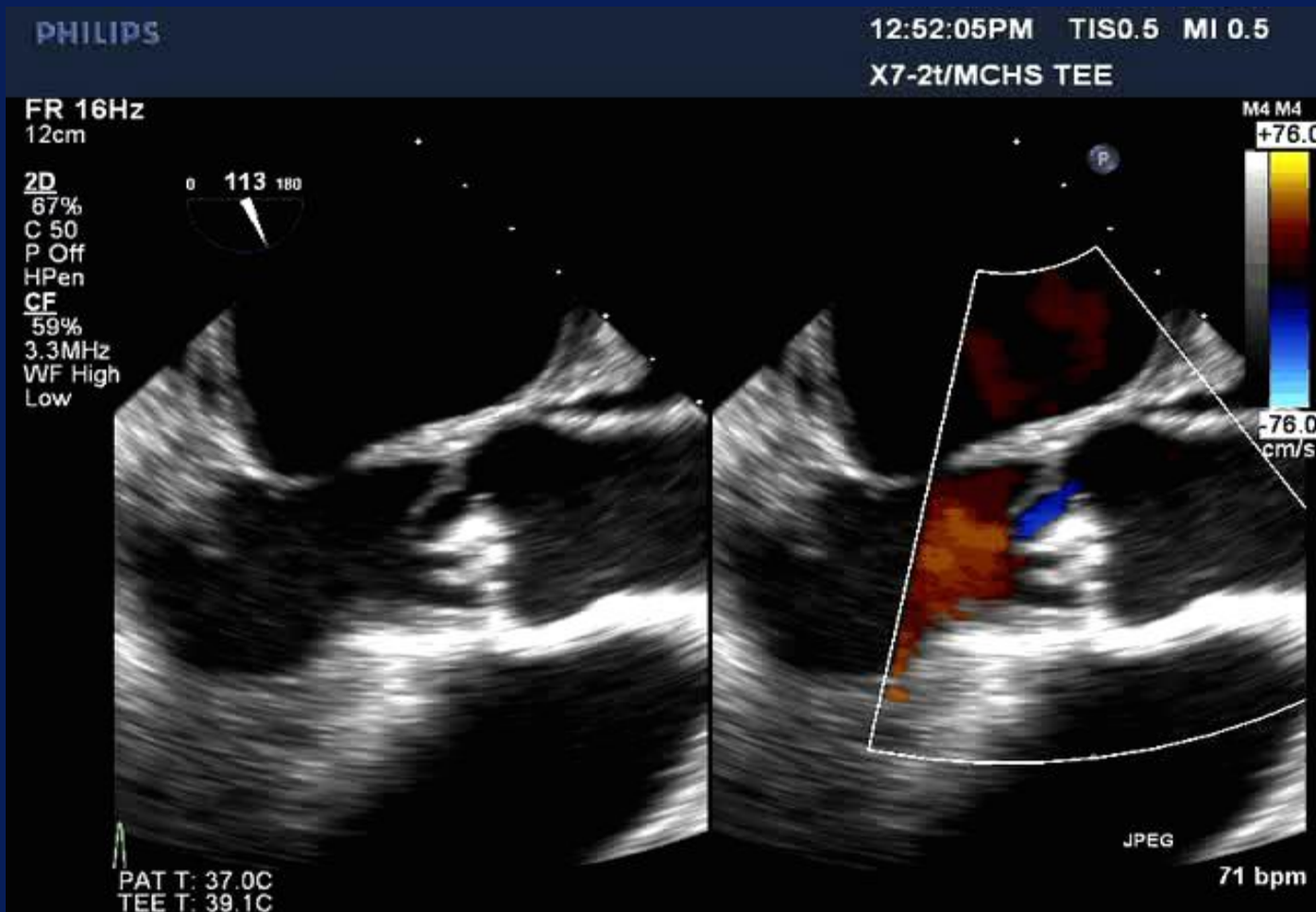
Congenital Subaortic Stenosis



Rheumatic Aortic Valve Disease



Infective Endocarditis



Etiology of Aortic Regurgitation

Ascending Aorta

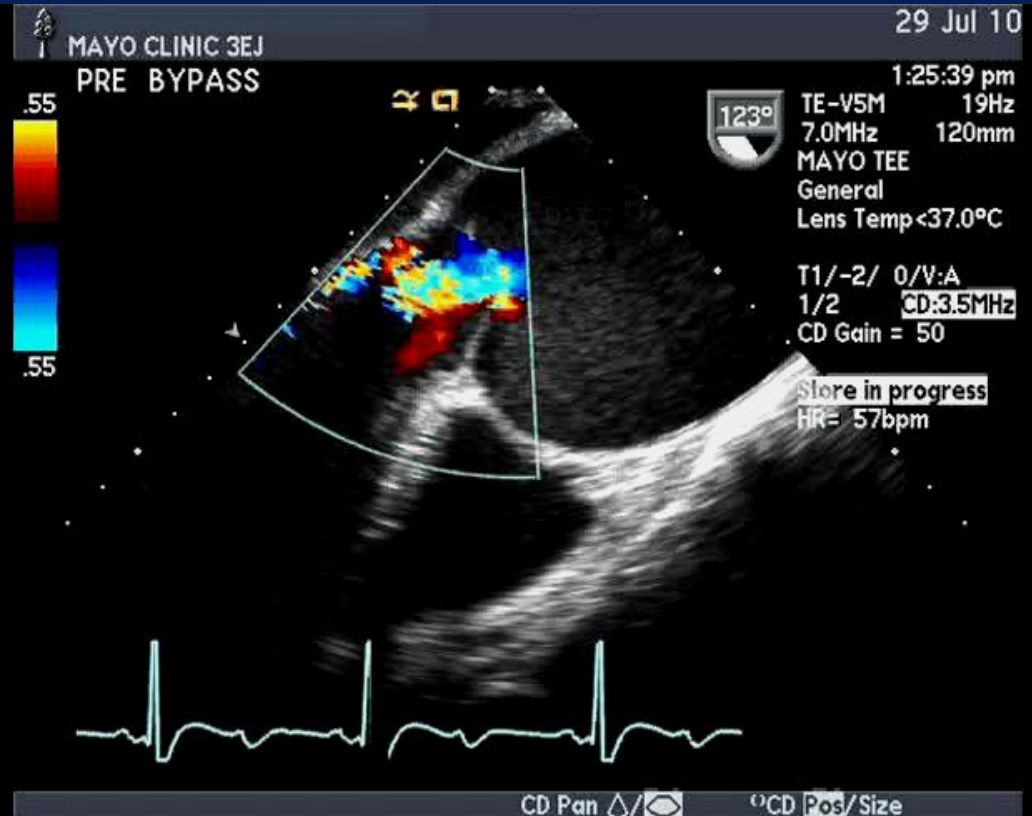
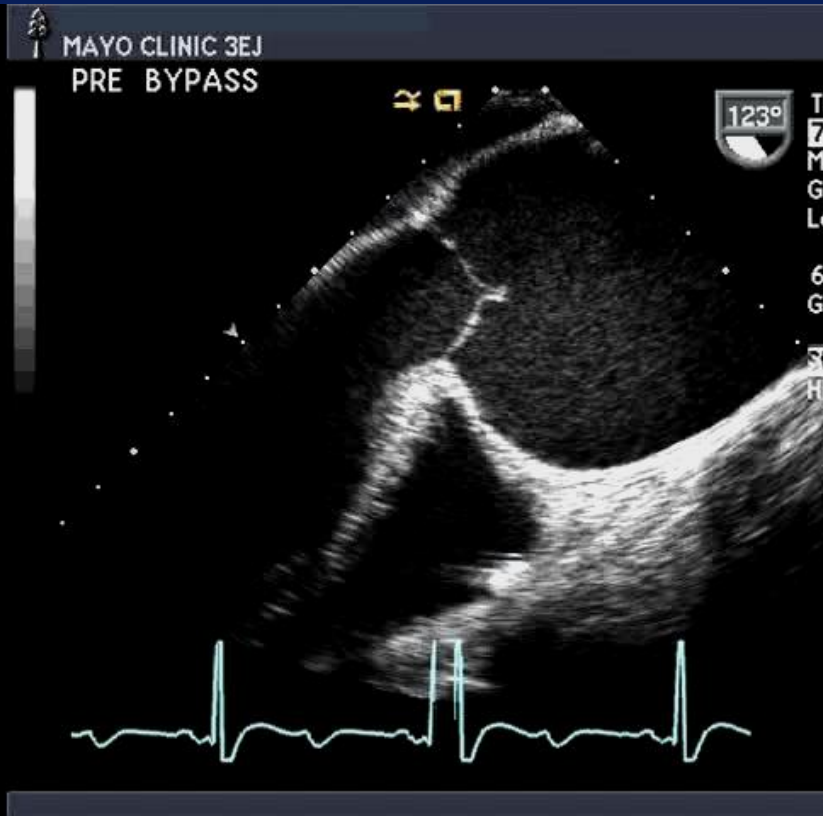
Chronic

- Degenerative
- Hypertension
- Bicuspid aortopathy
- Collagen vascular disease (Marfan, Loeys Dietz, Ehlers Danlos Syndromes)
- Inflammatory (Reiters, Behcets, ankylosing spondylitis, relapsing polychondritis, psoriatic arthritis, giant cell arteritis)

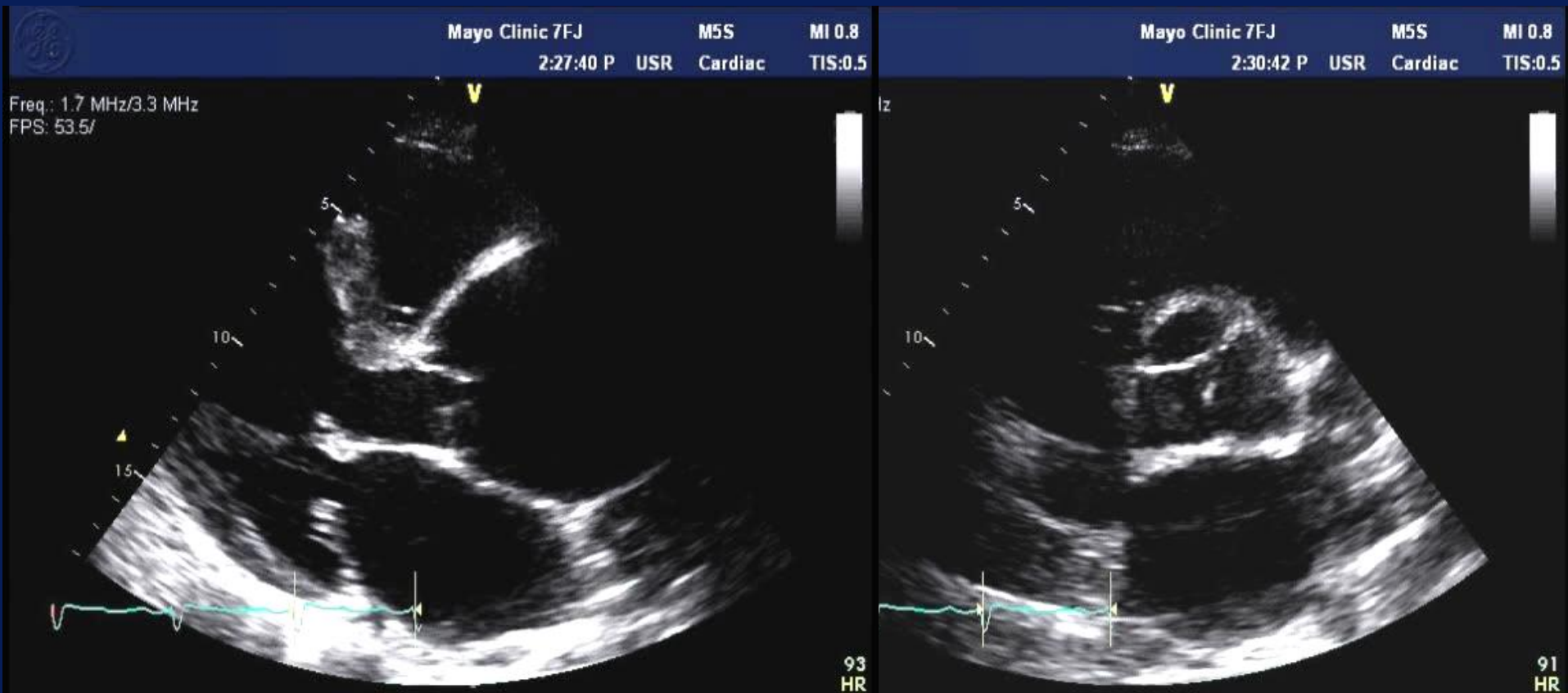
Acute

- Type A dissection
- Type A aortic intramural hematoma
- Traumatic

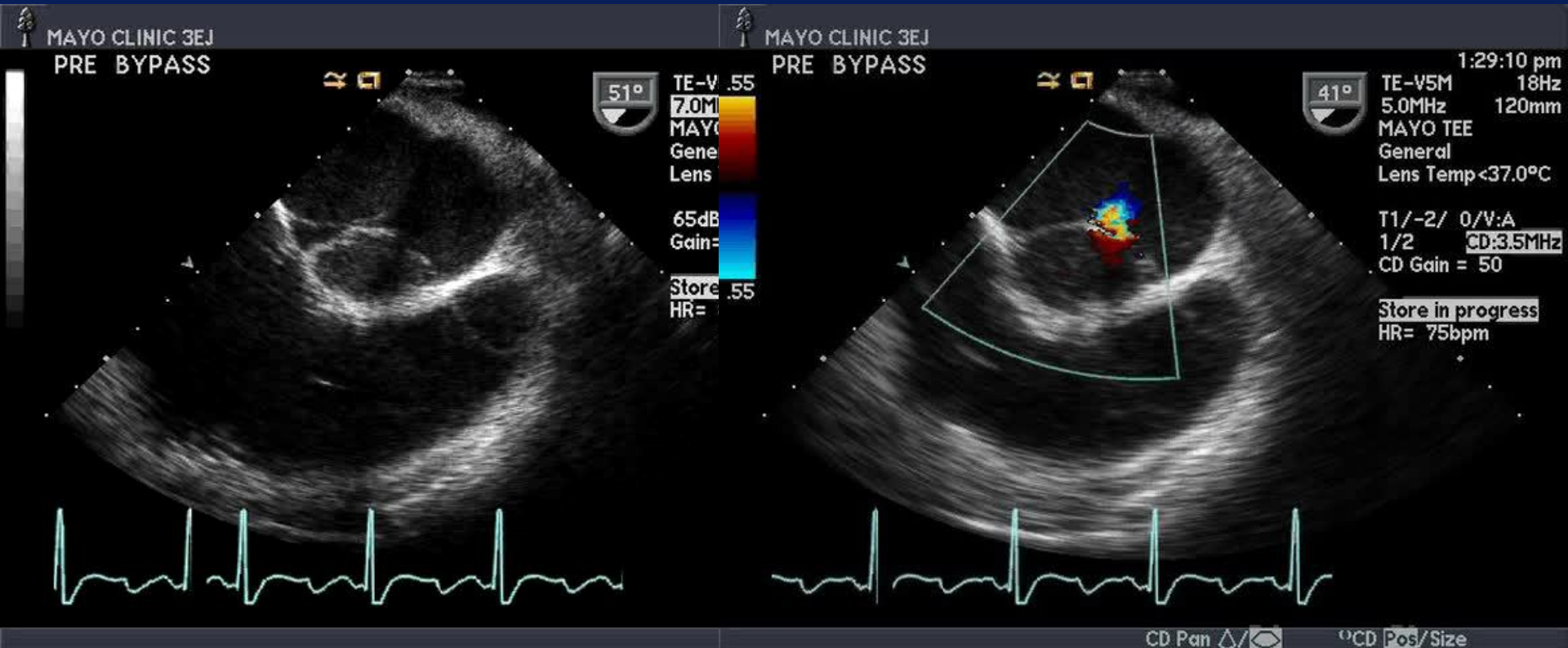
Ascending Aortic Aneurysm Marfan Syndrome



Ascending Aortic Aneurysm



Ascending Aortic Aneurysm Marfan Syndrome

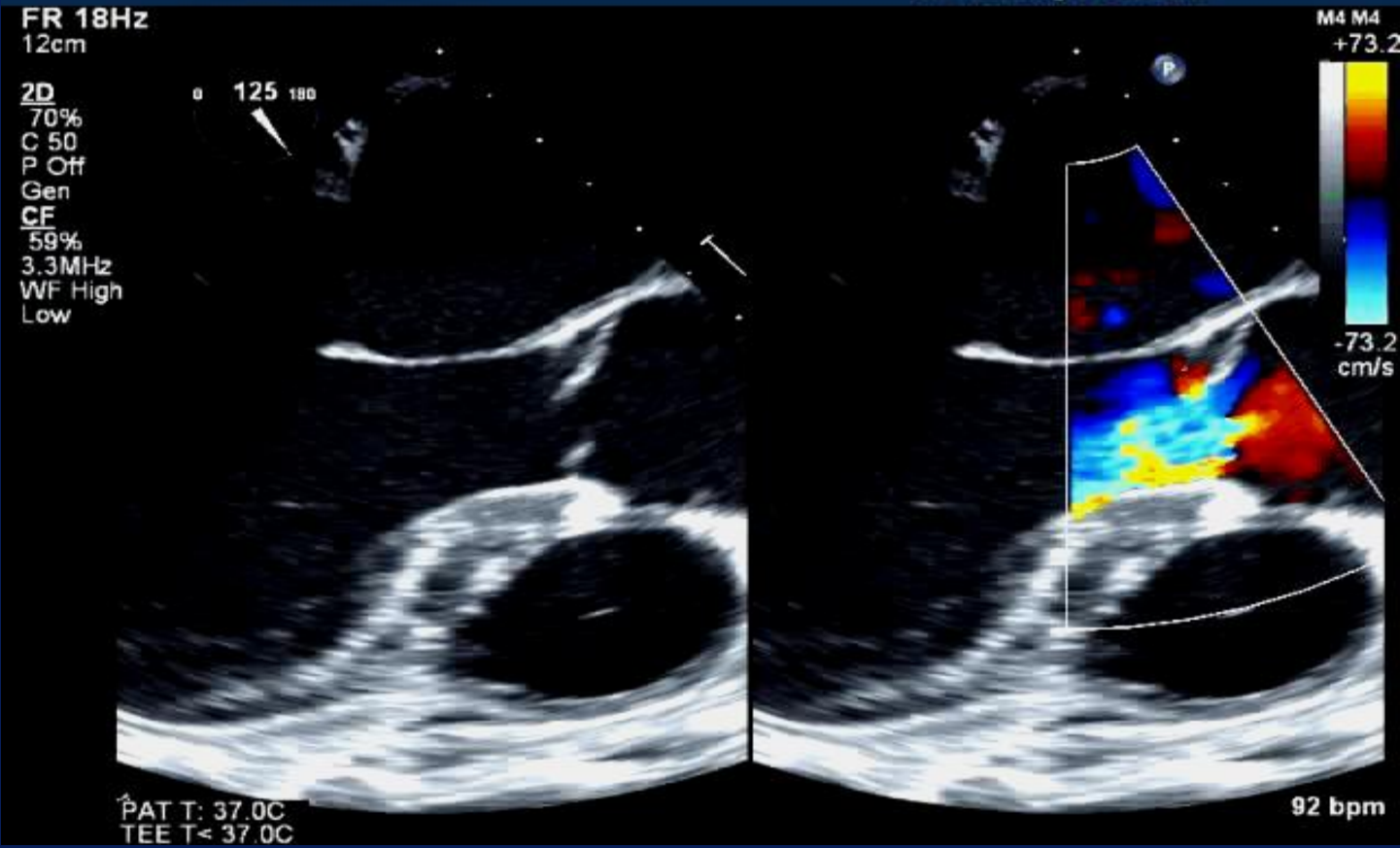


Type A Aortic Dissection

PHILIPS

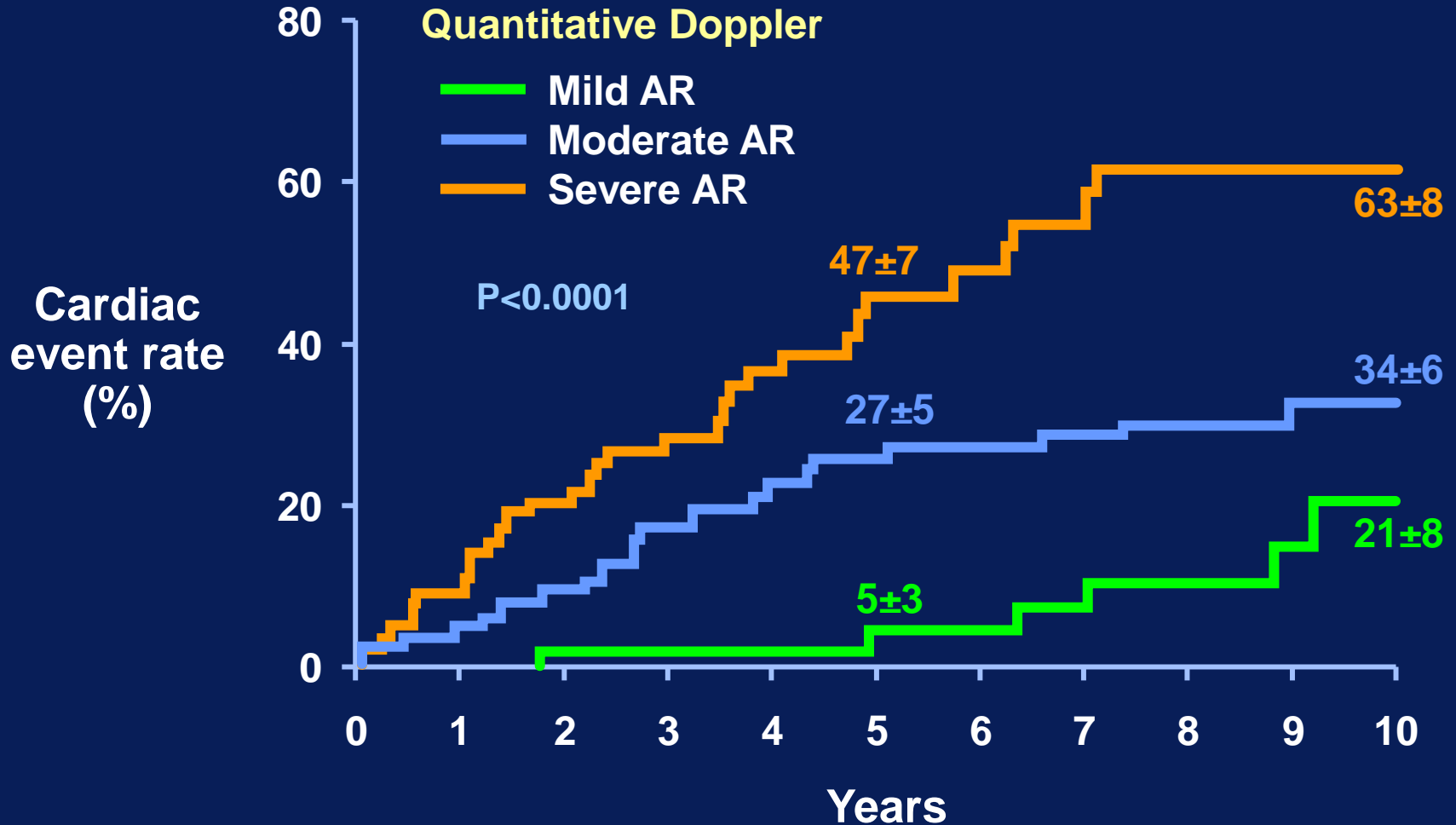
02/09/2011 05:47:12PM TIS0.6 MI 0.6

X7-2t/Mayo 3DTEE



Initially Asymptomatic Aortic Regurgitation

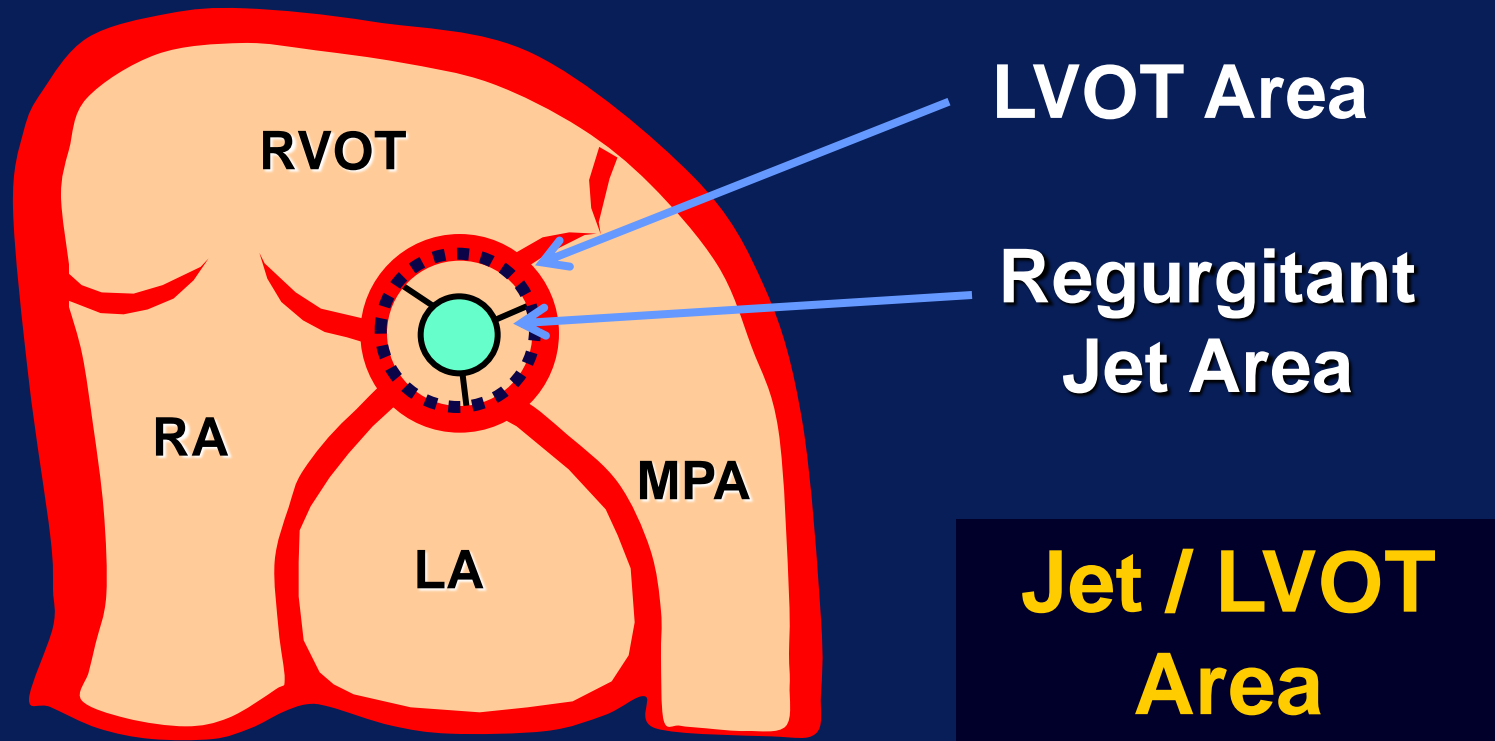
Events: Heart Failure, New AFib, Cardiac Death



Aortic Regurgitation: Semiquantification

Color Flow Doppler

Parasternal Short- Axis

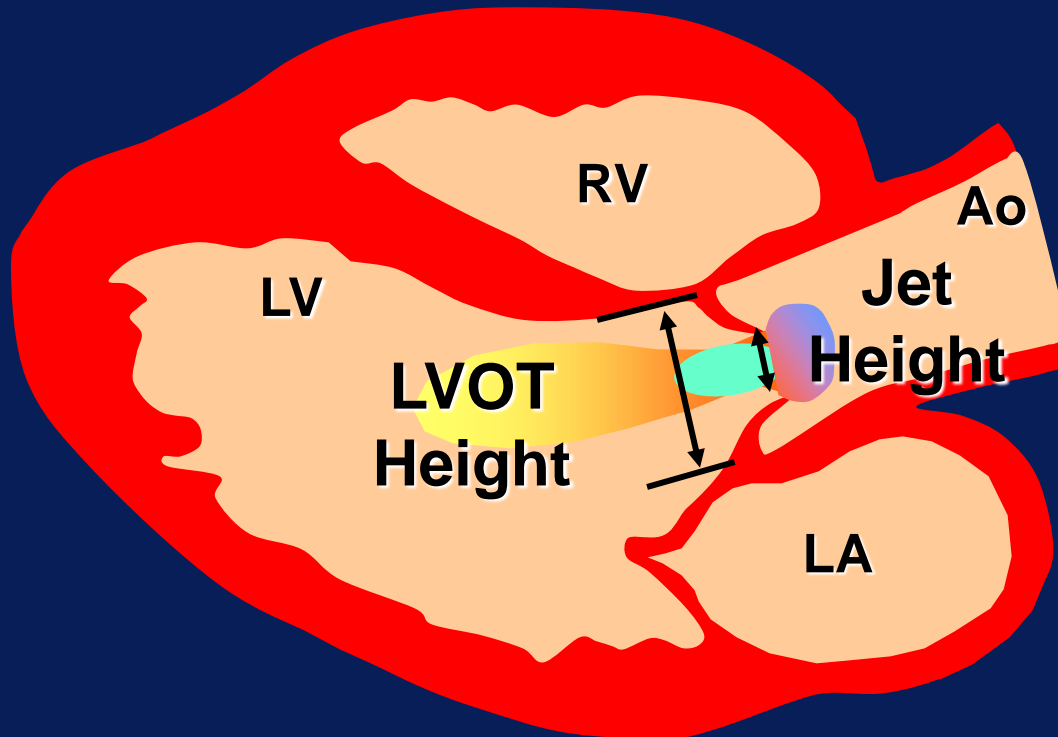


Oh JK et al: The Echo Manual; 3rd Edition
Perry GJ, et al JACC 1987

Aortic Regurgitation: Semiquantification

Color Flow Doppler

Parasternal Long- Axis



**Jet / LVOT
Height**

Oh JK et al: The Echo Manual; 3rd Edition
Perry GJ, et al JACC 1987

Aortic Regurgitation: Semiquantification

Color Flow Doppler

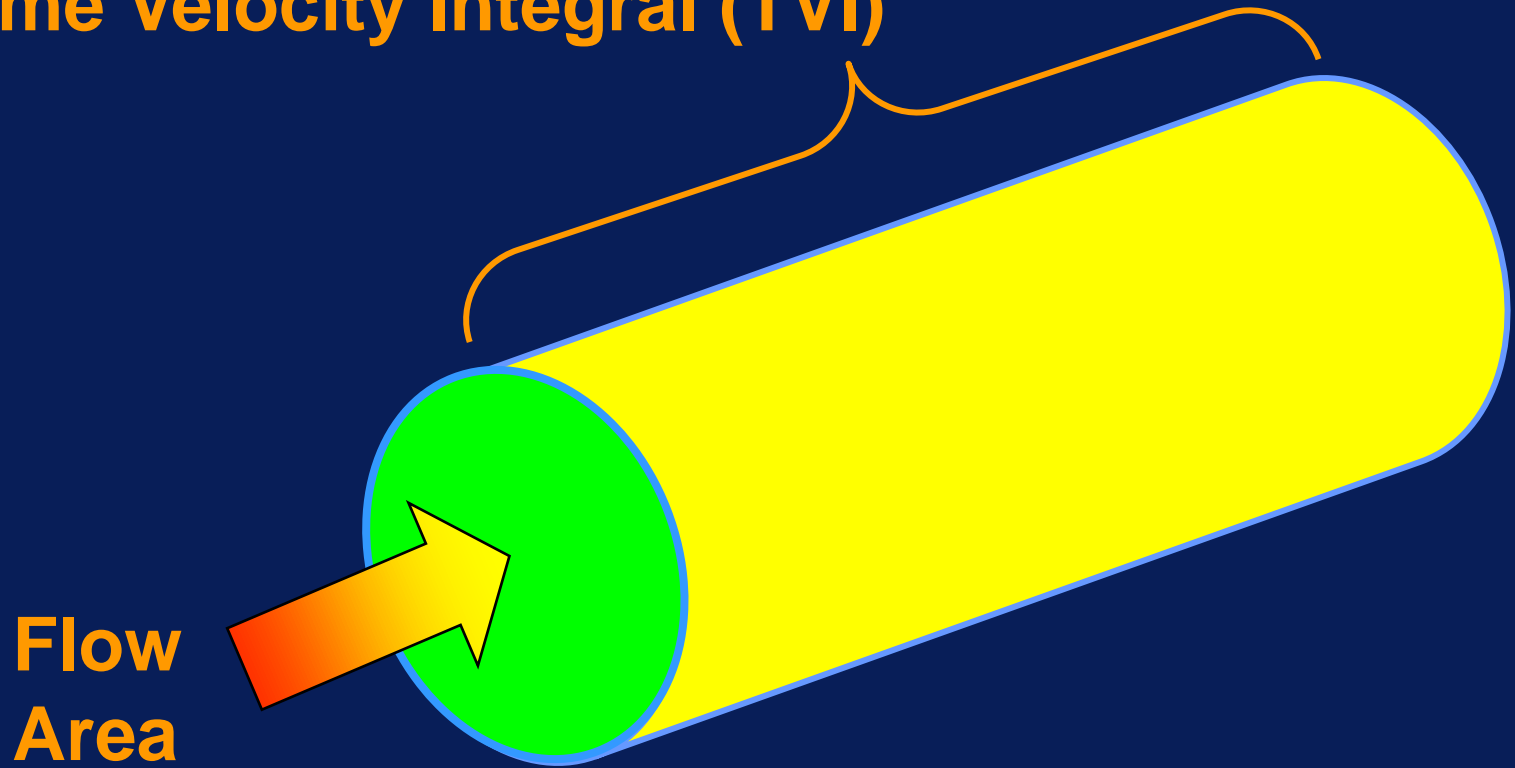
Severity	Jet/LVOT Area (%)	Jet/LVOT Height (%)
Grade I	<5	<25
Grade II	5-24	25-46
Grade III	25-59	47-60
Grade IV	≥60	≥60

Quantitation of Aortic Regurgitation

Continuity Method
Pulsed-Wave Doppler

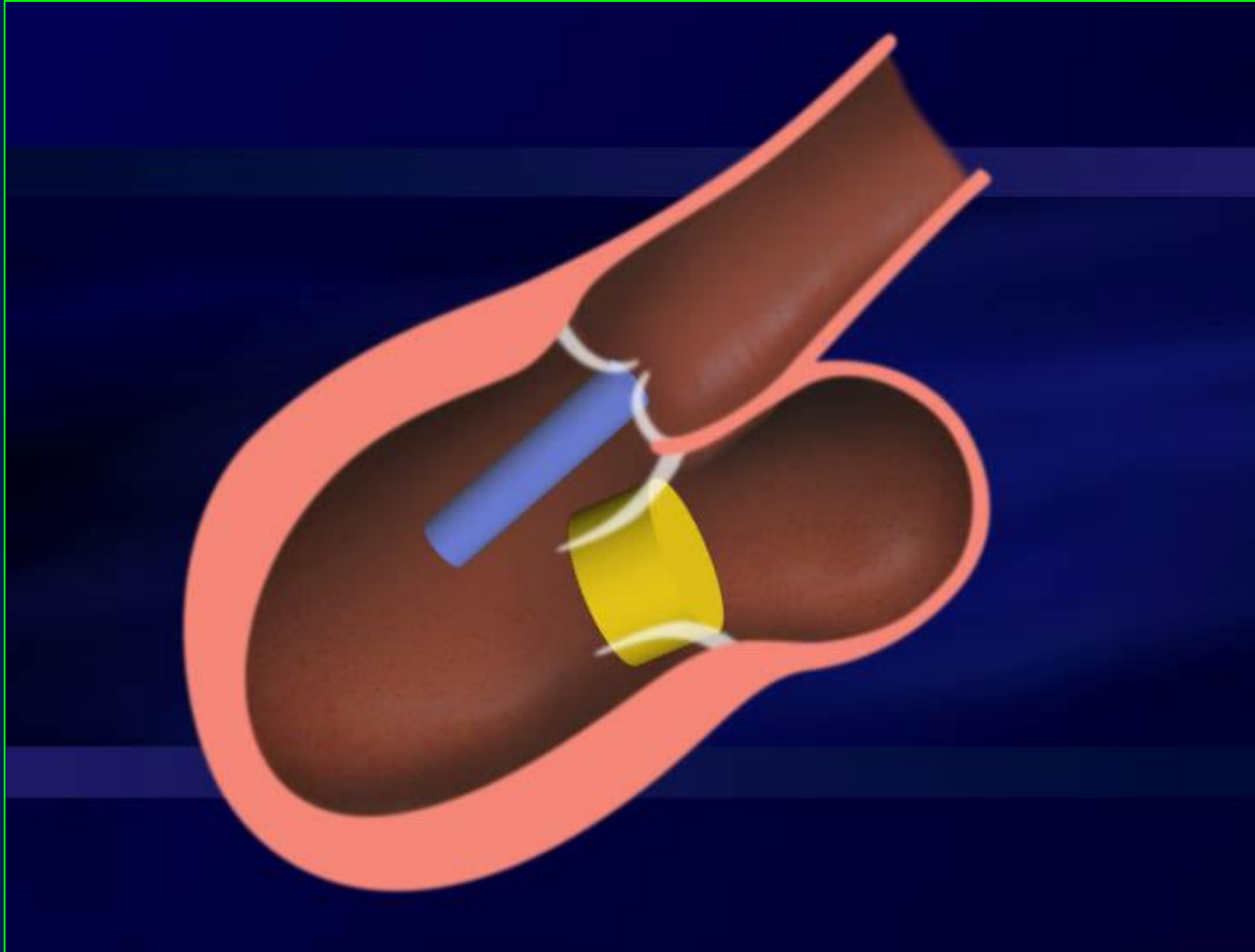
Doppler Quantitation: Volume

Time Velocity Integral (TVI)

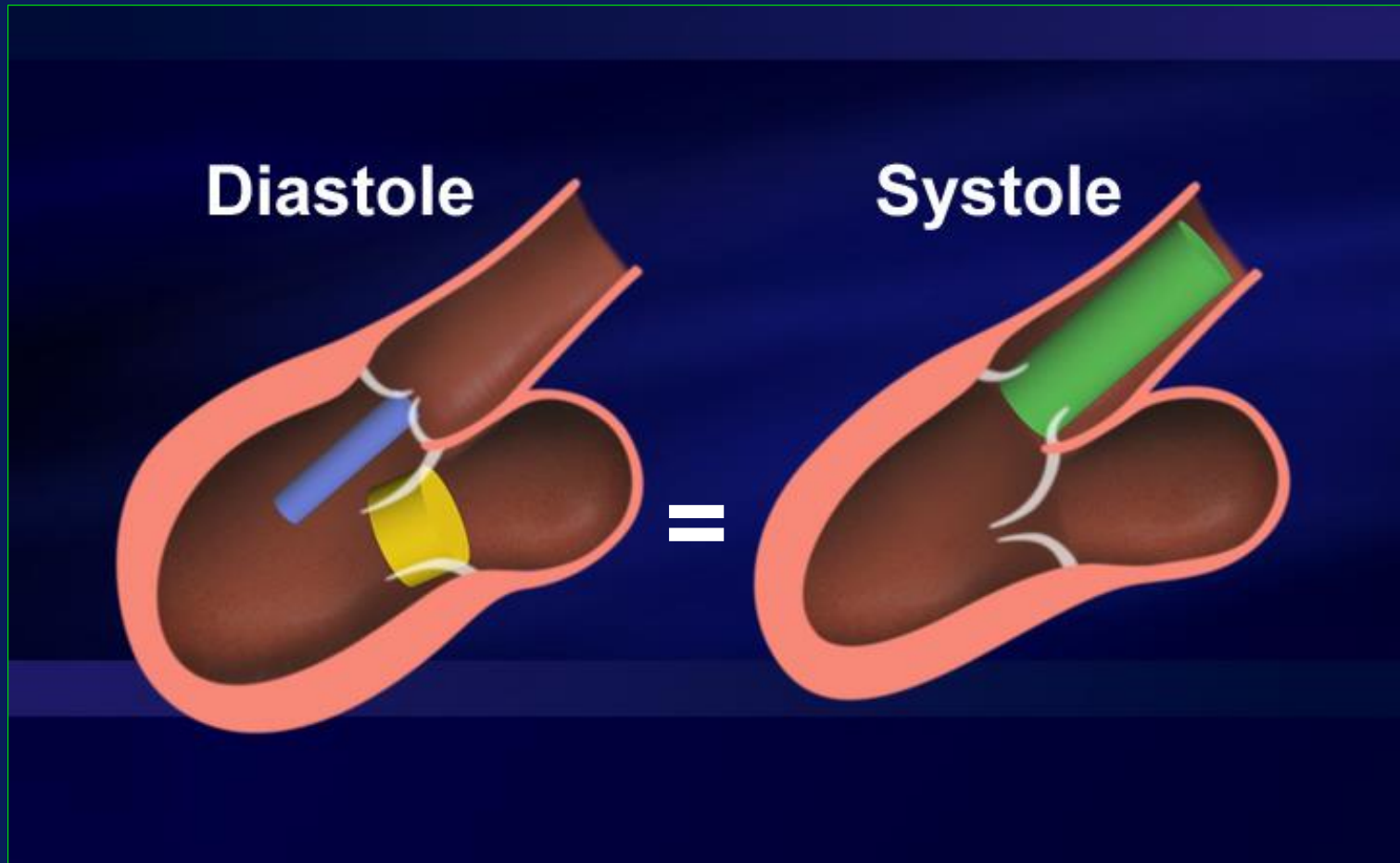


$$\text{Stroke Volume} = \pi(D/2)^2 \times \text{TVI} = 0.785 D^2 \times \text{TVI}$$

Doppler Quantitation of AR Continuity Method

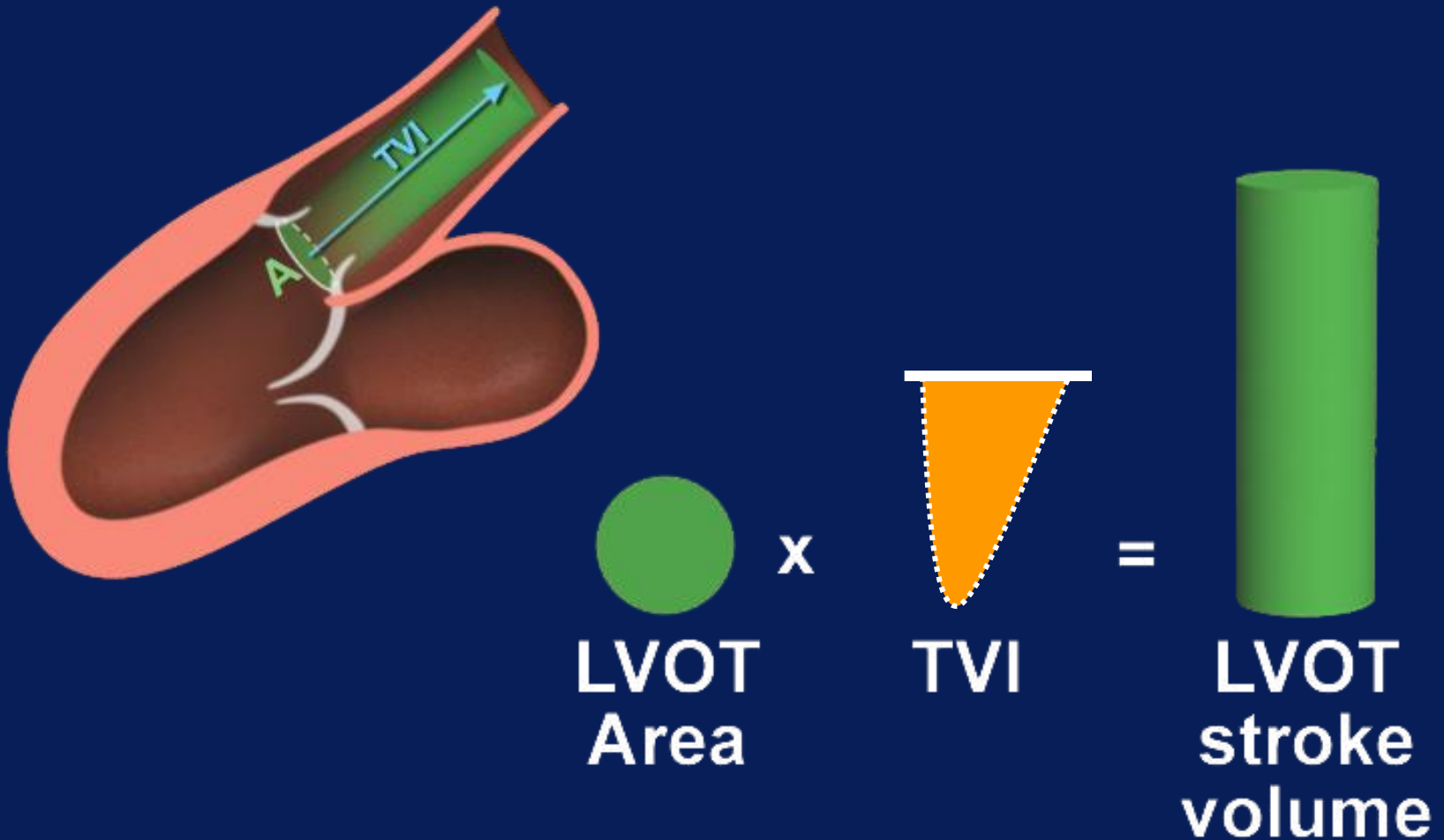


Doppler Quantitation of AR Continuity Method



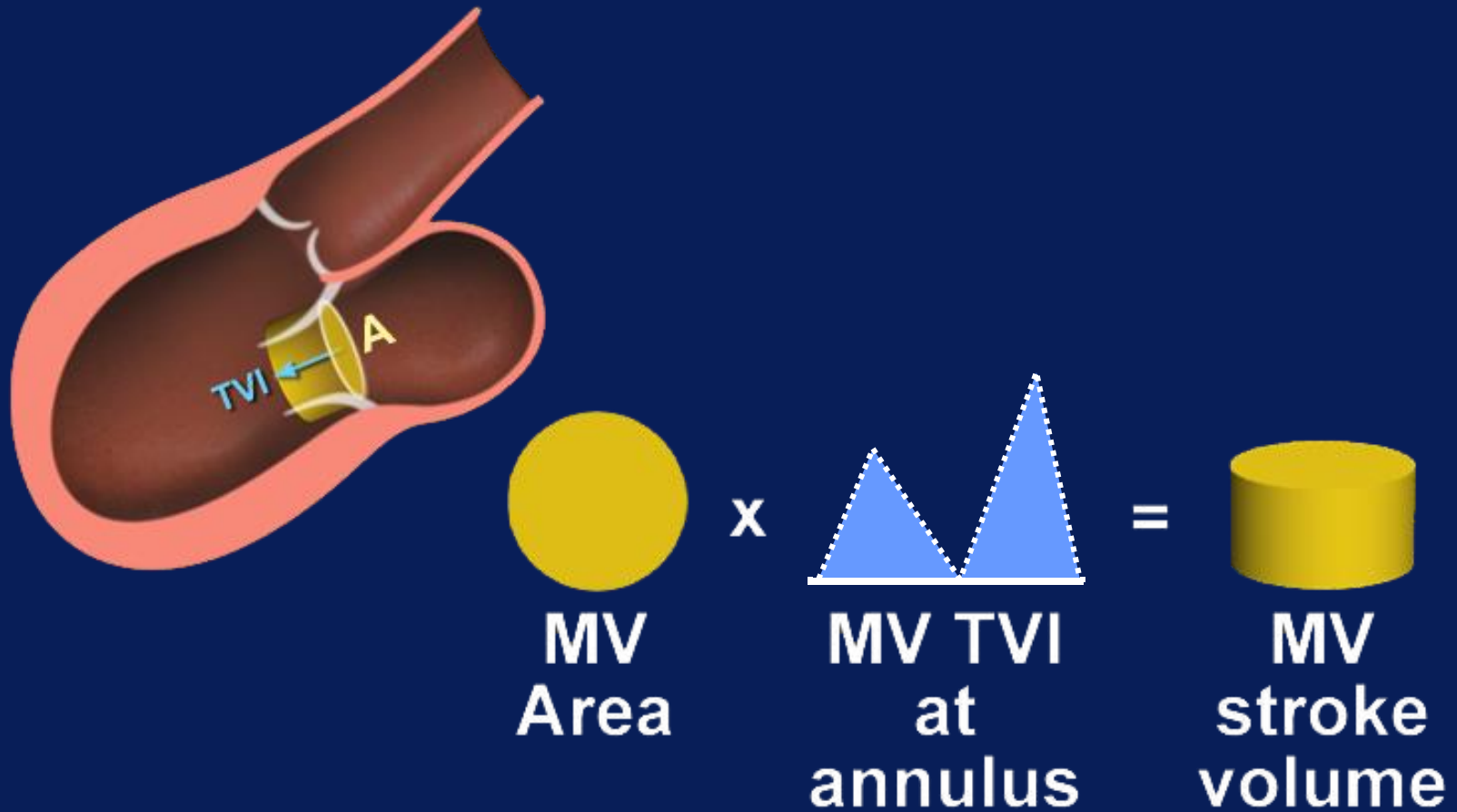
Quantitation of AR by the Continuity Method

Step 1: Calculate LVOT Stroke Volume



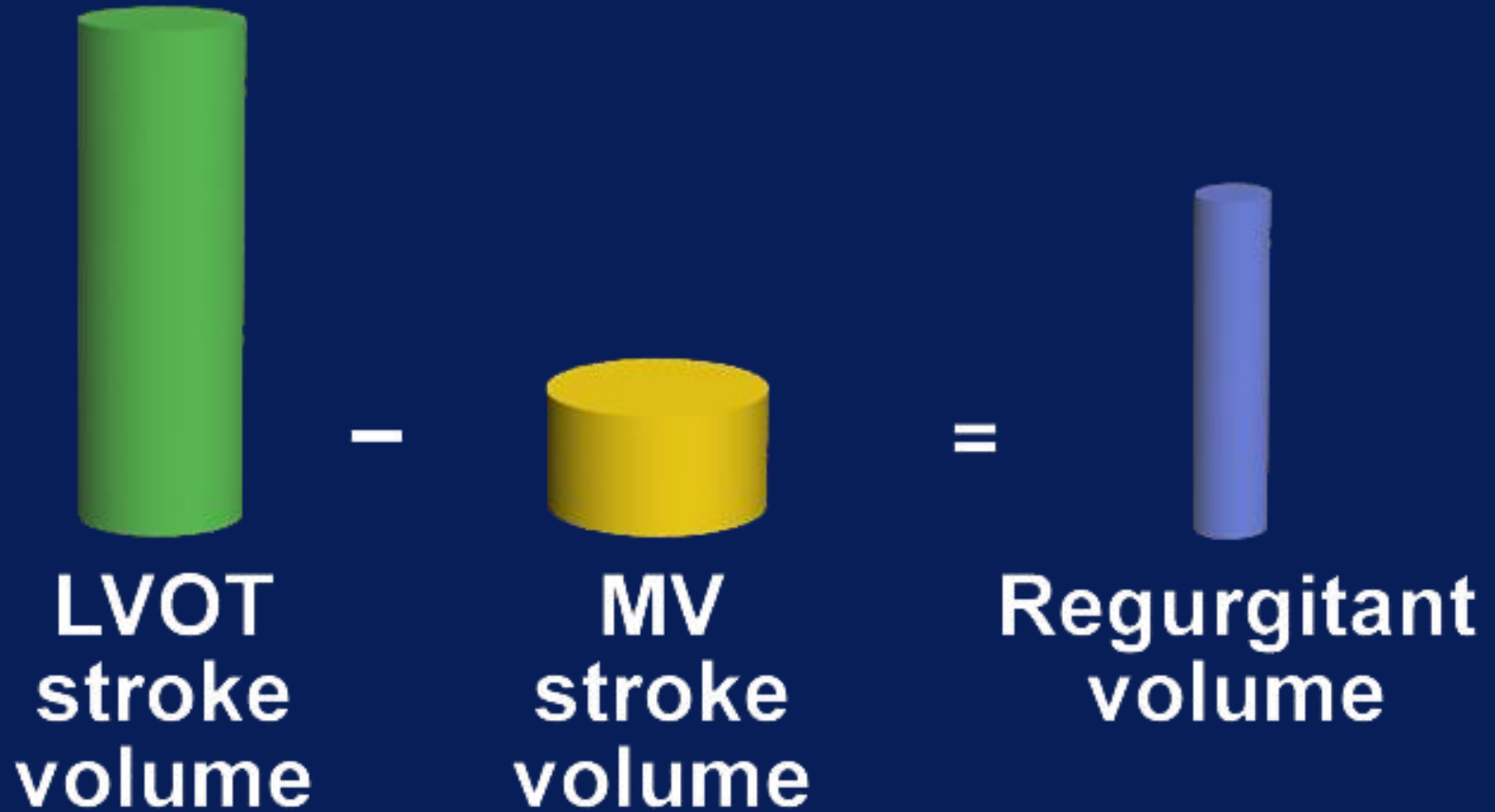
Quantitation of AR by the Continuity Method

Step 2: Calculate MV Stroke Volume



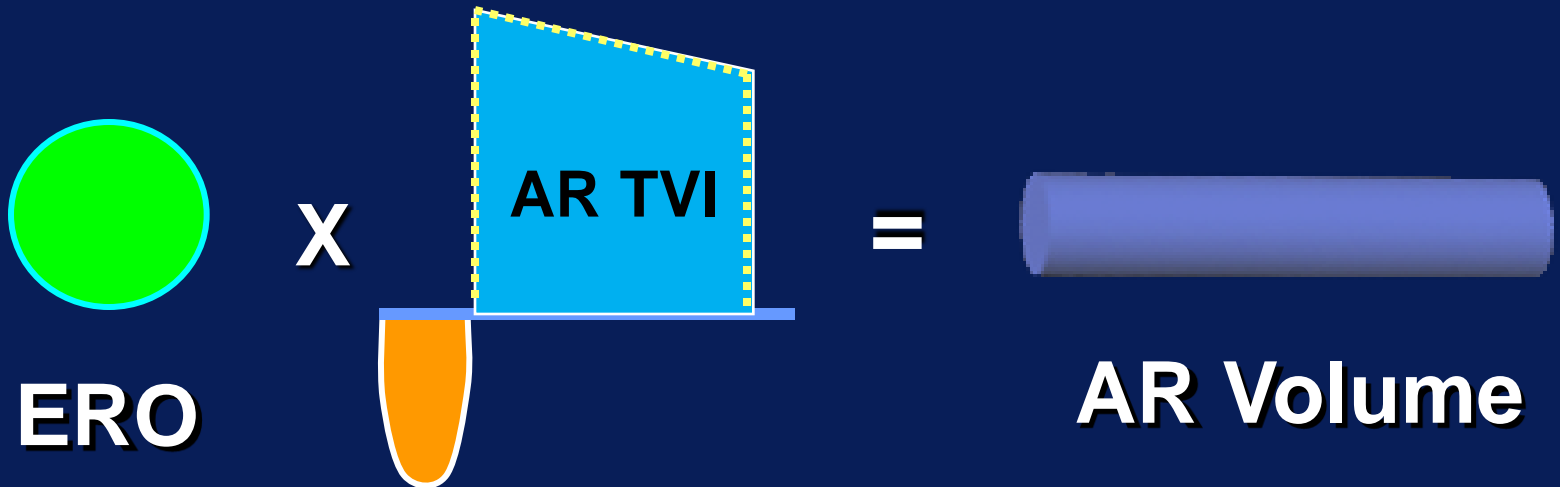
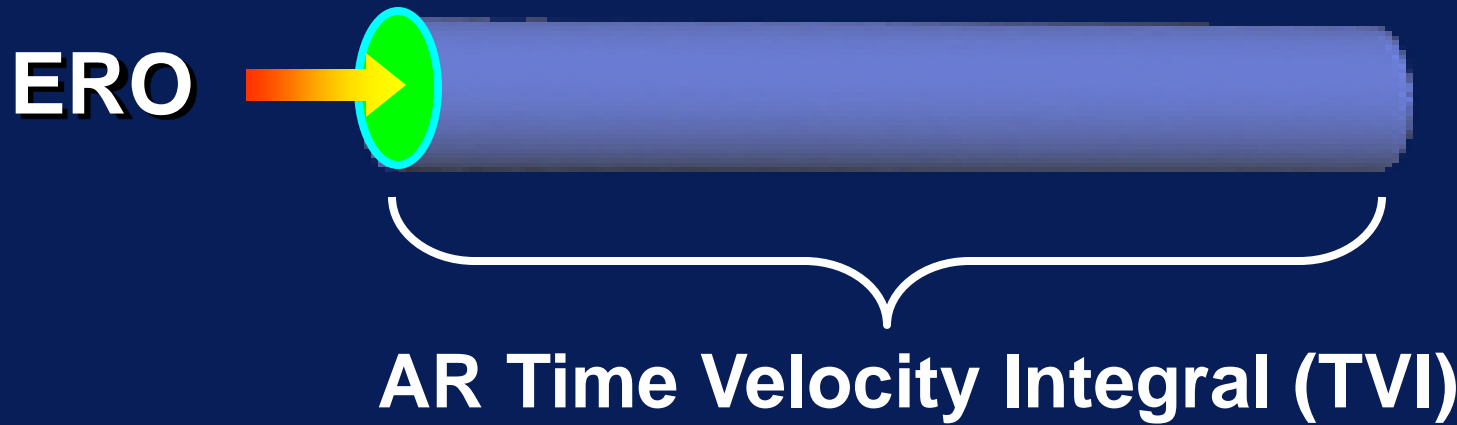
Quantitation of AR by the Continuity Method

Step 3: Calculate AR Volume



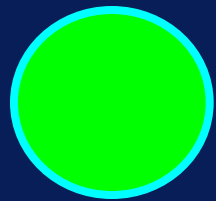
Doppler Quantitation of AR

Continuity Method



Quantitation of AR by the Continuity Method

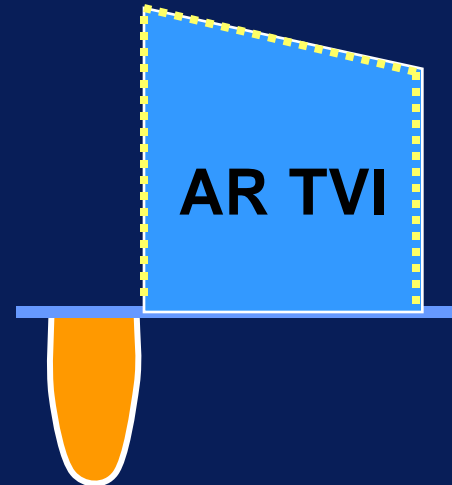
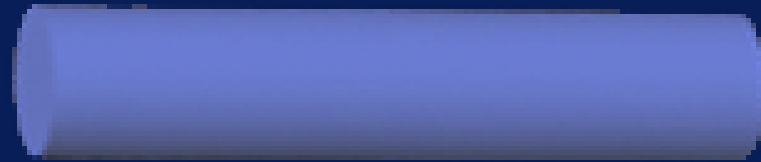
Step 4: Calculate ERO



ERO

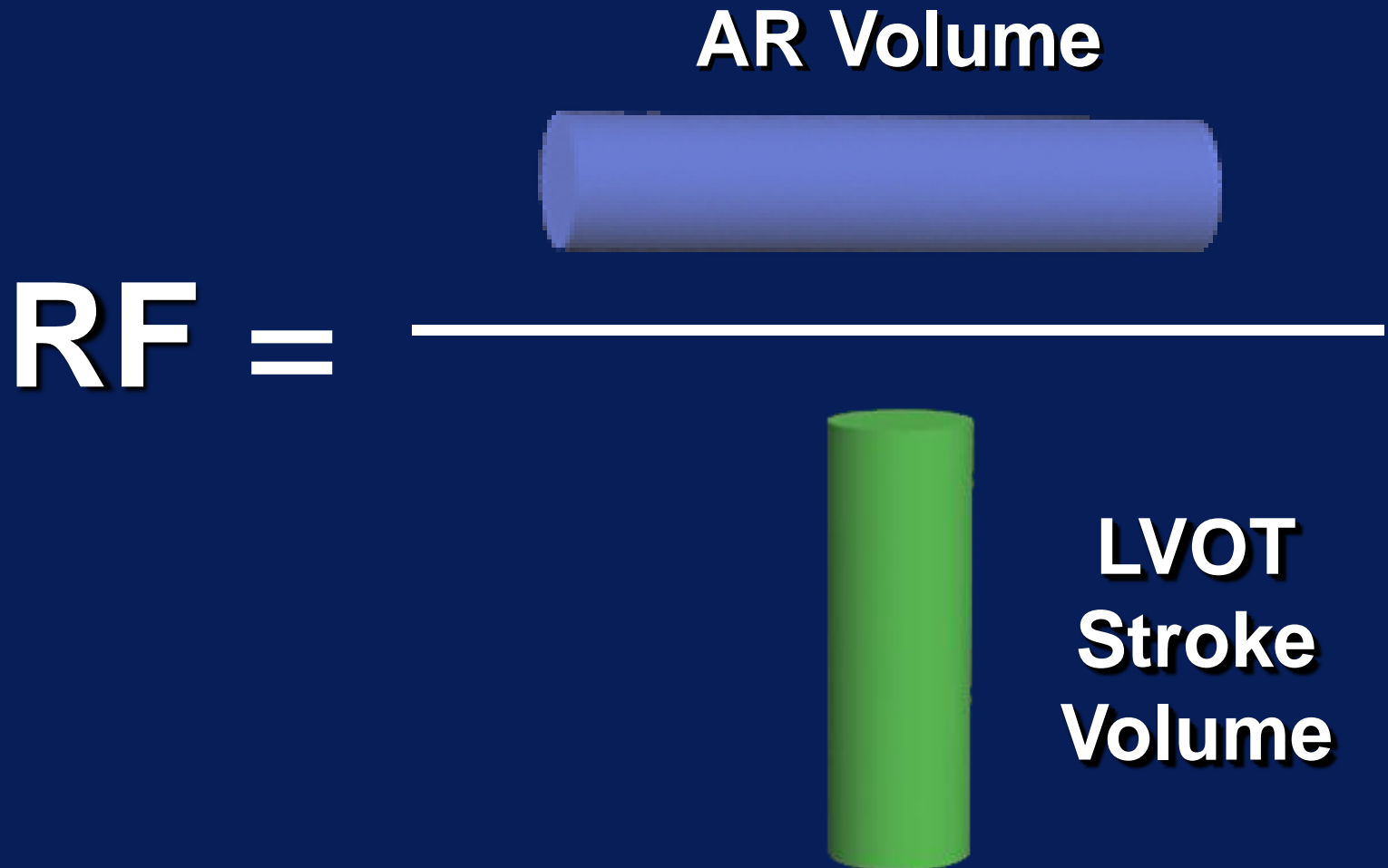
=

AR Volume



Quantitation of AR by the Continuity Method

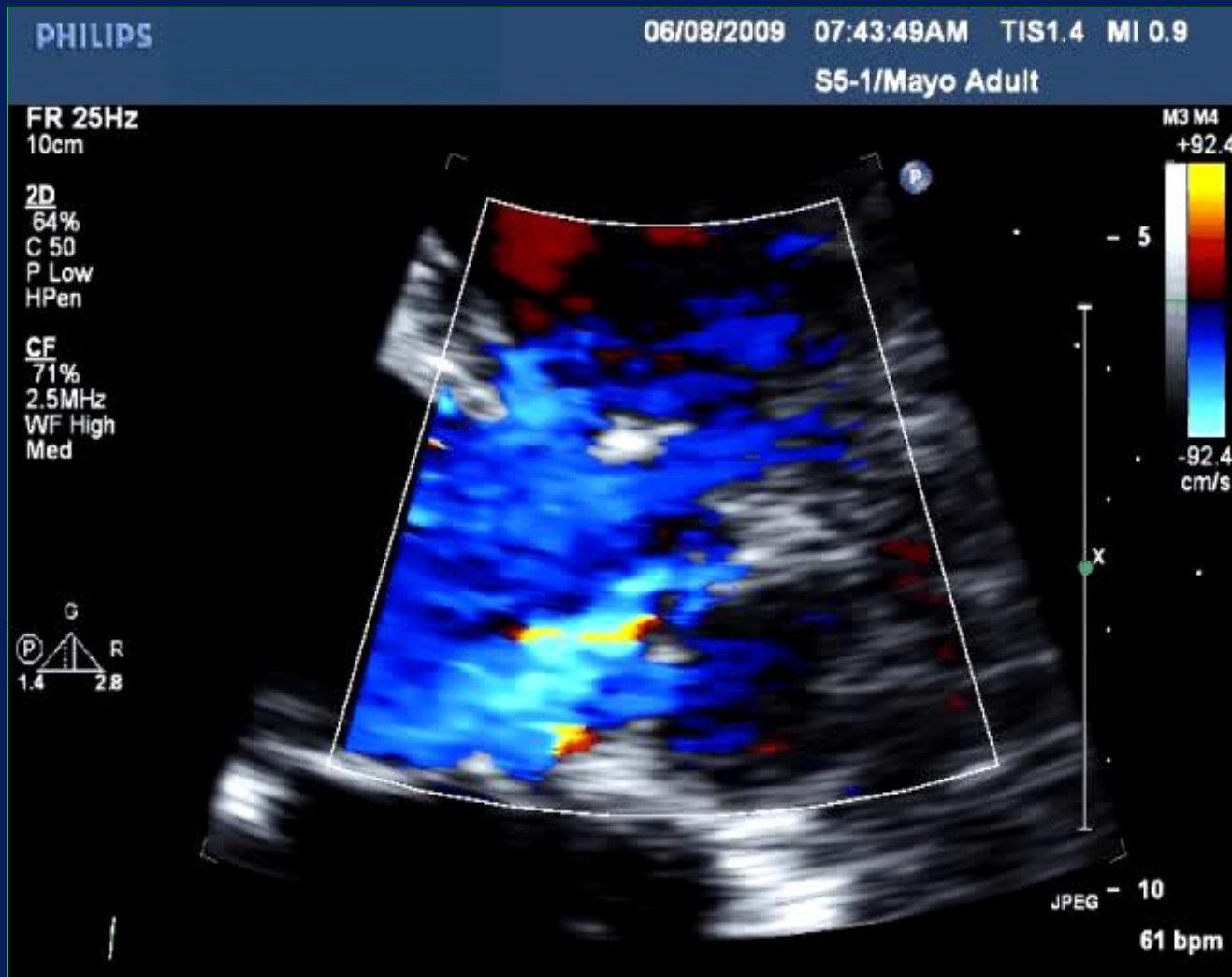
Step 5 : Calculate Regurgitant Fraction (RF)

$$RF = \frac{\text{AR Volume}}{\text{LVOT Stroke Volume}}$$


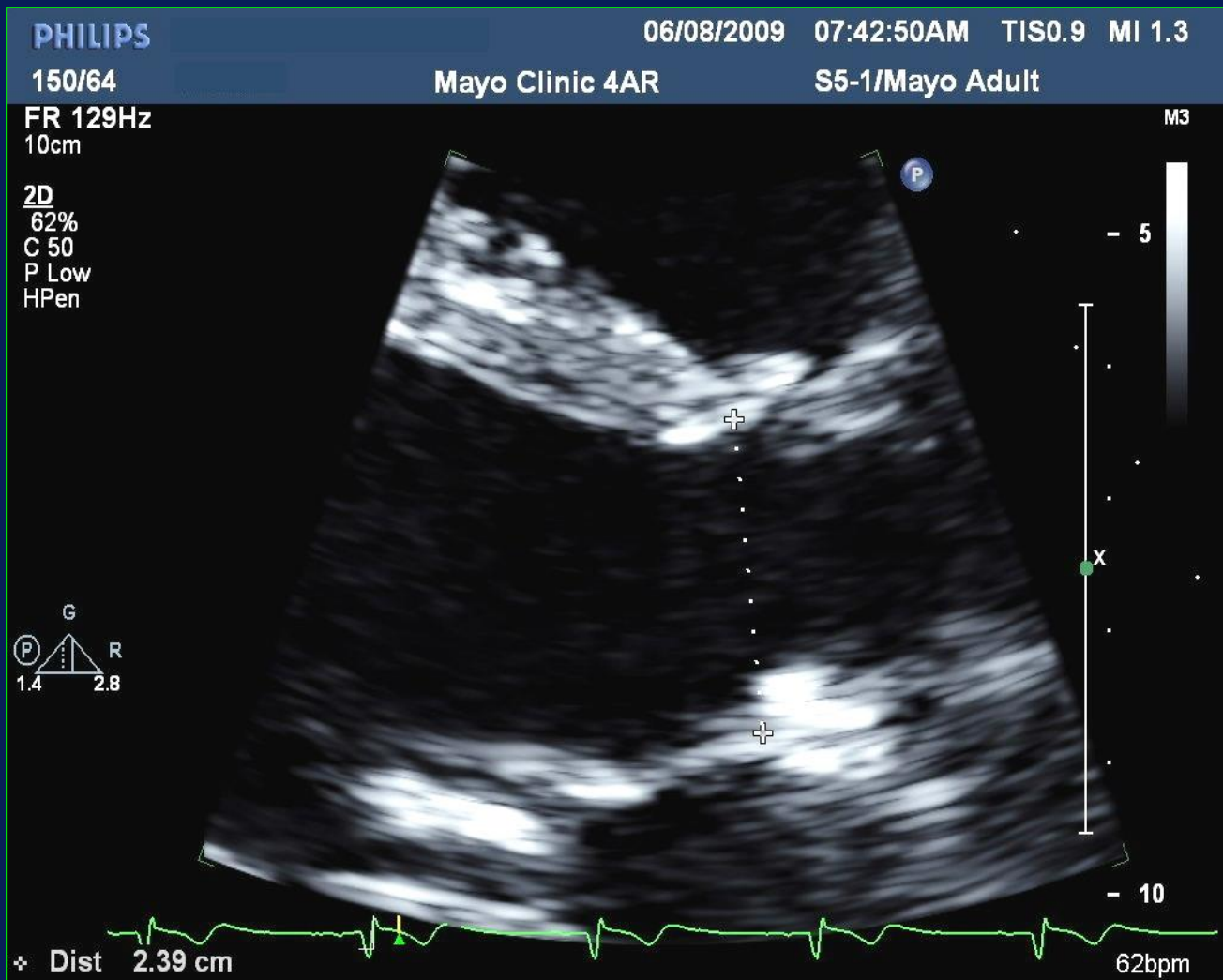
61 y/o Female: Dyspnea and heart failure



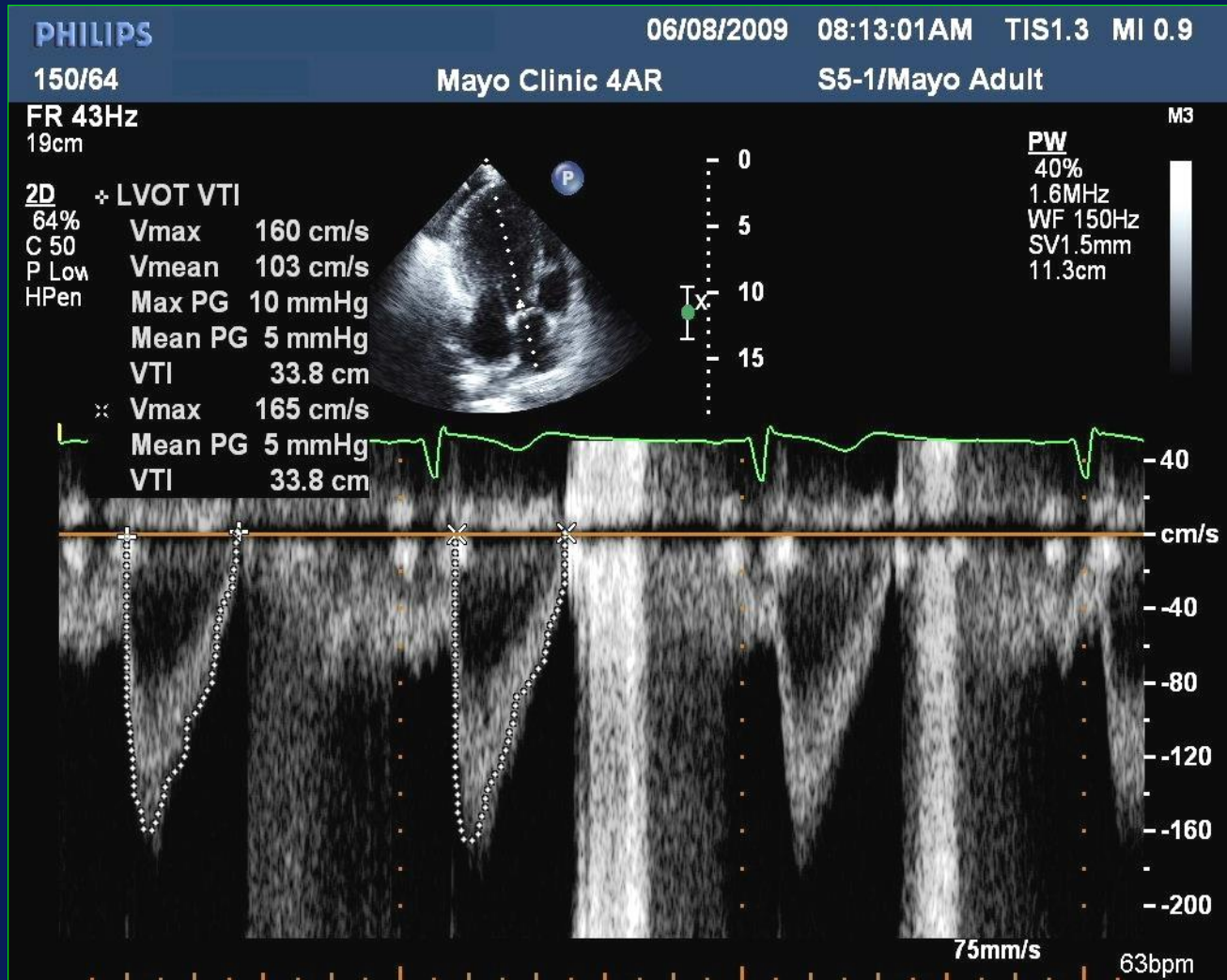
61 y/o Female: Dyspnea and heart failure



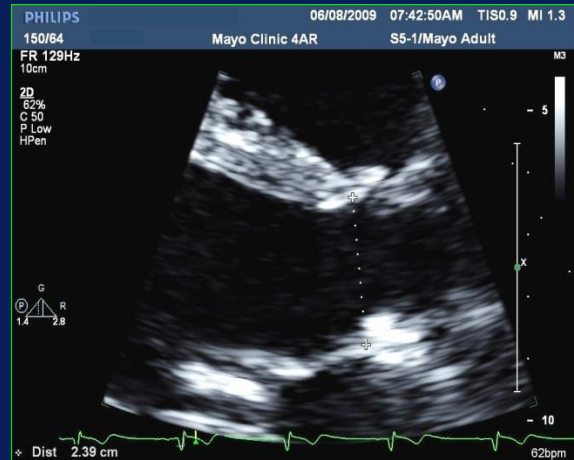
LVOT Diameter = 2.4 cm



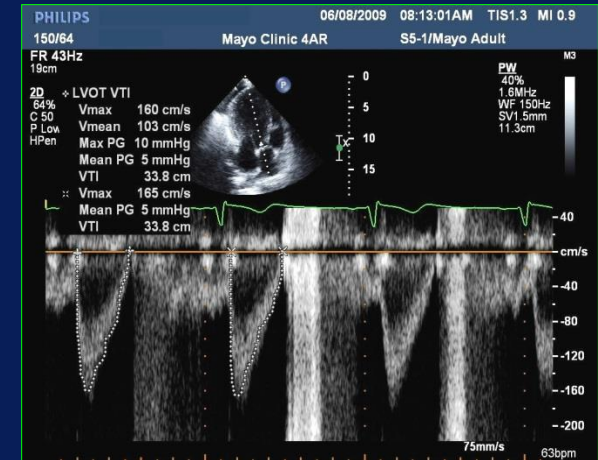
LVOT TVI = 34 cm



Step 1: Calculate LVOT Stroke Volume



LVOT Diameter = 2.4 cm



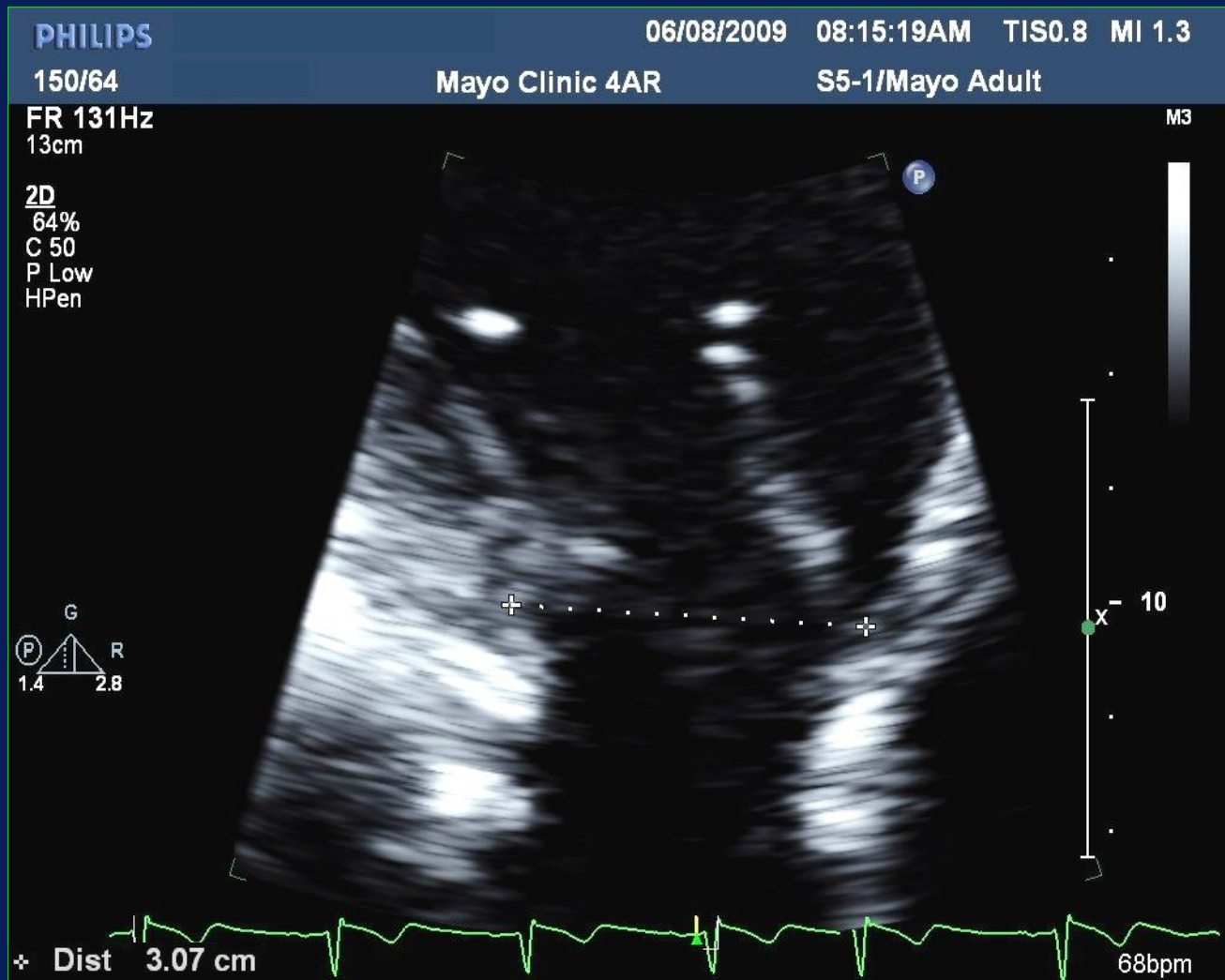
LVOT TVI = 34 cm

LVOT
Stroke Volume = $0.785 (2.4 \text{ cm})^2 \times 34 \text{ cm}$
Volume = 154 cm^3

Zoom MV

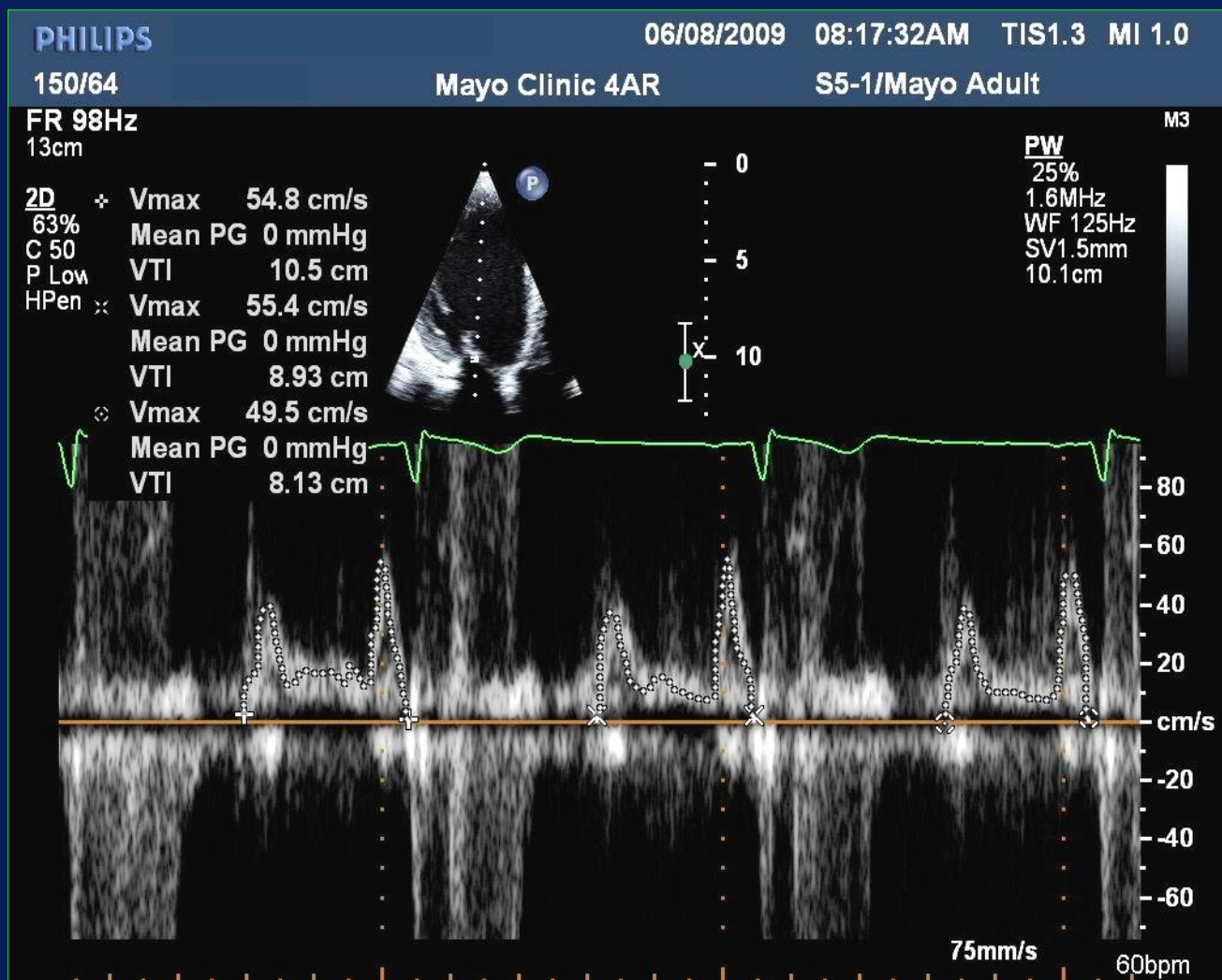


MV Annulus = 3.1 cm



MV Annulus TVI = 9 cm

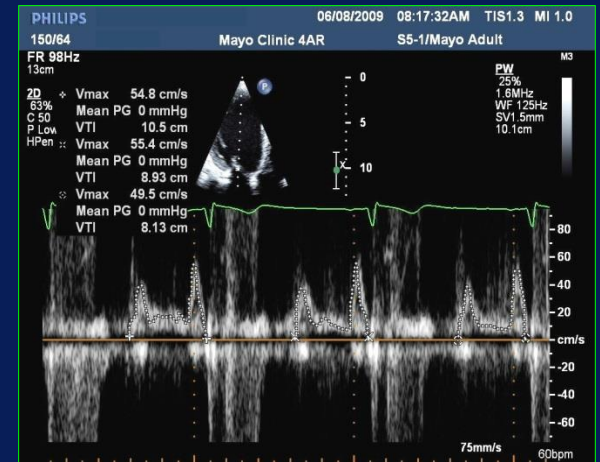
Sample volume at mitral annulus, not leaflet tips



Step 2: Calculate MV Stroke Volume



MV Annulus = 3.1 cm



MV Annulus TVI = 9 cm

MV
Stroke
Volume

$$= 0.785 (3.1 \text{ cm})^2 \times 9 \text{ cm}$$
$$= 68 \text{ cm}^3$$

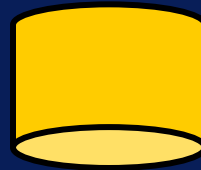
Step 3: Calculate AR Volume



LVOT Stroke
Volume

154 cm³

-



MV Stroke
Volume

68 cm³


=



AR
Volume

86 cm³

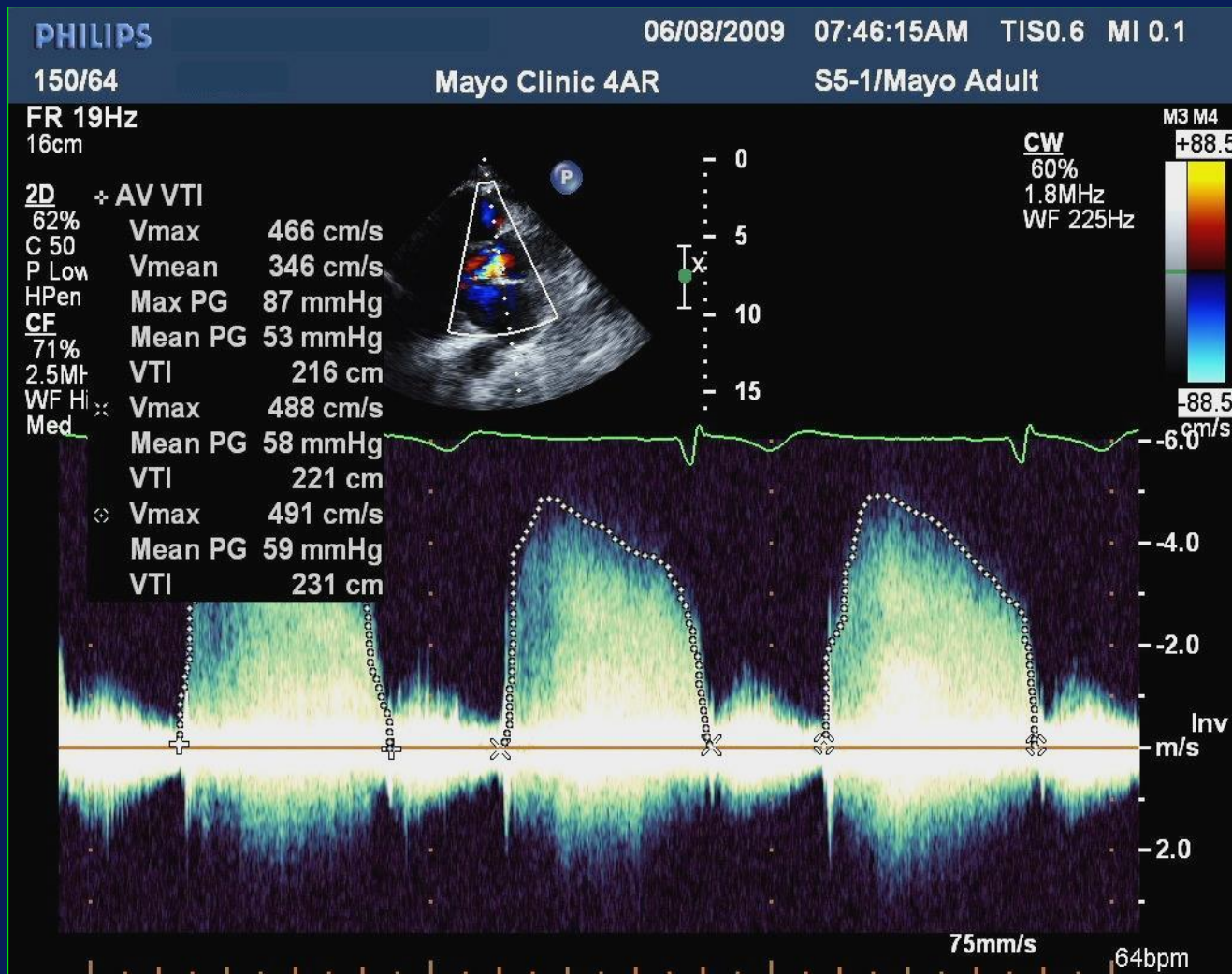
Step 4: Calculate Regurgitant Fraction (RF)



Aortic RF = $\frac{\text{AR Volume}}{\text{LVOT Stroke Volume}} = \frac{86 \text{ cm}^3}{154 \text{ cm}^3} = 56\%$

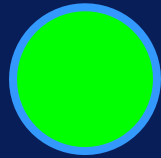
The diagram illustrates the calculation of Aortic Regurgitant Fraction (RF). It features two cylinders: a blue cylinder at the top representing the Aortic Regurgitant (AR) Volume, and a green cylinder at the bottom representing the Left Ventricular Outflow Tract (LVOT) Stroke Volume. The blue cylinder is shorter than the green cylinder, visually representing that the regurgitant volume is a fraction of the stroke volume.

AR Peak Velocity 490 cm/sec; TVI = 223 cm

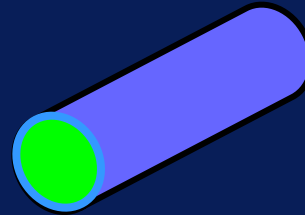


Step 5: Calculate AR ERO

Effective
Regurgitant
Orifice



=



AR
Volume
(86 cm³)



AR TVI
(223 cm)

$$\text{ERO} = \frac{86 \text{ cm}^3}{223 \text{ cm}} = 0.39 \text{ cm}^2$$

Quantitation of Aortic Regurgitation

Continuity Method: PW Doppler

	Mild	Moderate	Severe	
AR Volume (cm ³ /beat)	<30	30 - 44	45 - 59	≥ 60
Regurgitant Fraction (%)	<30	30 - 39	40 - 49	≥ 50
ERO (cm ²)	<0.10	0.10-0.19	0.20-0.29	≥ 0.30

Zoghbi WA, et al. J Am Soc Echocardiogr 2003; 16: 777

Nishimura RA, CM Otto, et al. JACC 2014; 63: e57

Quantitation of Valvular Regurgitation

Continuity Method: PW Doppler

Potential Pitfalls

- **Incorrect Doppler alignment to flow ($\theta > 20^\circ$)**
- **Incorrect sample volume placement
(Place at annulus, not leaflet tips)**
- **Incorrect annular measurement: (error)²,
Mitral annular calcification (MAC)**
- **Failure to trace modal velocity (especially MV)**

Quantitation of Valvular Regurgitation

Continuity Method: PW Doppler

Potential Pitfalls

- Geometric assumptions of circular annulus
(LVOT - good, MV - fair, TV - poor)
- Mitral regurgitation > mild
- Arrhythmia; inadequate data averaged
(use at least 5-8 cycles for Afib)

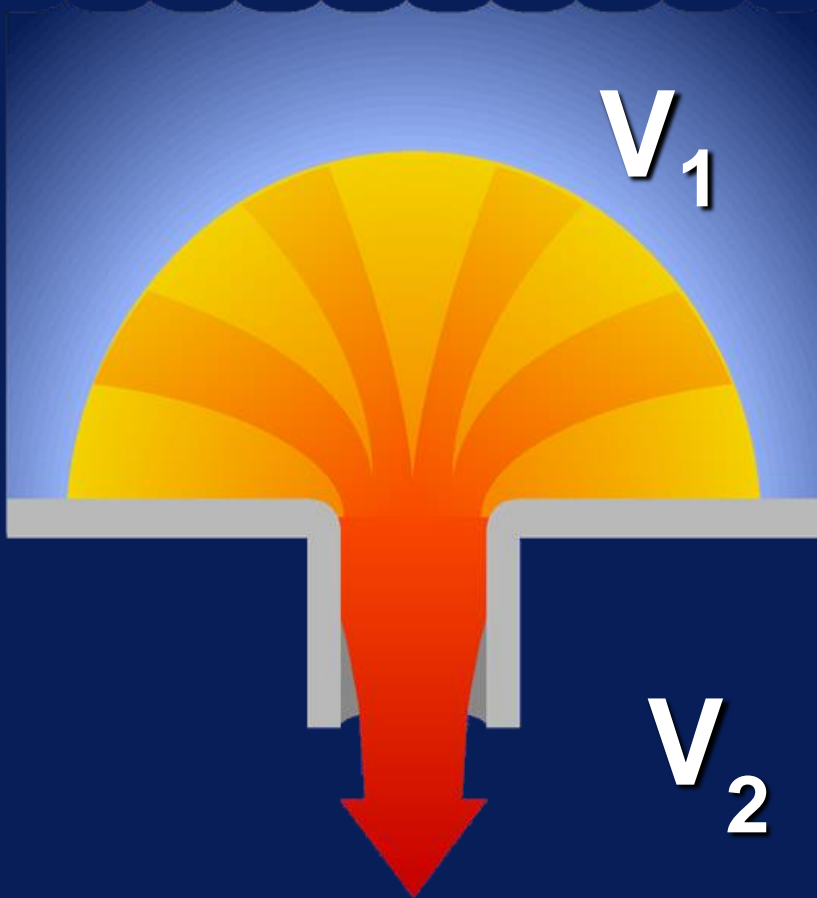
Quantitation of Aortic Regurgitation

PISA Method

Color and CW Doppler

Conservation of Mass/Volume

Flow Convergence



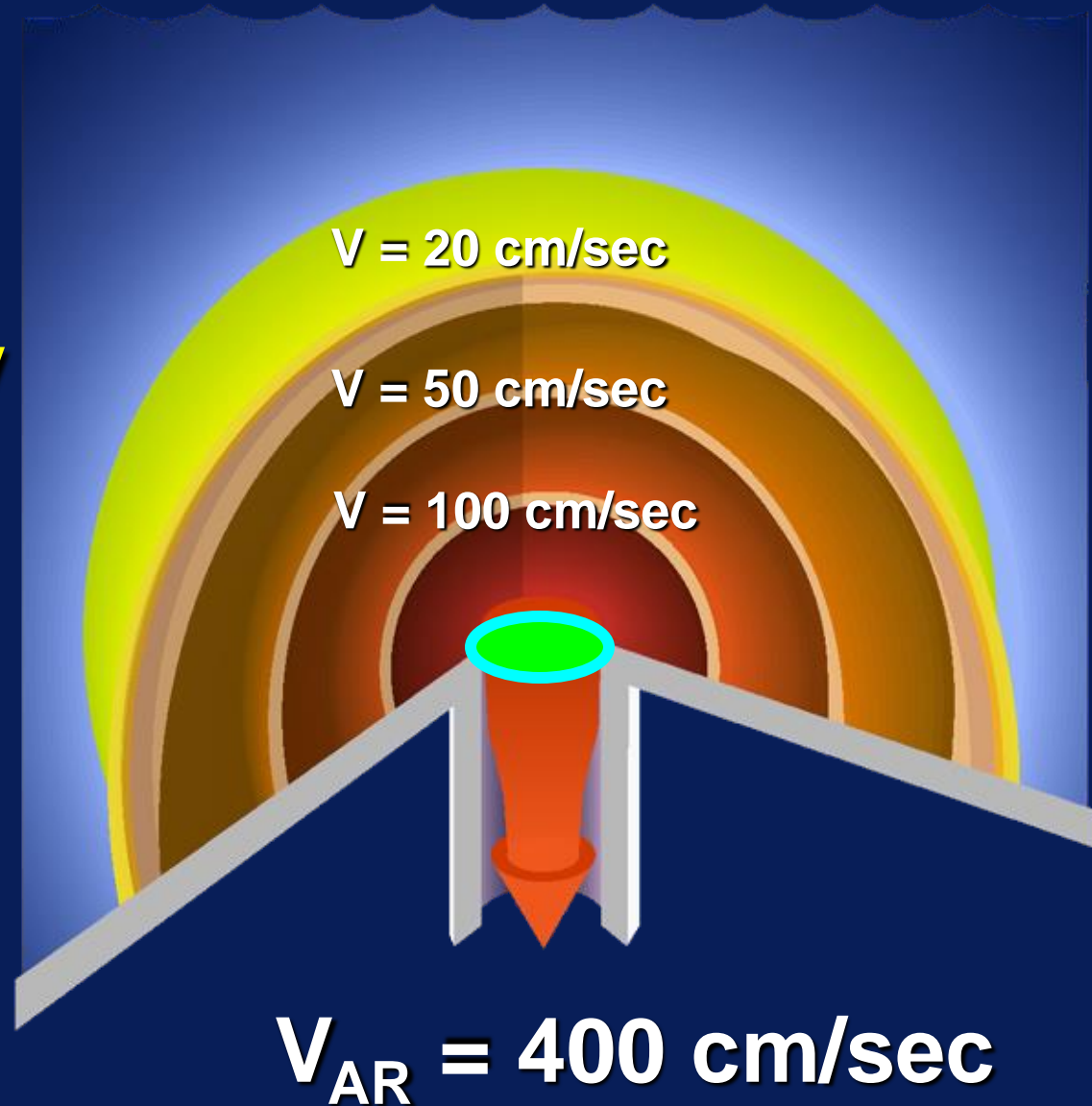
Flow From Ao

=

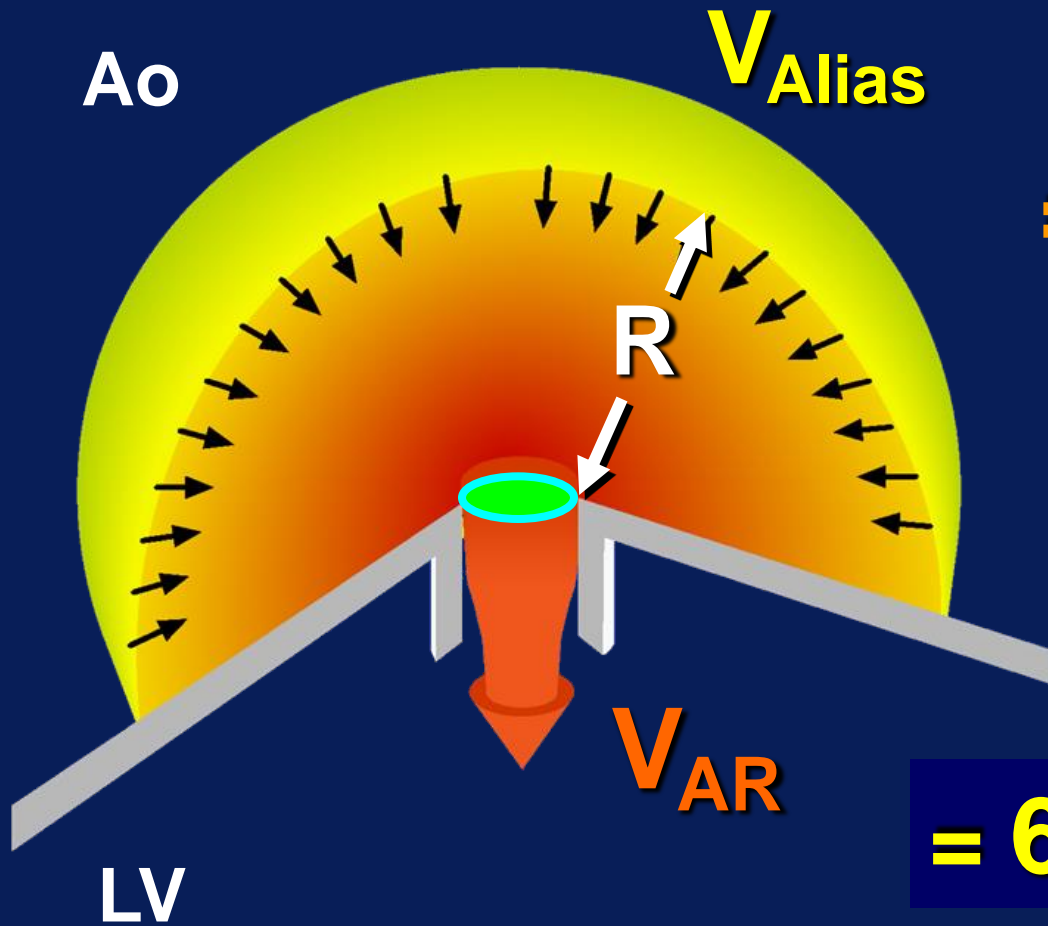
Flow Into LV

Flow Convergence

Proximal
Isovelocity
Surface
Area



Quantitation of MR: PISA Method



Flow From Ao

= Flow Into LV

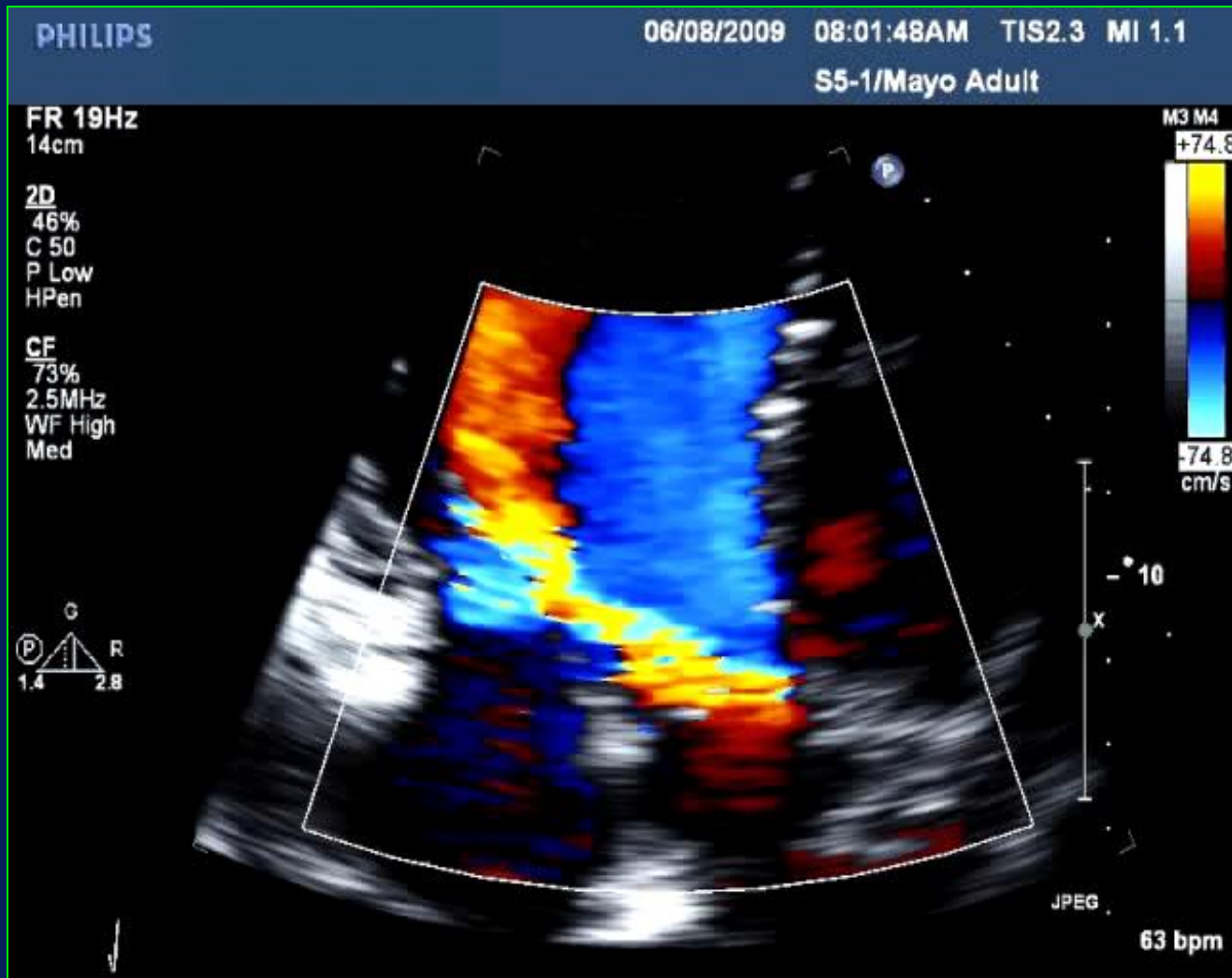
= Area_{PISA} x V_{Alias}

= $2\pi \times R^2 \times V_{Alias}$

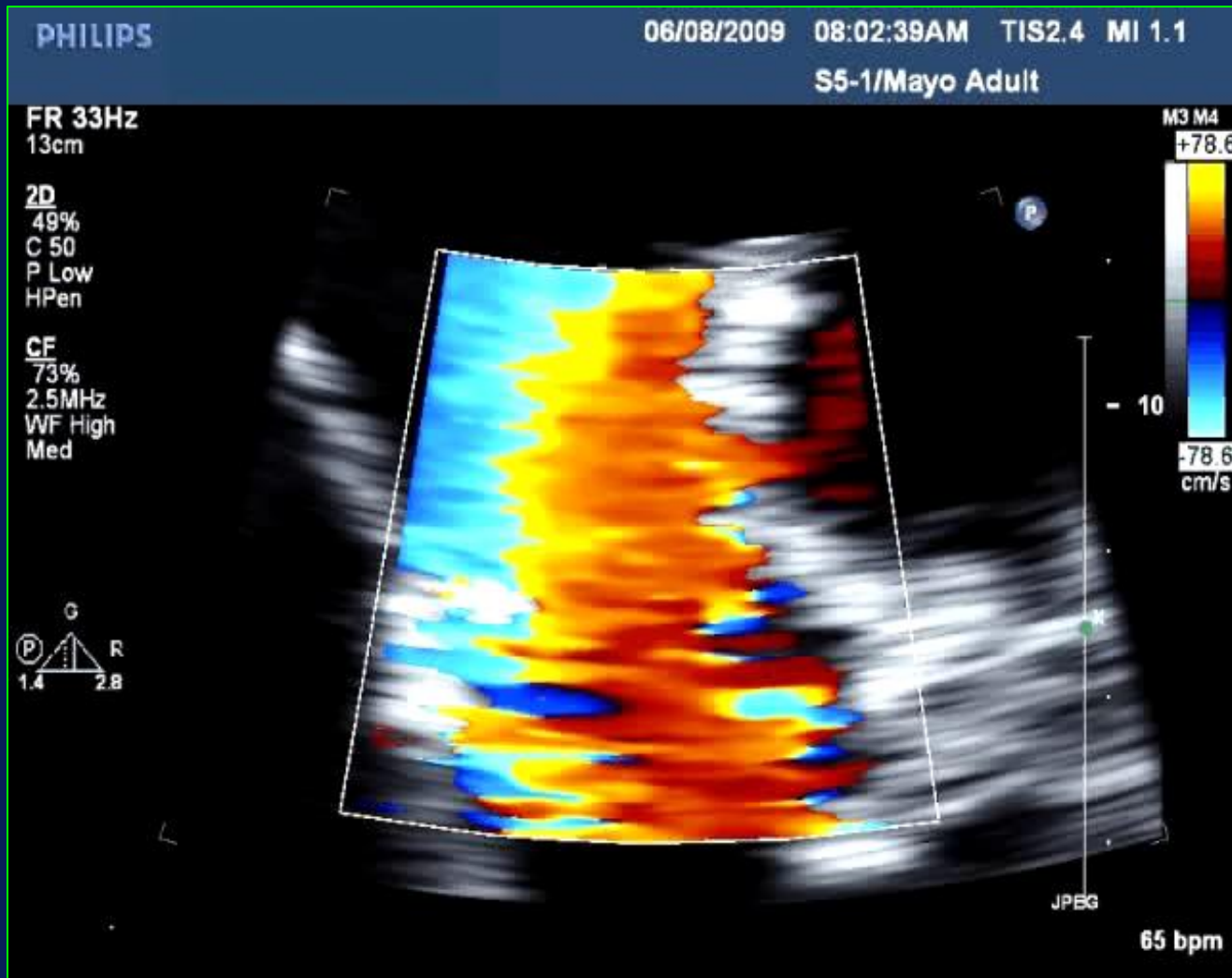
= $6.28 \times R^2 \times V_{Alias}$

 = Effective Regurgitant Orifice (**ERO**)

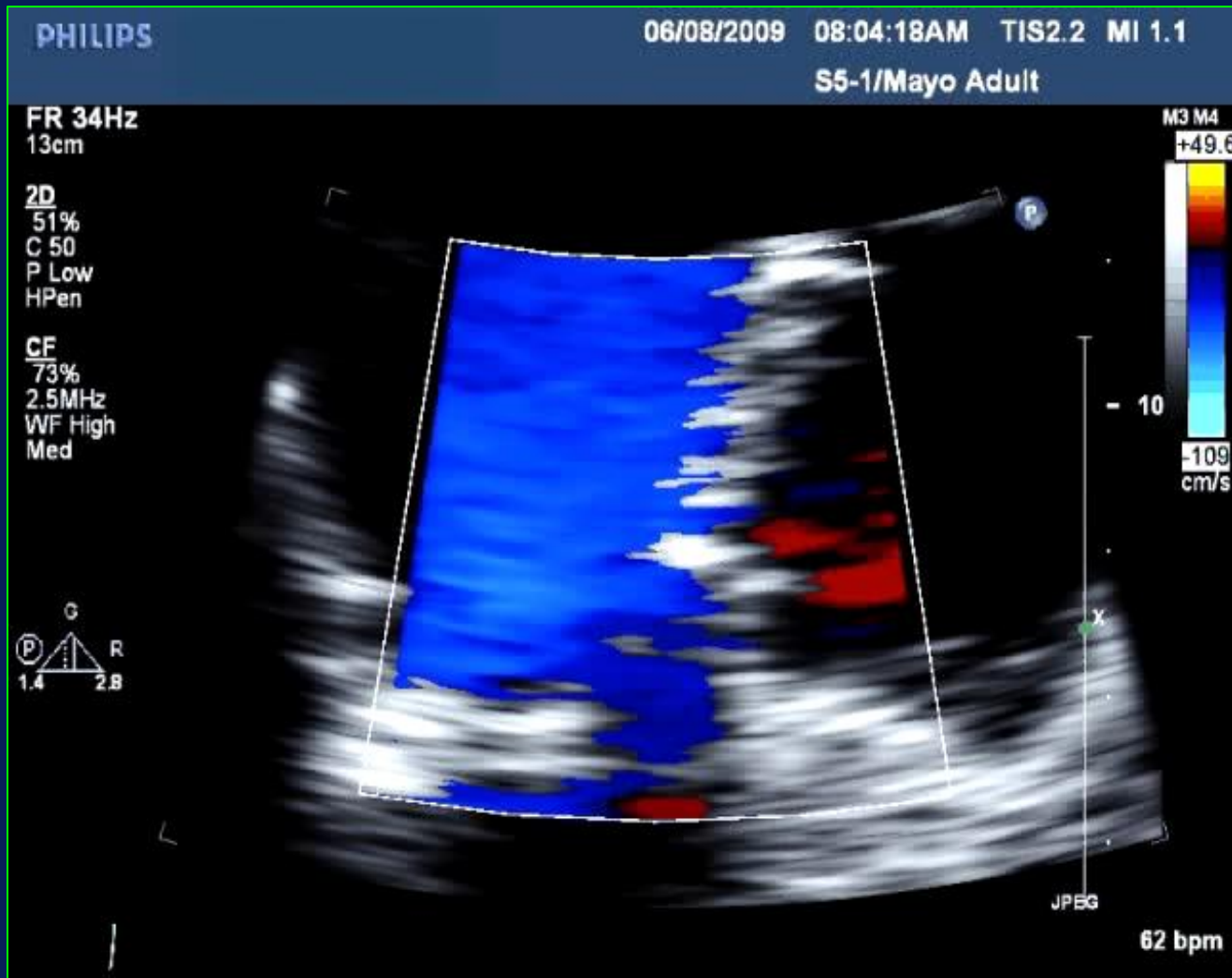
61 y/o Female: Dyspnea and heart failure



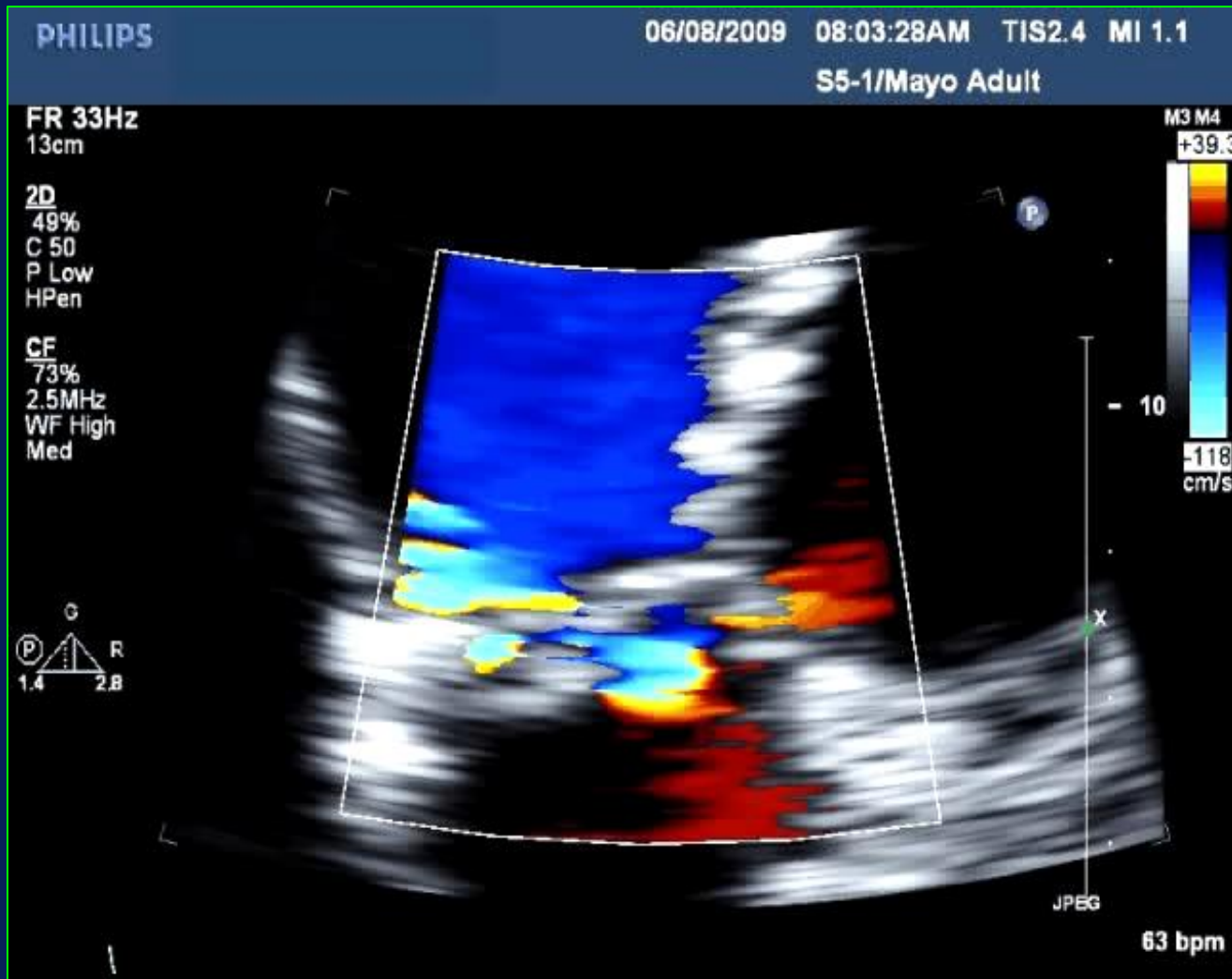
No color baseline shift



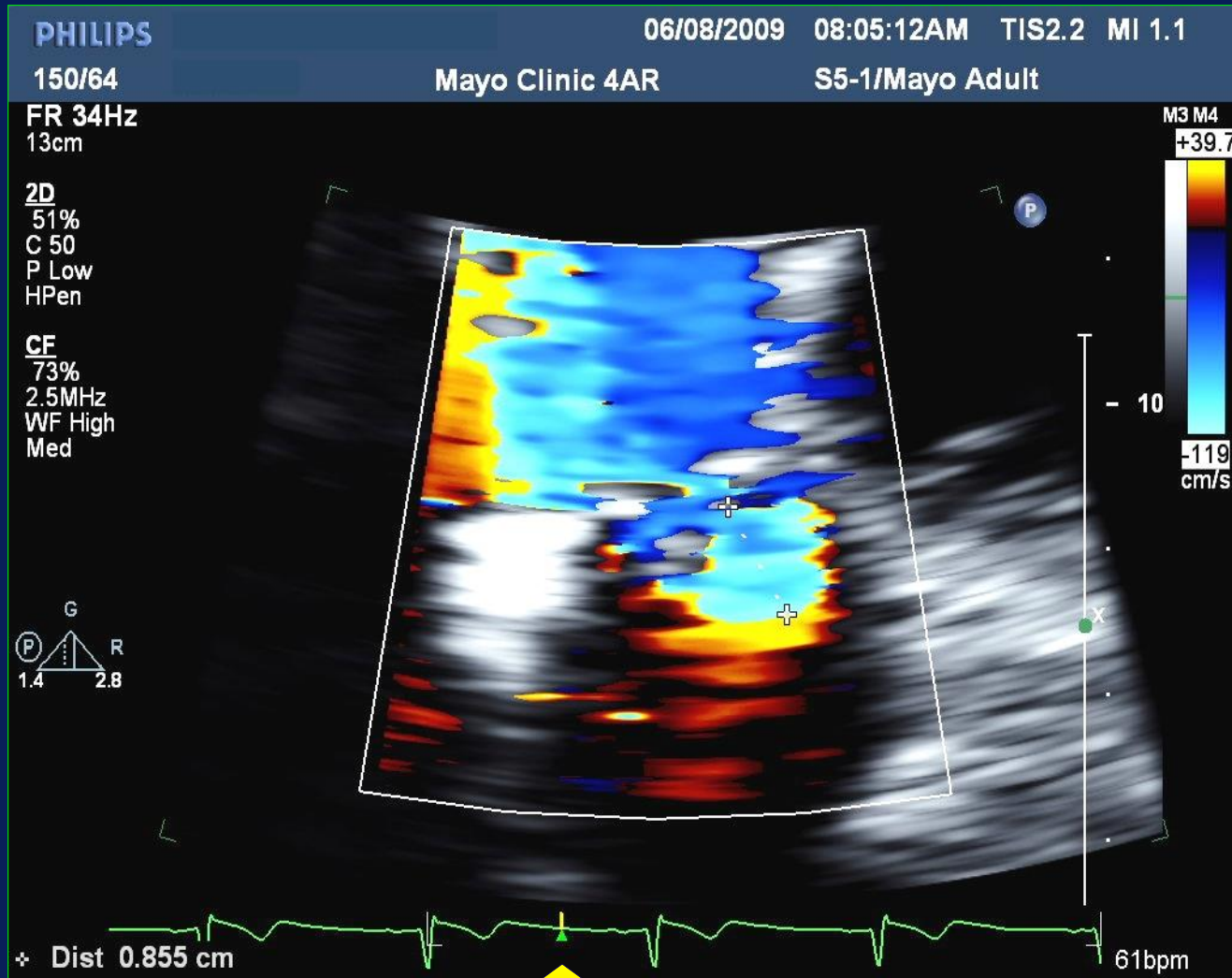
Aliasing velocity 50 cm/s



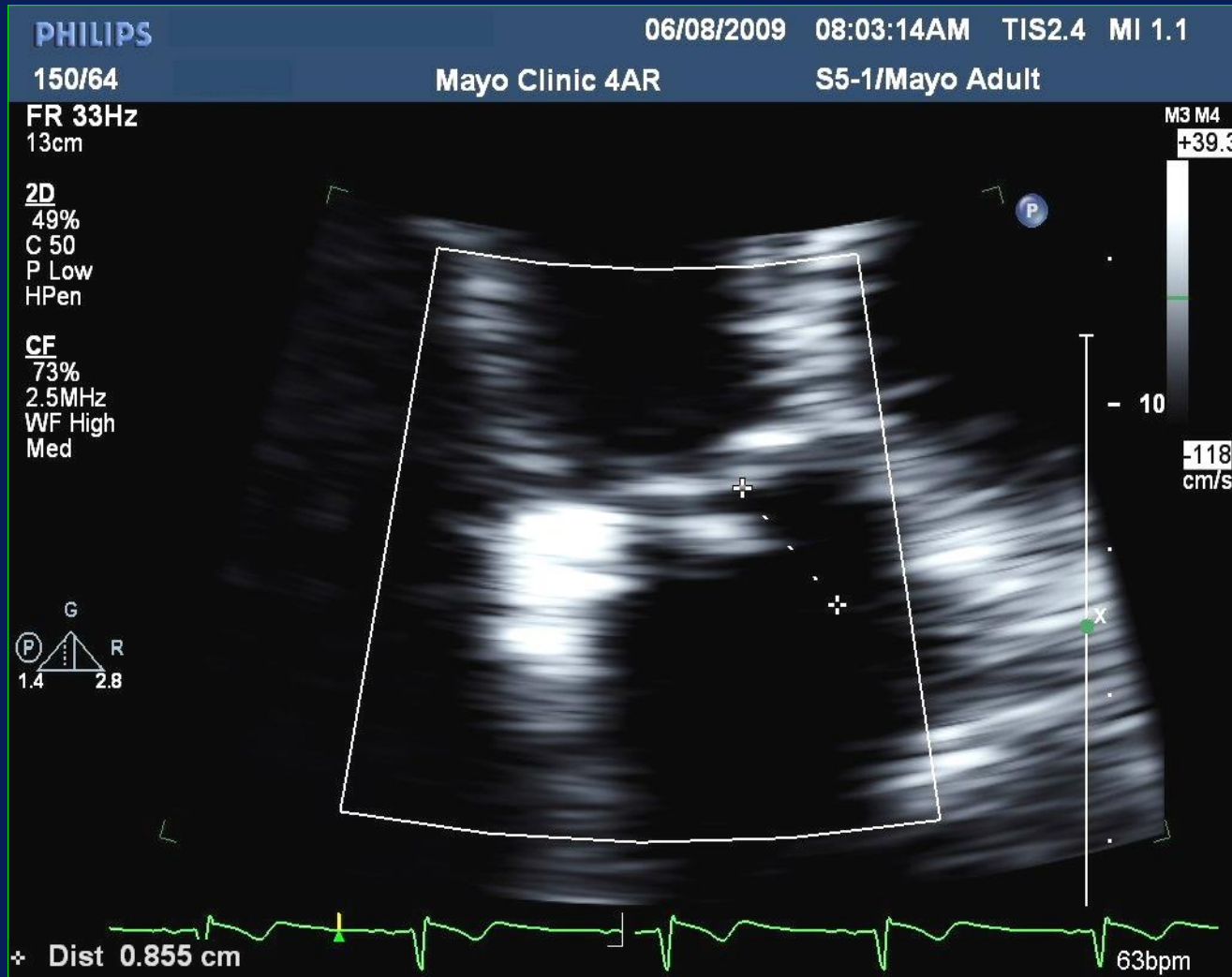
Aliasing velocity 40 cm/s



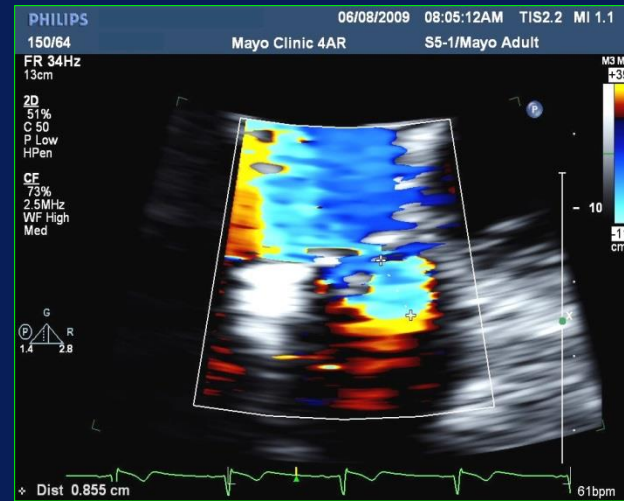
PISA R = 0.9 cm; Aliasing velocity 40 cm/sec



PISA R = 0.9 cm; Aliasing velocity 40 cm/sec



Step 1: Calculate proximal AR flow

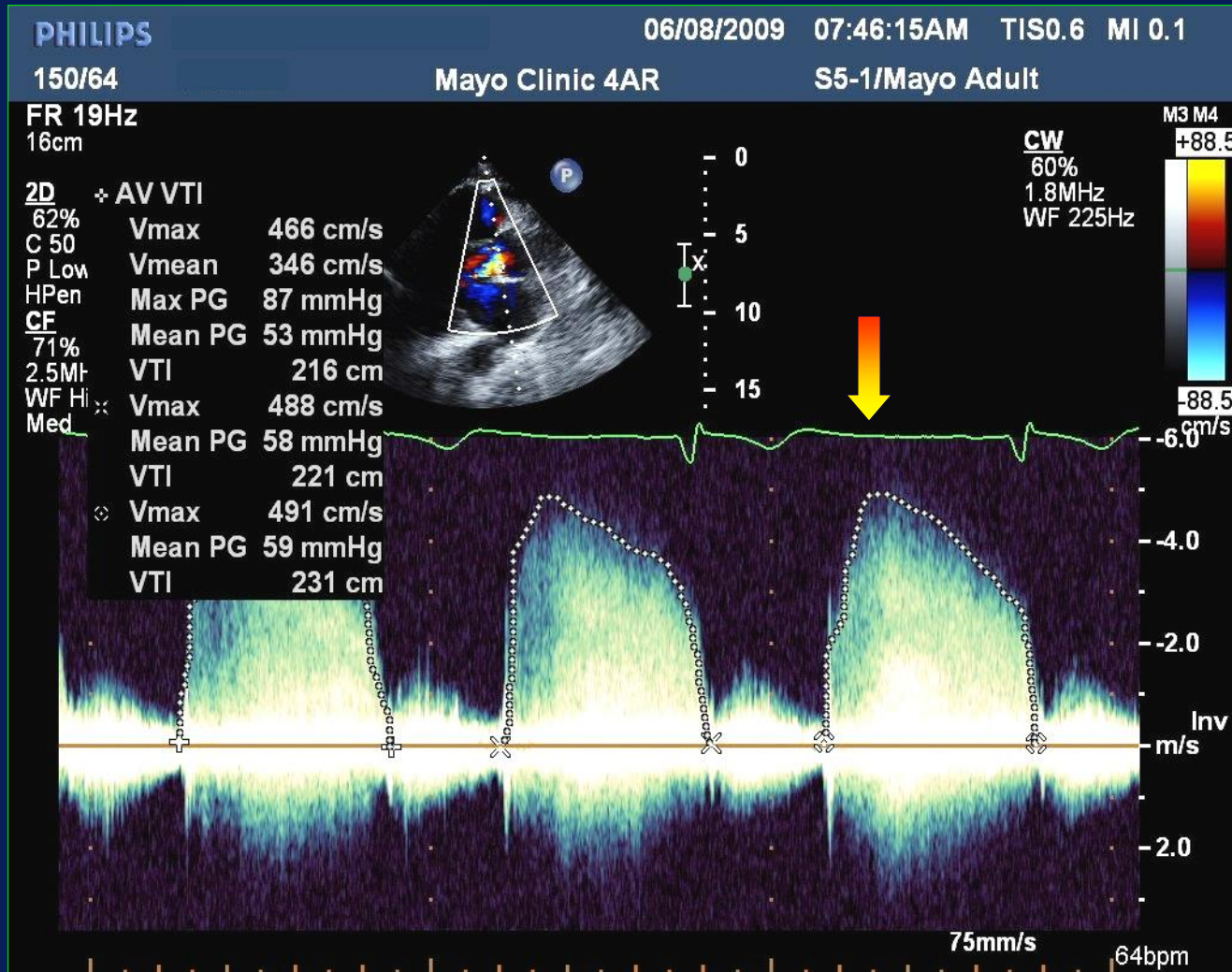


$$\begin{aligned}\text{Flow}_{\text{AR}} &= \text{Area}_{\text{PISA}} \times \text{Velocity}_{\text{Alias}} \\ &= 2\pi \times R^2 \times V_{\text{Alias}} \\ &= 6.28 \times (0.9 \text{ cm})^2 \times 40 \text{ cm/sec}\end{aligned}$$

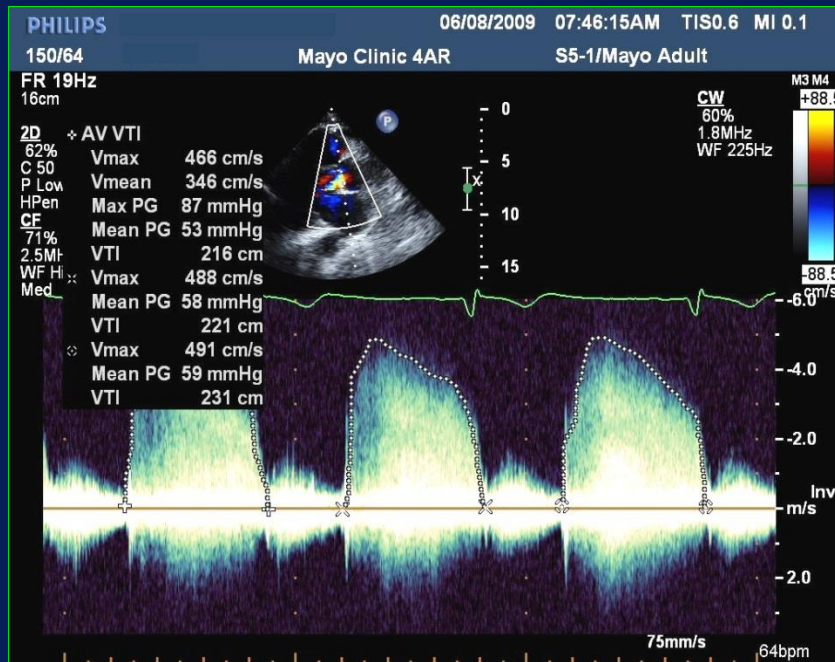
$$\text{Flow}_{\text{AR}} = 203 \text{ cm}^3/\text{sec}$$

AR Peak Velocity 490 cm/sec; TVI = 223 cm

Parasternal long-axis view



Step 2: Calculate the aortic ERO



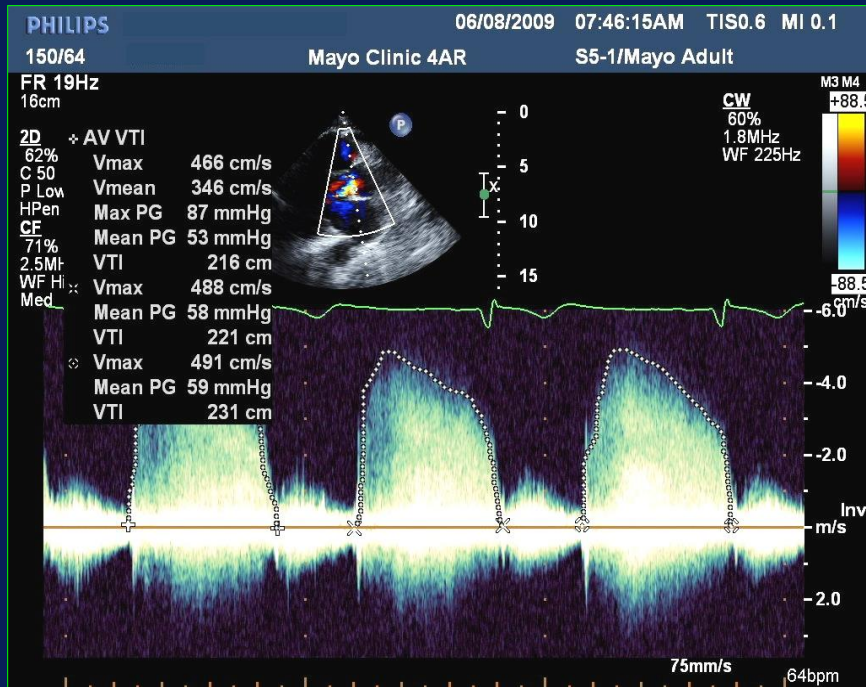
$$\text{ERO} = \frac{\text{Flow}_{\text{AR}}}{\text{Velocity}_{\text{AR}}}$$

$$= \frac{203 \text{ cm}^3/\text{sec}}{490 \text{ cm}/\text{sec}}$$

$$\text{Velocity}_{\text{AR}} = 490 \text{ cm}/\text{sec}$$

$$\text{ERO} = 0.41 \text{ cm}^2$$

Step 3: Calculate AR volume



Volume_{AR}

$$= ERO \times TVI_{AR}$$

$$= 0.37 \text{ cm}^2 \times 223 \text{ cm}$$

$$TVI_{AR} = 223 \text{ cm}$$

$$= 92 \text{ cm}^3$$

Locating the Color Flow Convergence

- **Zoom region of interest**
(Decreases error of radius measurement)
- **Shift color Doppler baseline in the direction of the regurgitant jet**
- **Baseline shift to obtain an optimal hemispheric flow convergence signal for PISA measurement**
- **Time the radius measurement to coincide with the peak AR velocity by CW Doppler**

Quantitation of Aortic Regurgitation

PISA Method: Color and CW Doppler

	Mild	Moderate	Severe	
AR Volume (cm ³ /beat)	<30	30 - 44	45 - 59	≥ 60
ERO (cm ²)	<0.10	0.10-0.19	0.20-0.29	≥ 0.30

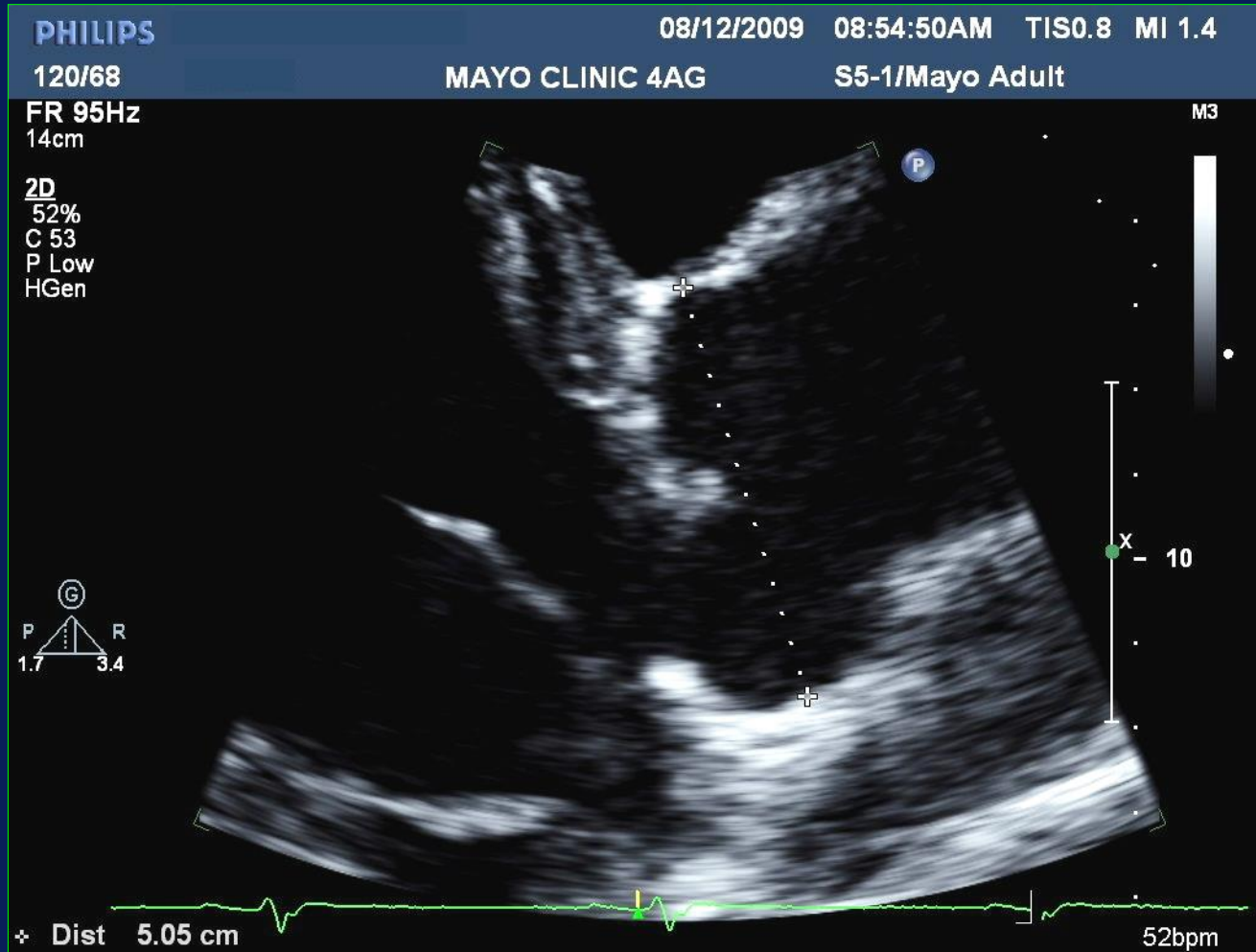
Zoghbi WA, et al. J Am Soc Echocardiogr 2003; 16: 777

Nishimura RA, CM Otto, et al. JACC 2014; 63: e57

48 y/o Farmer: Asymptomatic



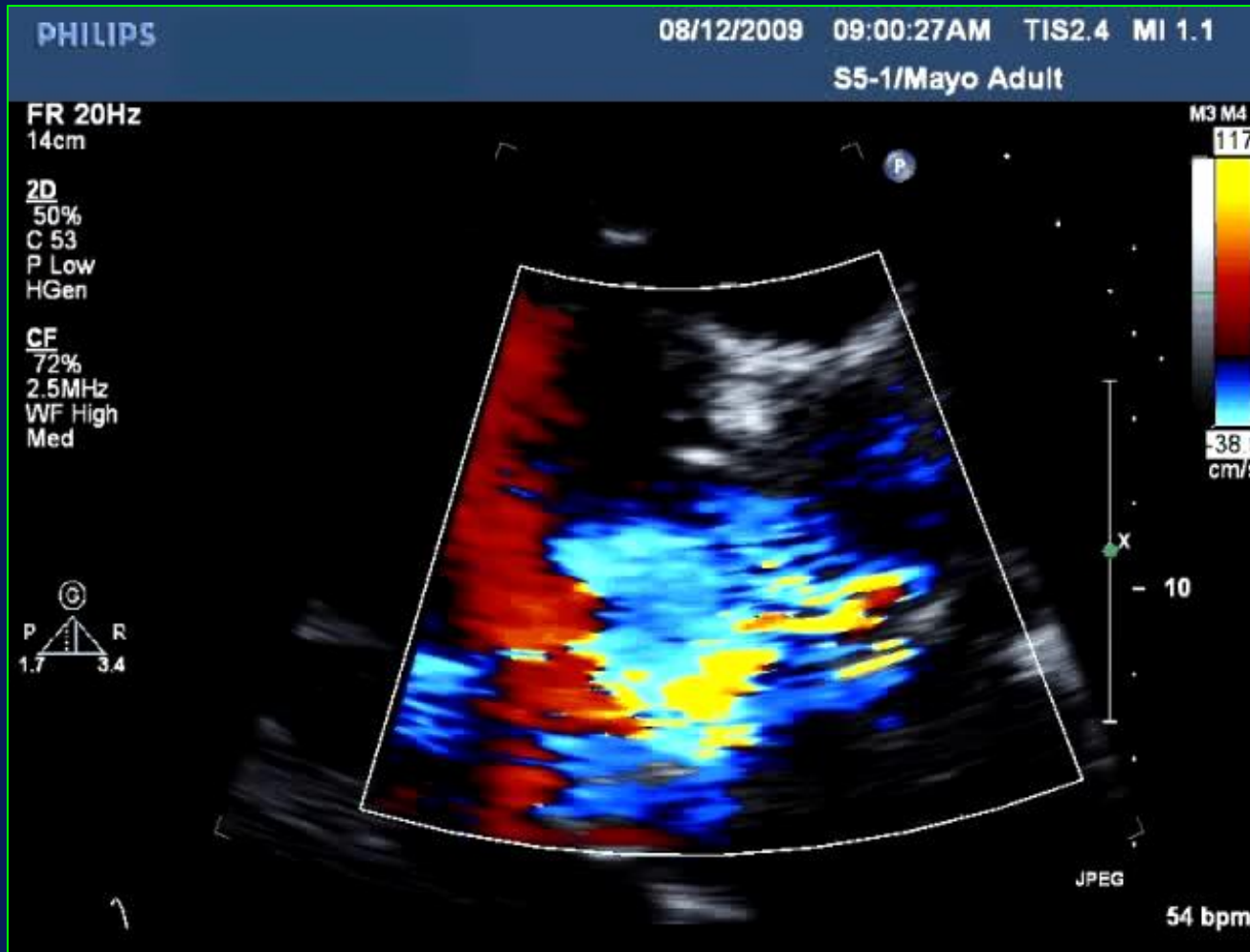
Aortic root = 5.1 cm



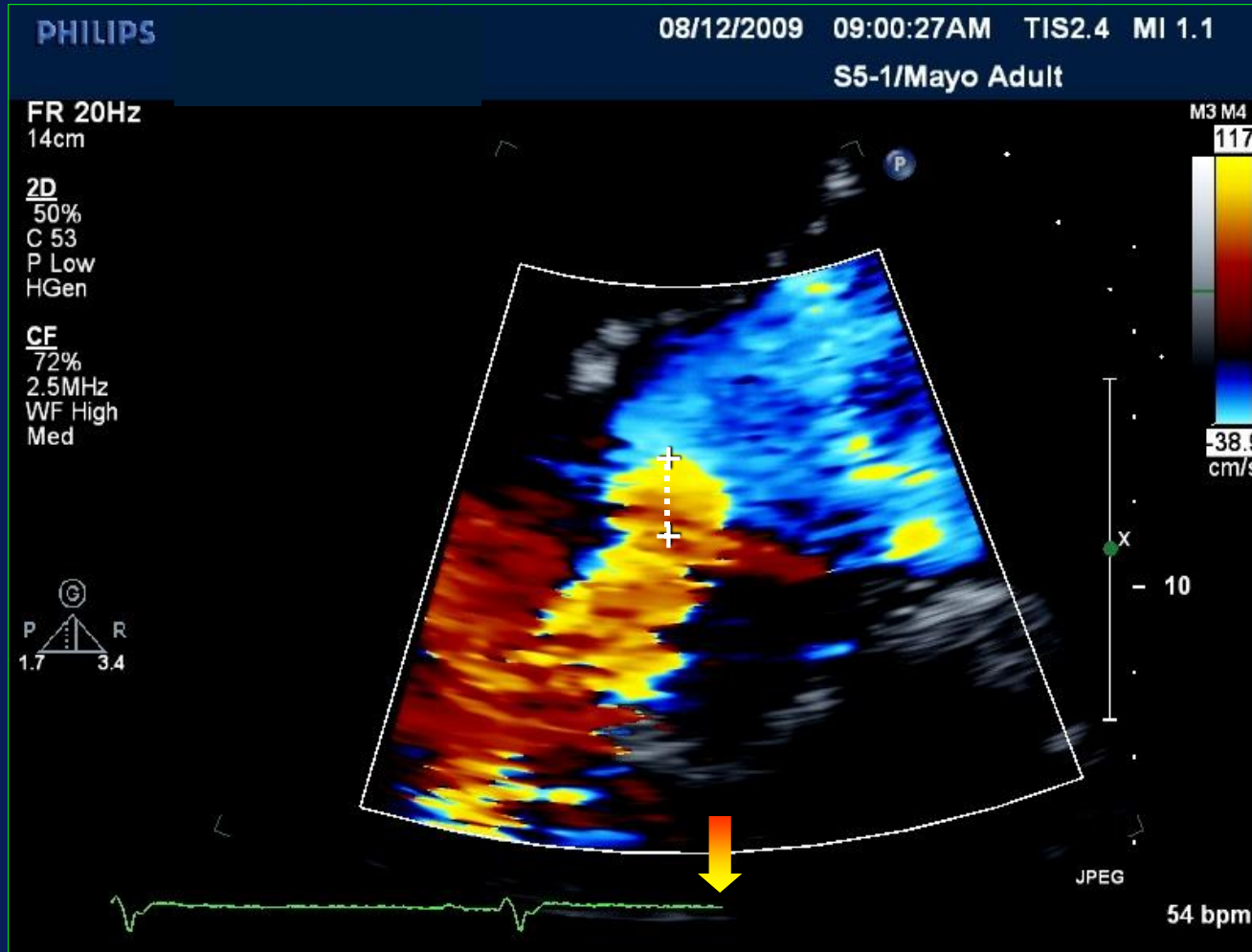
48 y/o Farmer: Asymptomatic



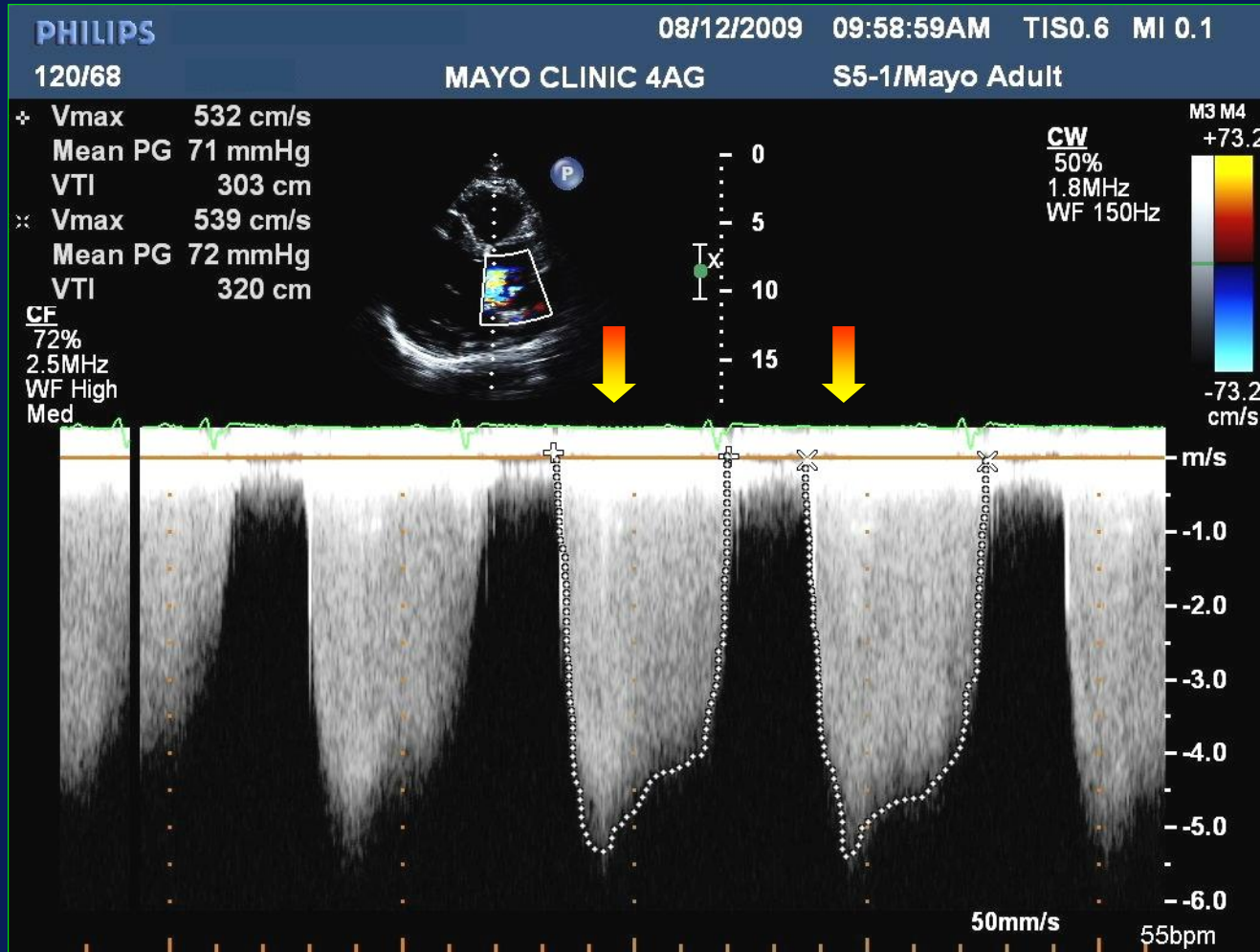
Aliasing velocity 39 cm/sec



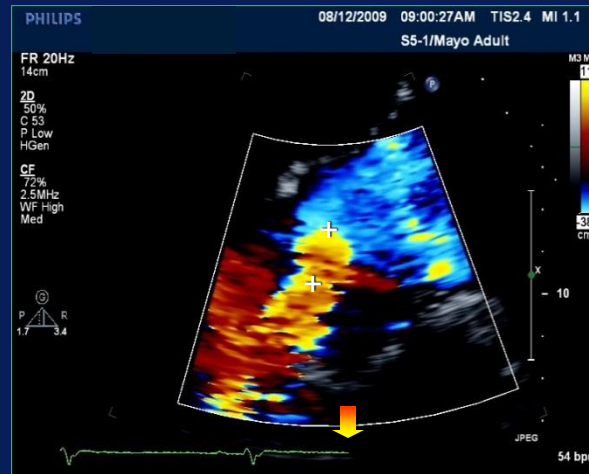
PISA R = 0.9 cm; Aliasing velocity 39 cm/sec



AR Peak Velocity 535 cm/sec; TVI = 310 cm Parasternal long-axis view



Step 1: Calculate proximal AR flow



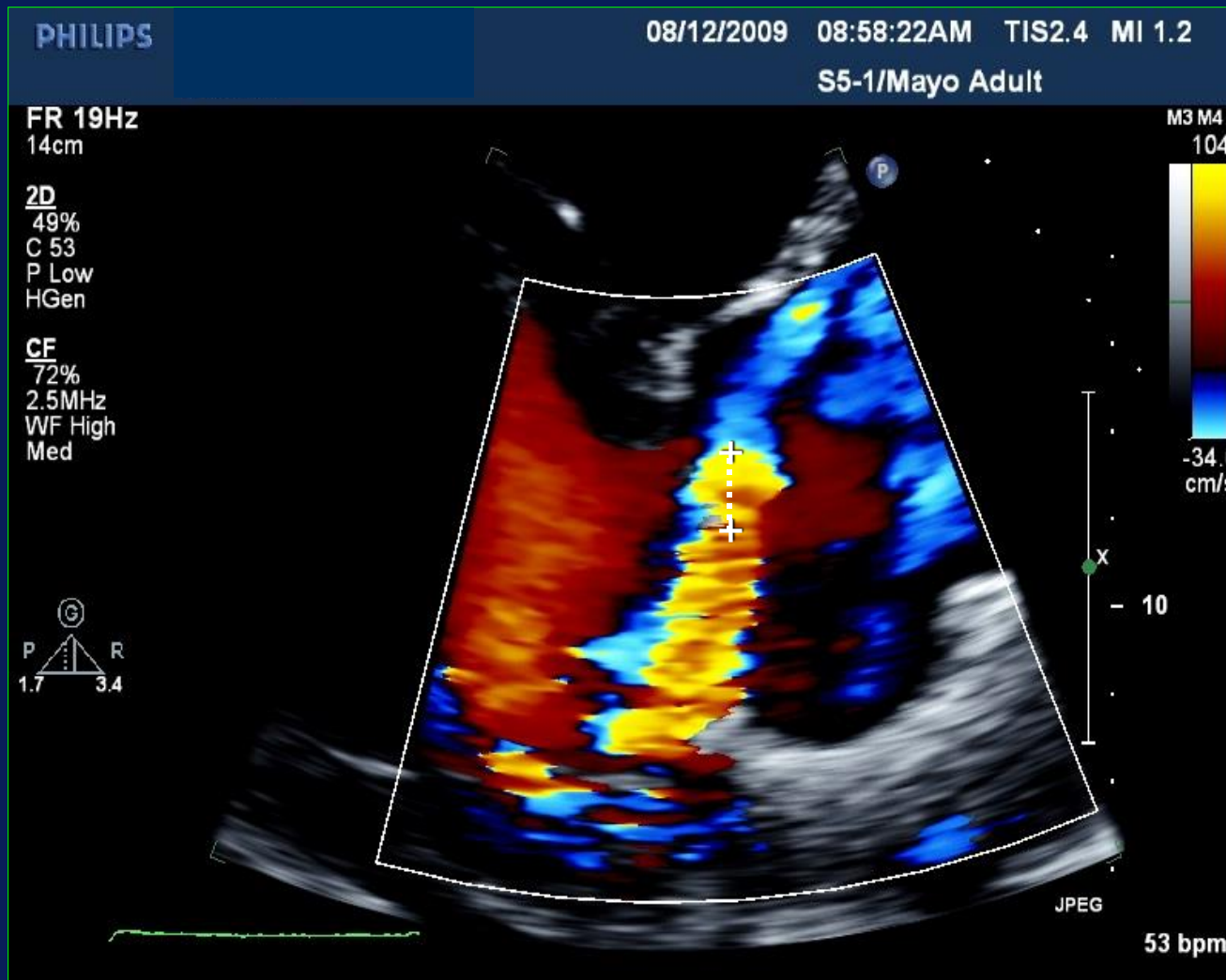
$$\begin{aligned}\text{Flow}_{\text{AR}} &= \text{Area}_{\text{PISA}} \times \text{Velocity}_{\text{Alias}} \\ &= 2\pi \times R^2 \times V_{\text{Alias}} \\ &= 6.28 \times (0.9\text{cm})^2 \times 39 \text{ cm/sec}\end{aligned}$$

$$\text{Flow}_{\text{AR}} = 198 \text{ cm}^3/\text{sec}$$

Aliasing velocity 35 cm/sec



PISA R = 1.0 cm; Aliasing velocity 35 cm/sec



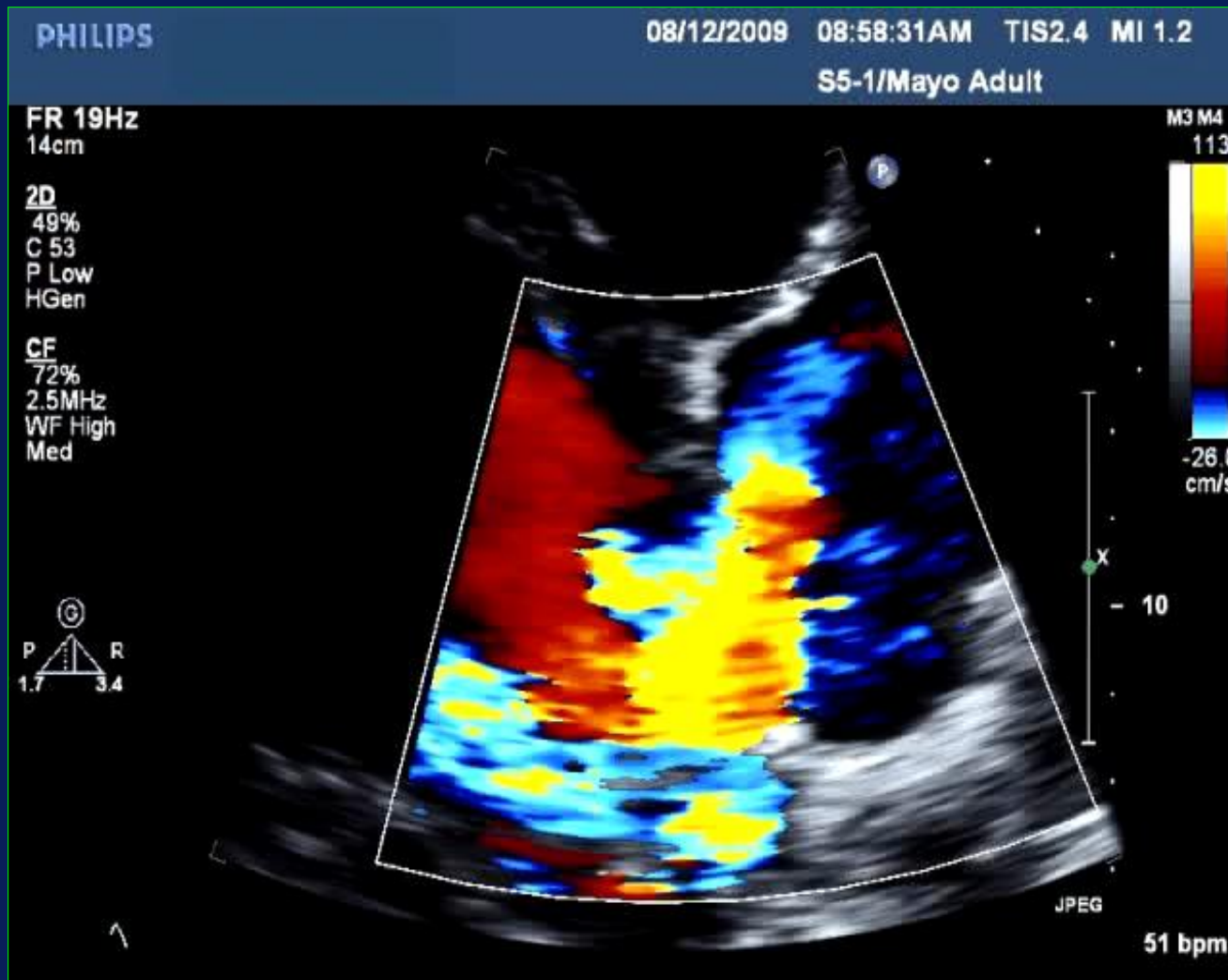
Step 1: Calculate proximal AR flow



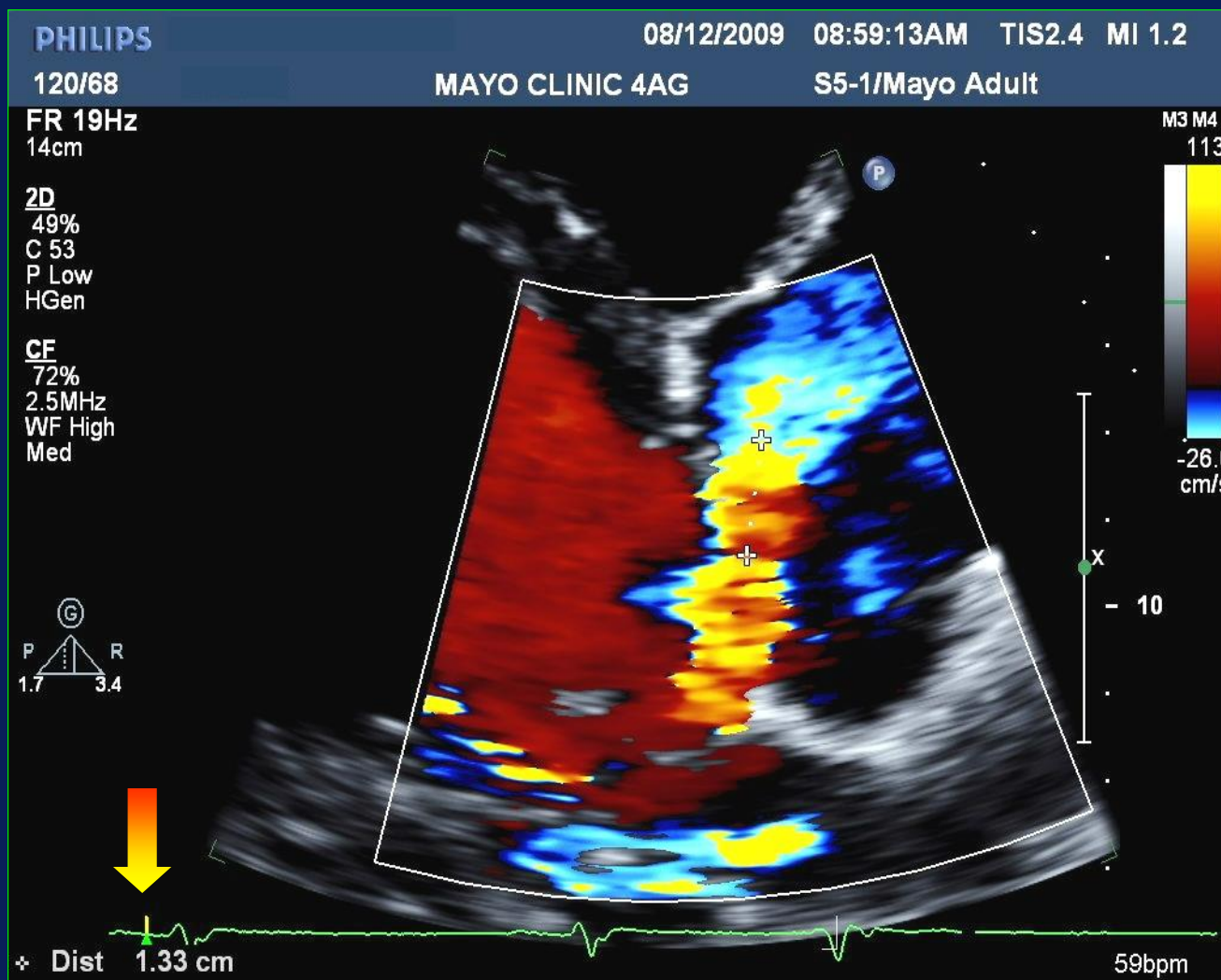
$$\begin{aligned}\text{Flow}_{\text{AR}} &= \text{Area}_{\text{PISA}} \times \text{Velocity}_{\text{Alias}} \\ &= 2\pi \times R^2 \times V_{\text{Alias}} \\ &= 6.28 \times (1.0\text{cm})^2 \times 35 \text{ cm/sec}\end{aligned}$$

$$\text{Flow}_{\text{AR}} = 220 \text{ cm}^3/\text{sec}$$

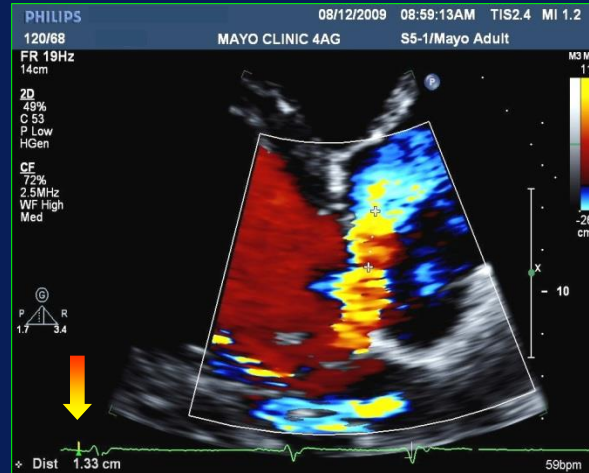
Aliasing velocity 26 cm/sec: Blooming



PISA R = 1.3 cm; Aliasing velocity 26 cm/sec Late diastolic timing



Step 1: Calculate proximal AR flow

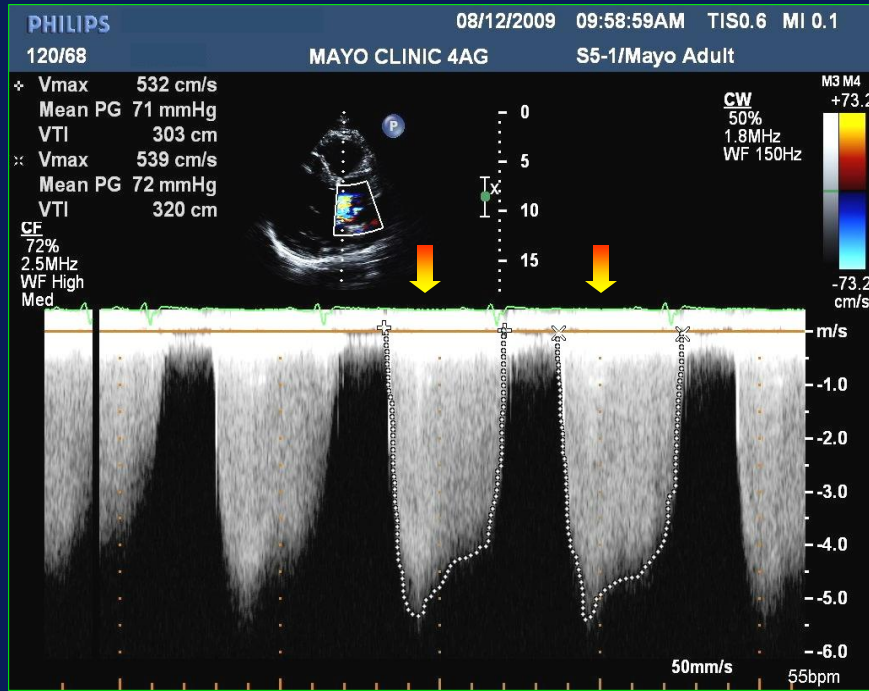


$$\begin{aligned}\text{Flow}_{\text{AR}} &= \text{Area}_{\text{PISA}} \times \text{Velocity}_{\text{Alias}} \\ &= 2\pi \times R^2 \times V_{\text{Alias}} \\ &= 6.28 \times (1.3\text{cm})^2 \times 26 \text{ cm/sec}\end{aligned}$$

$$\text{Flow}_{\text{AR}} = 276 \text{ cm}^3/\text{sec}$$

ERROR

Step 2: Calculate the aortic ERO



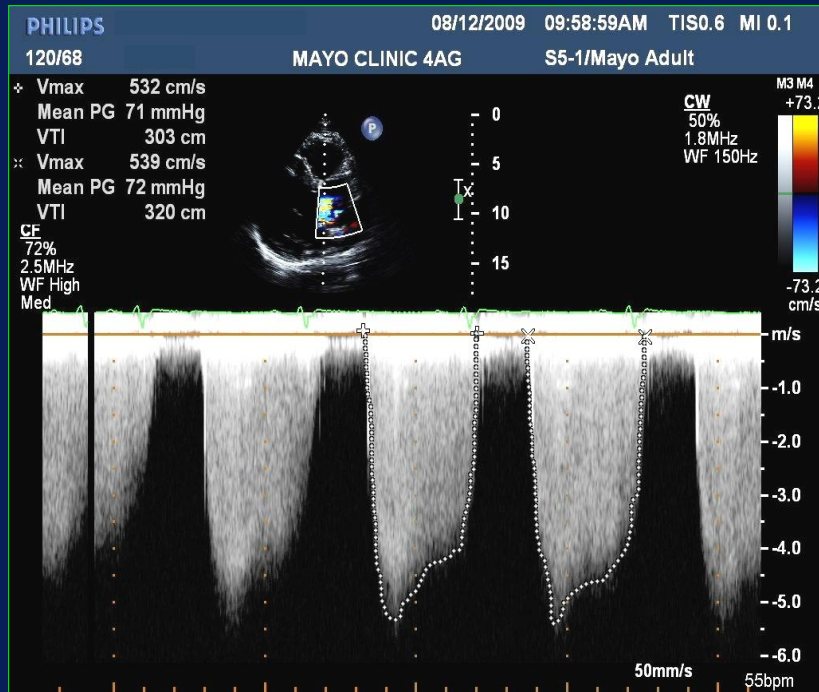
$$\text{ERO} = \frac{\text{Flow}_{\text{AR}}}{\text{Velocity}_{\text{AR}}}$$

$$= \frac{198 \text{ cm}^3/\text{sec}}{535 \text{ cm}/\text{sec}}$$

$$\text{Velocity}_{\text{AR}} = 535 \text{ cm}/\text{sec}$$

$$\text{ERO} = 0.37 \text{ cm}^2$$

Step 3: Calculate AR volume



$$TVI_{AR} = 310 \text{ cm}$$

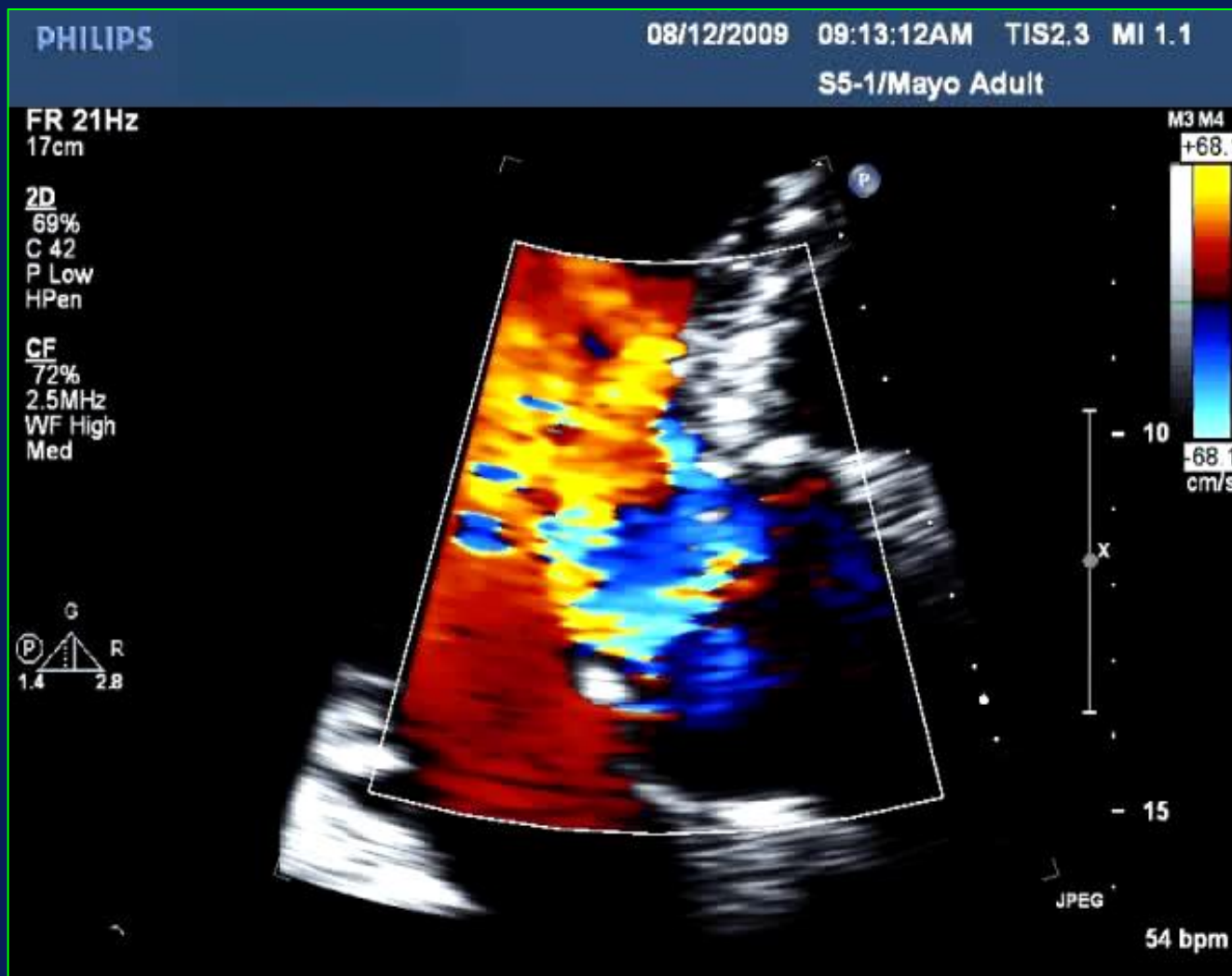
$$\text{Volume}_{AR}$$

$$= ERO \times TVI_{AR}$$

$$= 0.37 \text{ cm}^2 \times 310 \text{ cm}$$

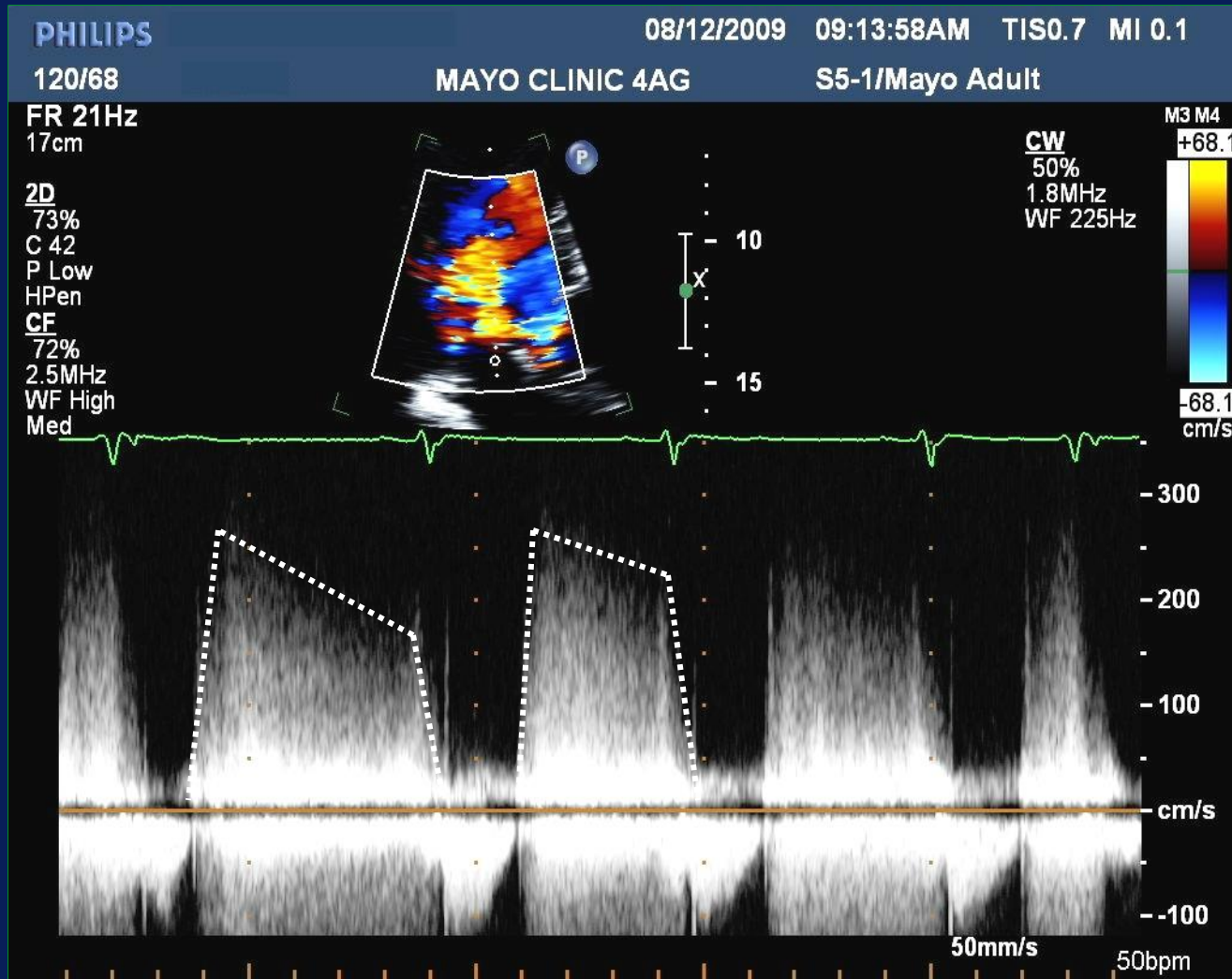
$$= 115 \text{ cm}^3$$

Apical Window: AR

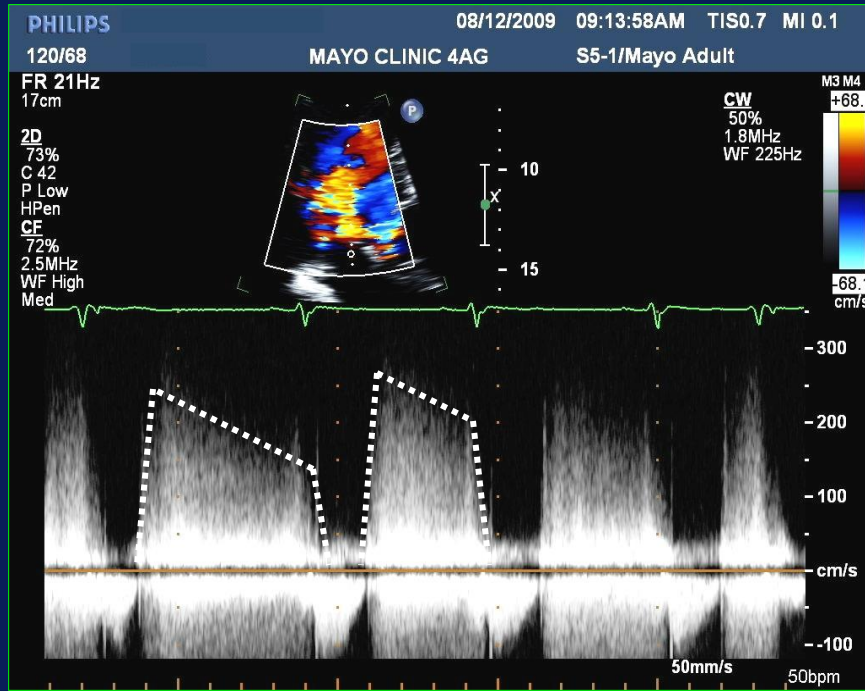


AR Peak Velocity 240 cm/sec; TVI = 170 cm

Apical CW Doppler: AR



Step 2: Calculate the aortic ERO



$$\text{ERO} = \frac{\text{Flow}_{\text{AR}}}{\text{Velocity}_{\text{AR}}}$$

$$= \frac{198 \text{ cm}^3/\text{sec}}{240 \text{ cm}/\text{sec}}$$

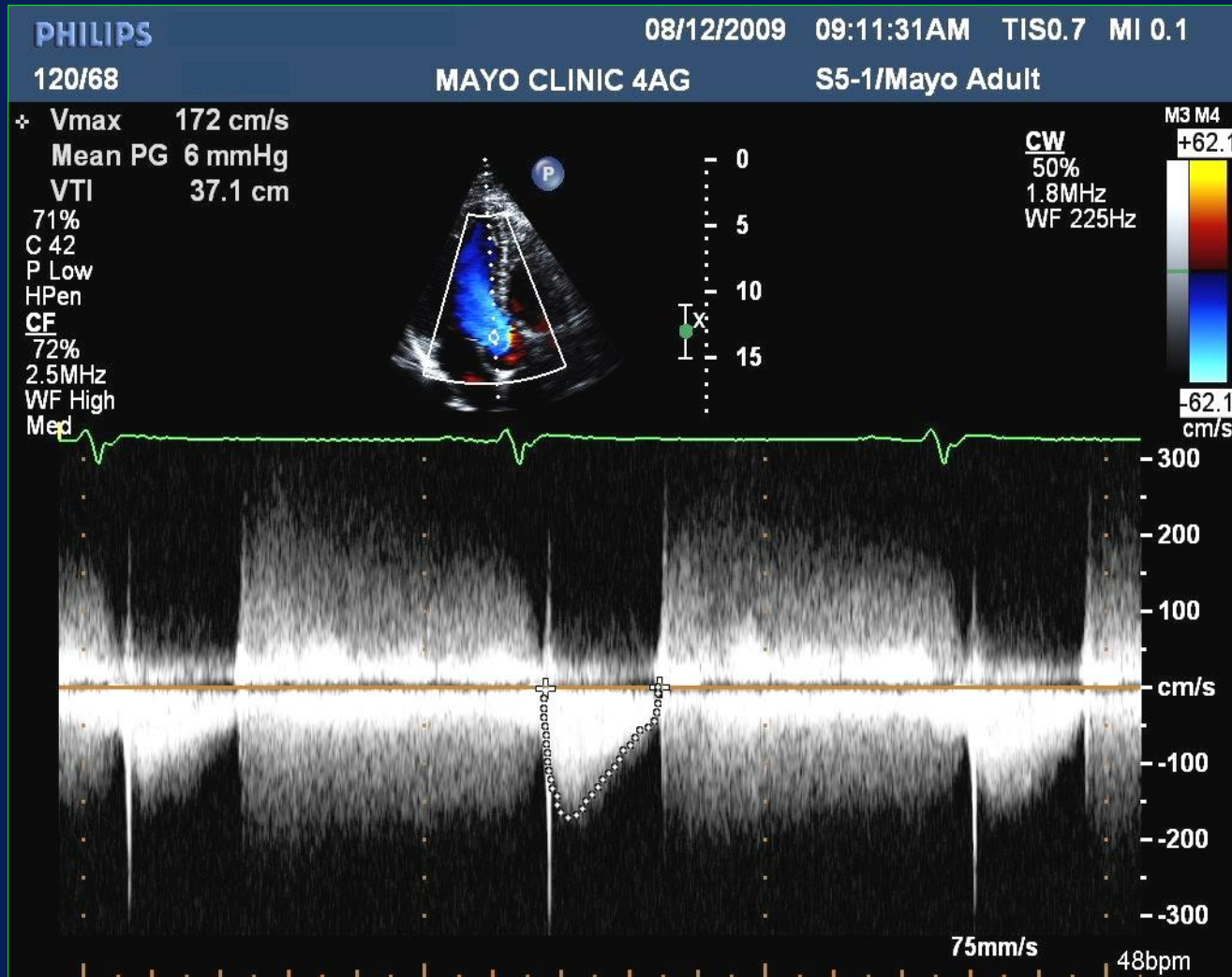
$$\text{Velocity}_{\text{AR}} = 240 \text{ cm}/\text{sec}$$

ERROR

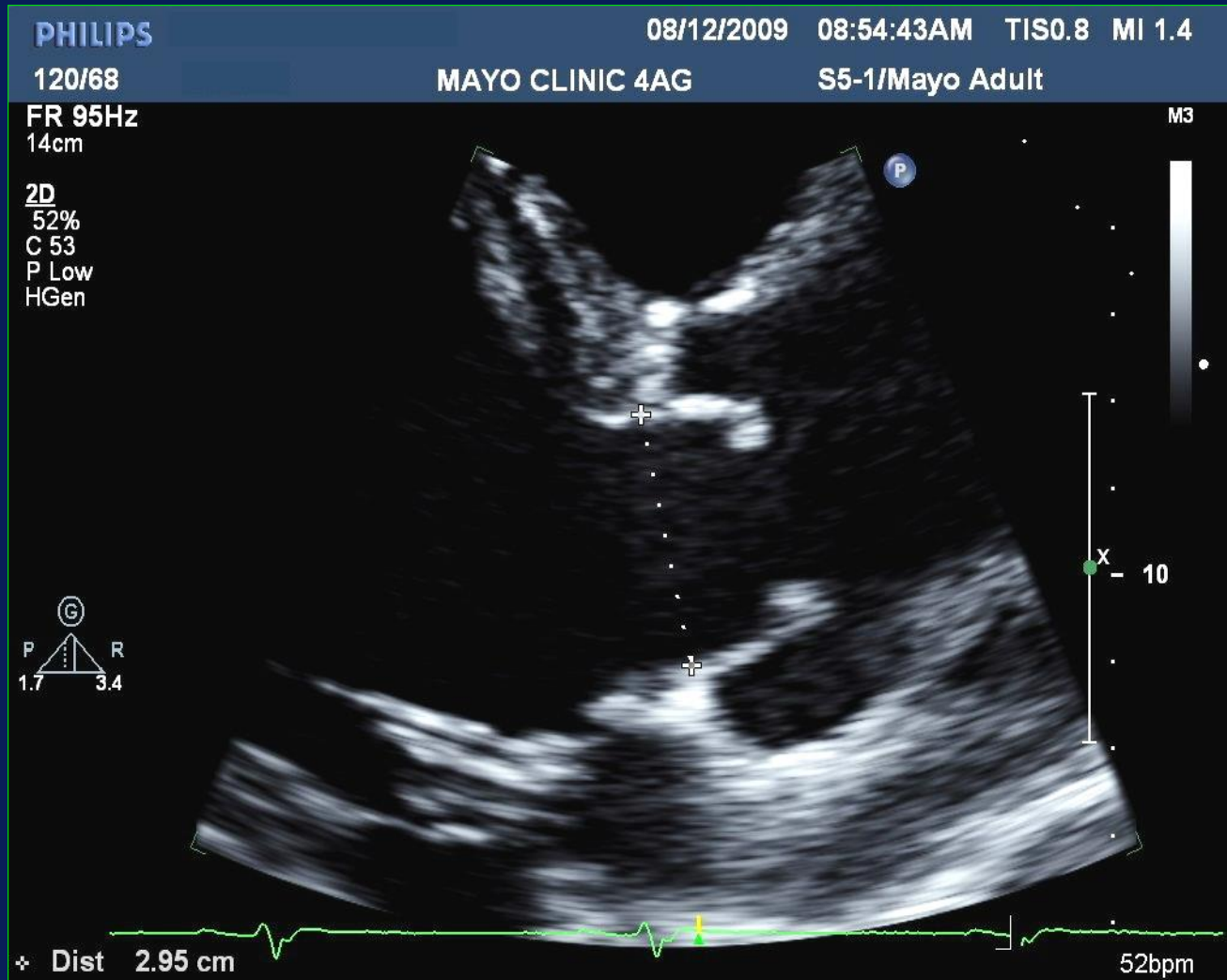
$$\text{ERO} = 0.83 \text{ cm}^2$$

Apical CW Doppler: AR

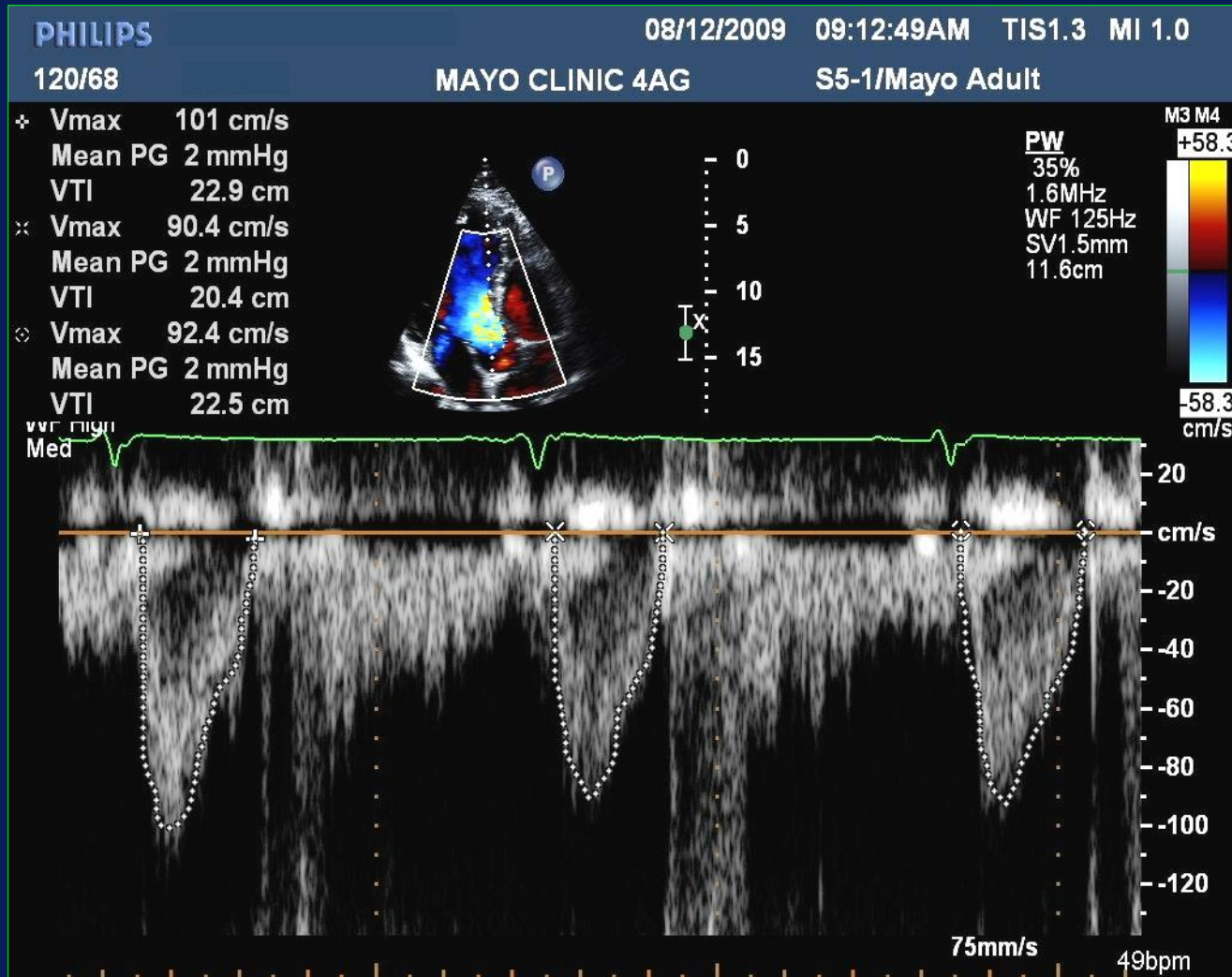
Interrogation angle error



LVOT Diameter = 3.0 cm



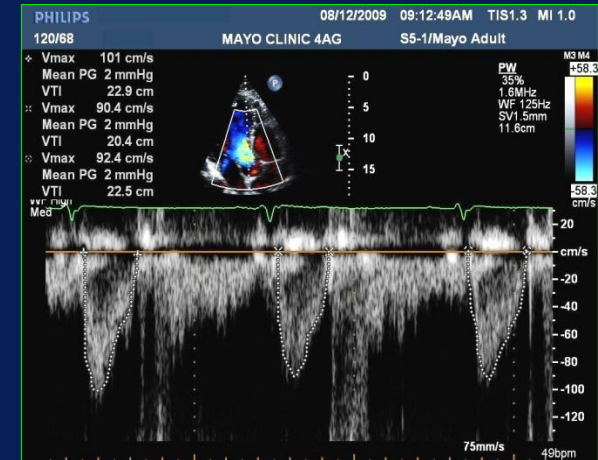
LVOT TVI = 23 cm



Step 1: Calculate LVOT Stroke Volume




LVOT Diameter = 3.0 cm



LVOT TVI = 23 cm

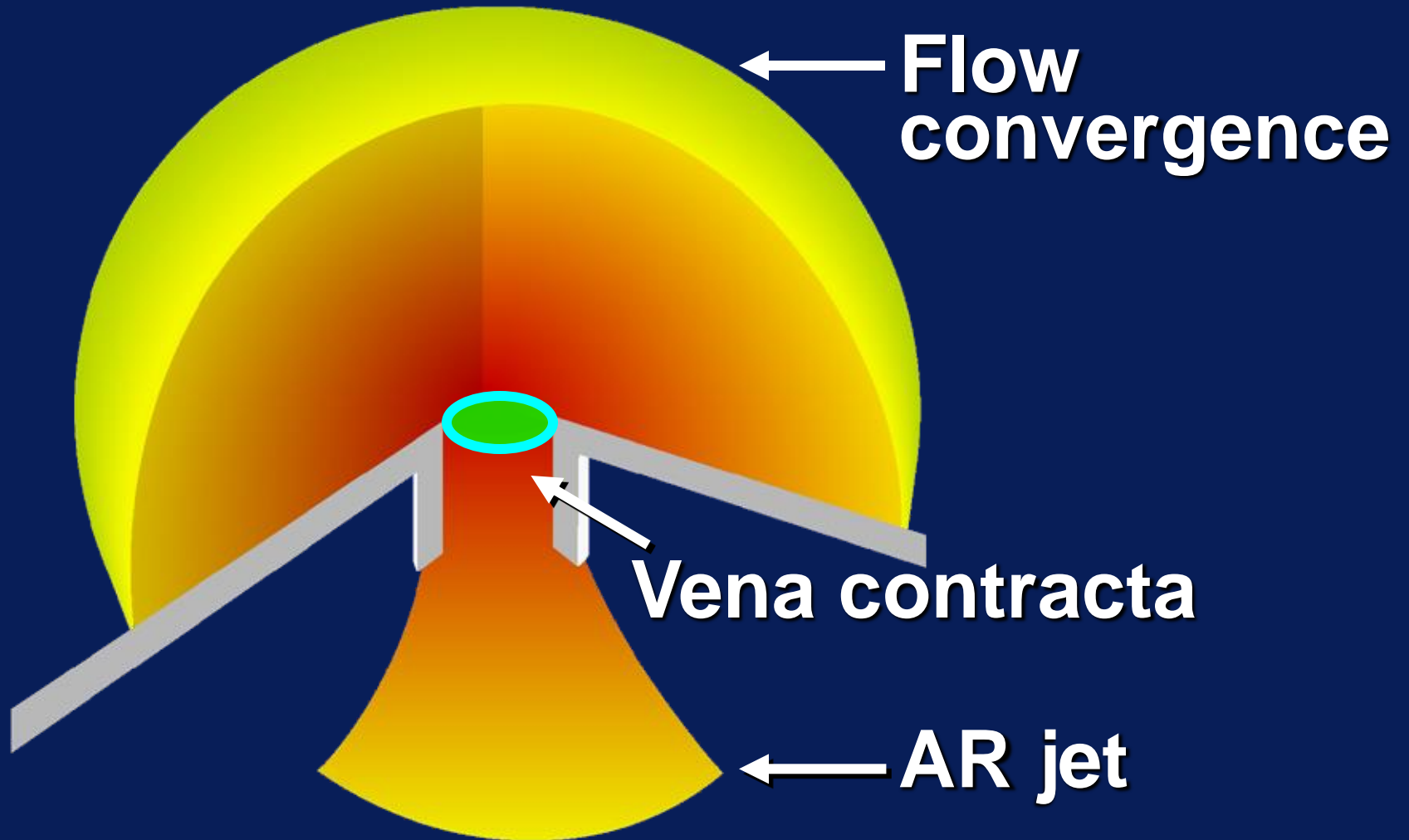
LVOT
Stroke Volume = $0.785 (3.0 \text{ cm})^2 \times 23 \text{ cm}$
Volume = 162 cm^3

Step 4: Calculate Regurgitant Fraction (RF)

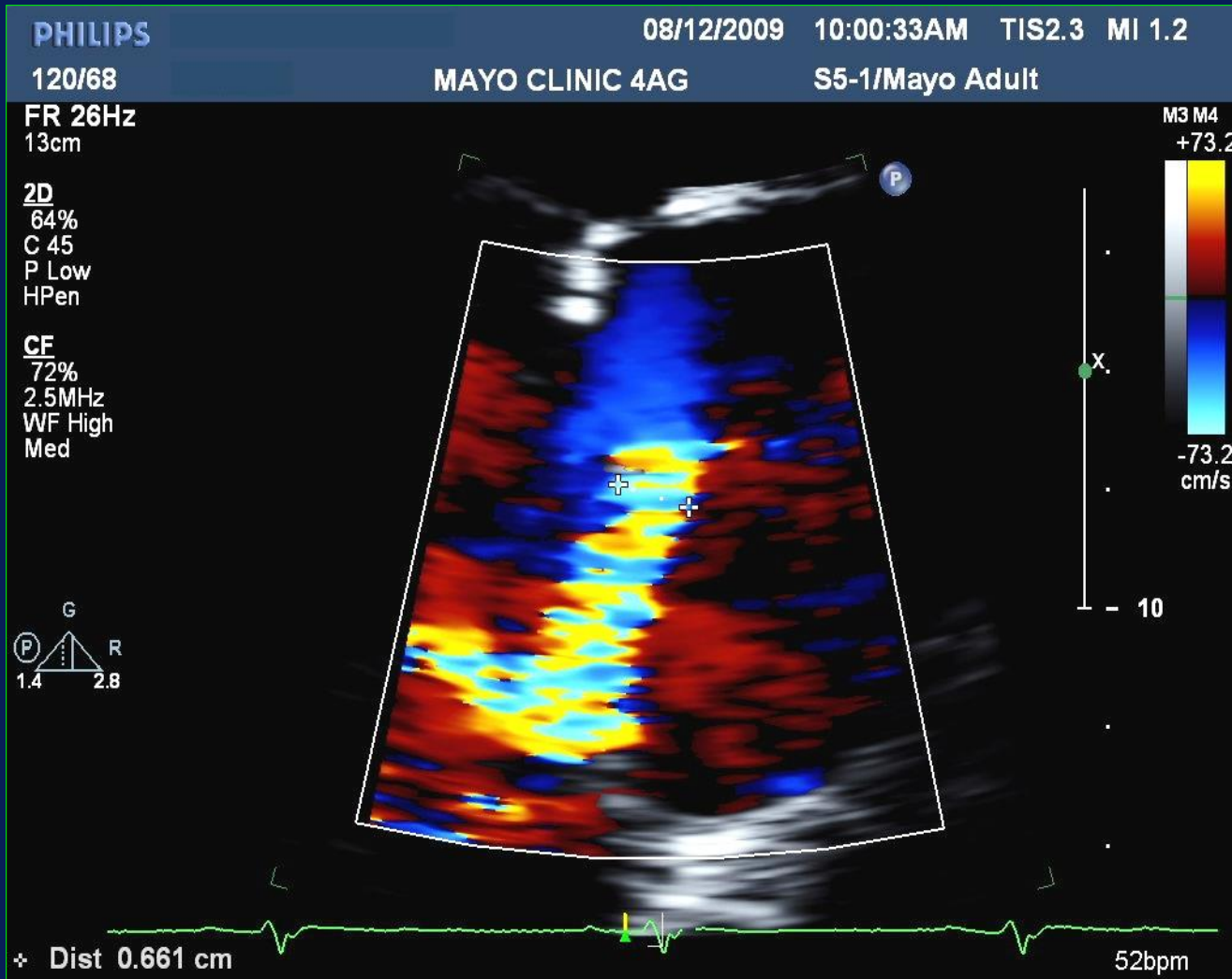


Aortic RF = $\frac{\text{AR Volume}}{\text{LVOT Stroke Volume}} = \frac{115 \text{ cm}^3}{162 \text{ cm}^3} = 71\%$

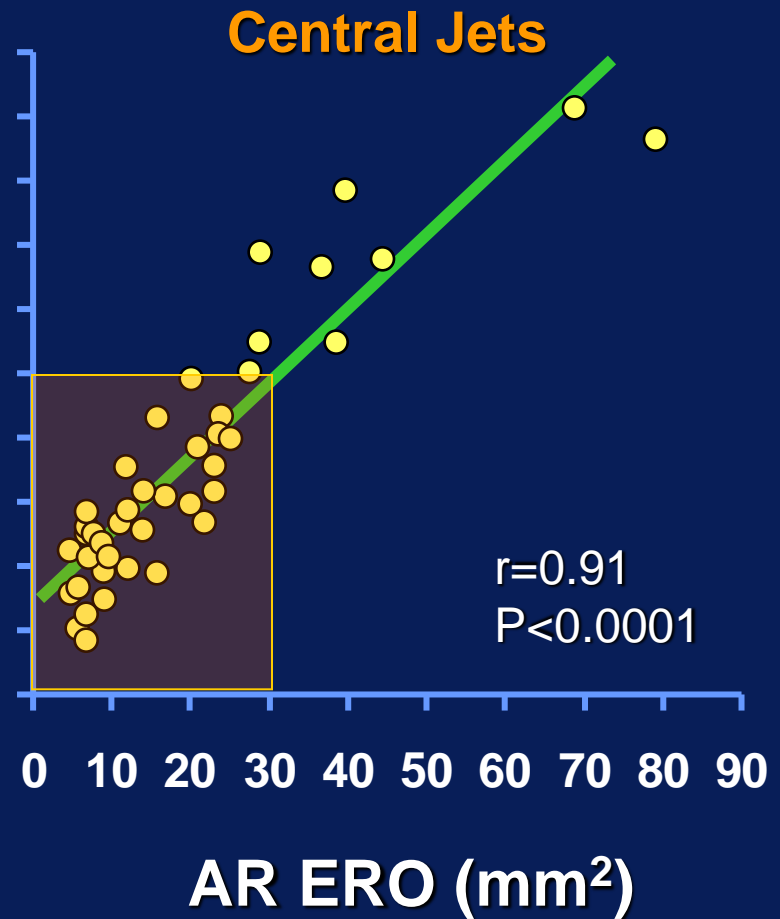
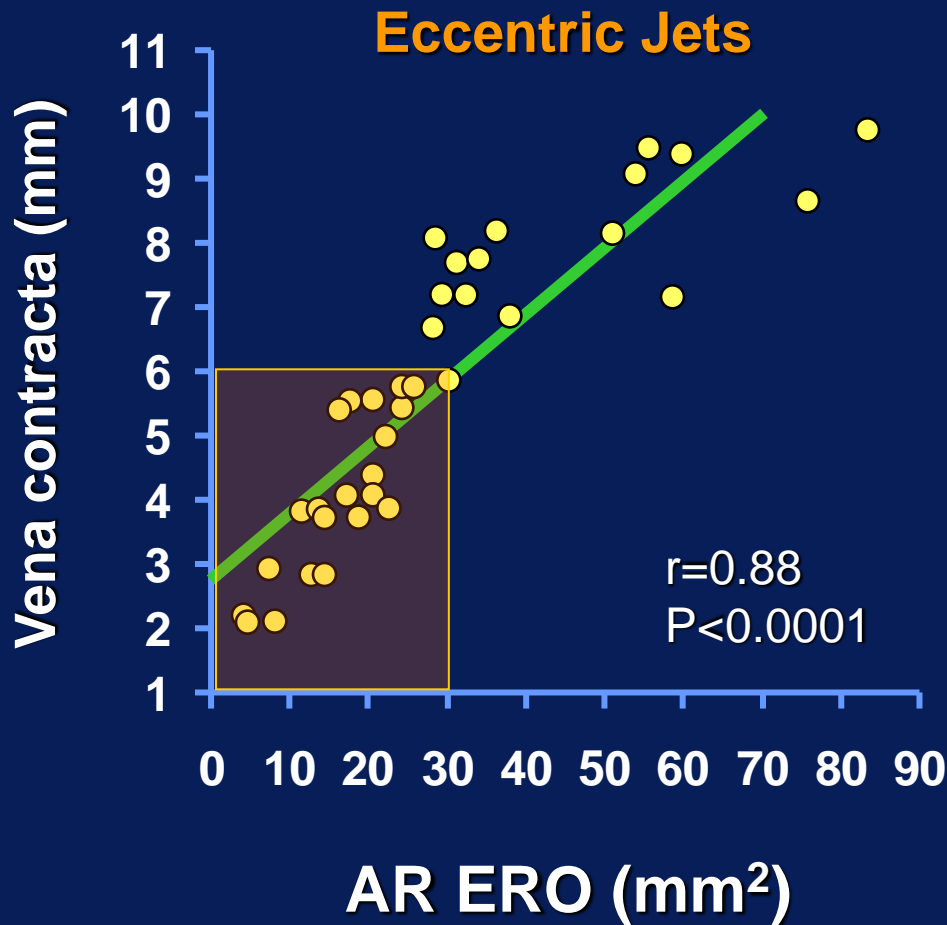
Vena Contracta: AR



Vena Contracta = 7 mm



Quantitation of AR: Vena Contracta Width Comparison to ERO



Quantitation of Aortic Regurgitation

PISA Method: Color and CW Doppler

	Mild	Moderate	Severe	
AR Volume (cm ³ /beat)	<30	30 - 44	45 - 59	≥ 60
ERO (cm ²)	<0.10	0.10-0.19	0.20-0.29	≥ 0.30
Vena Contracta Width (cm)	< 0.3	0.3 - 0.60	> 0.6	

Zoghbi WA, et al. J Am Soc Echocardiogr 2003; 16: 777

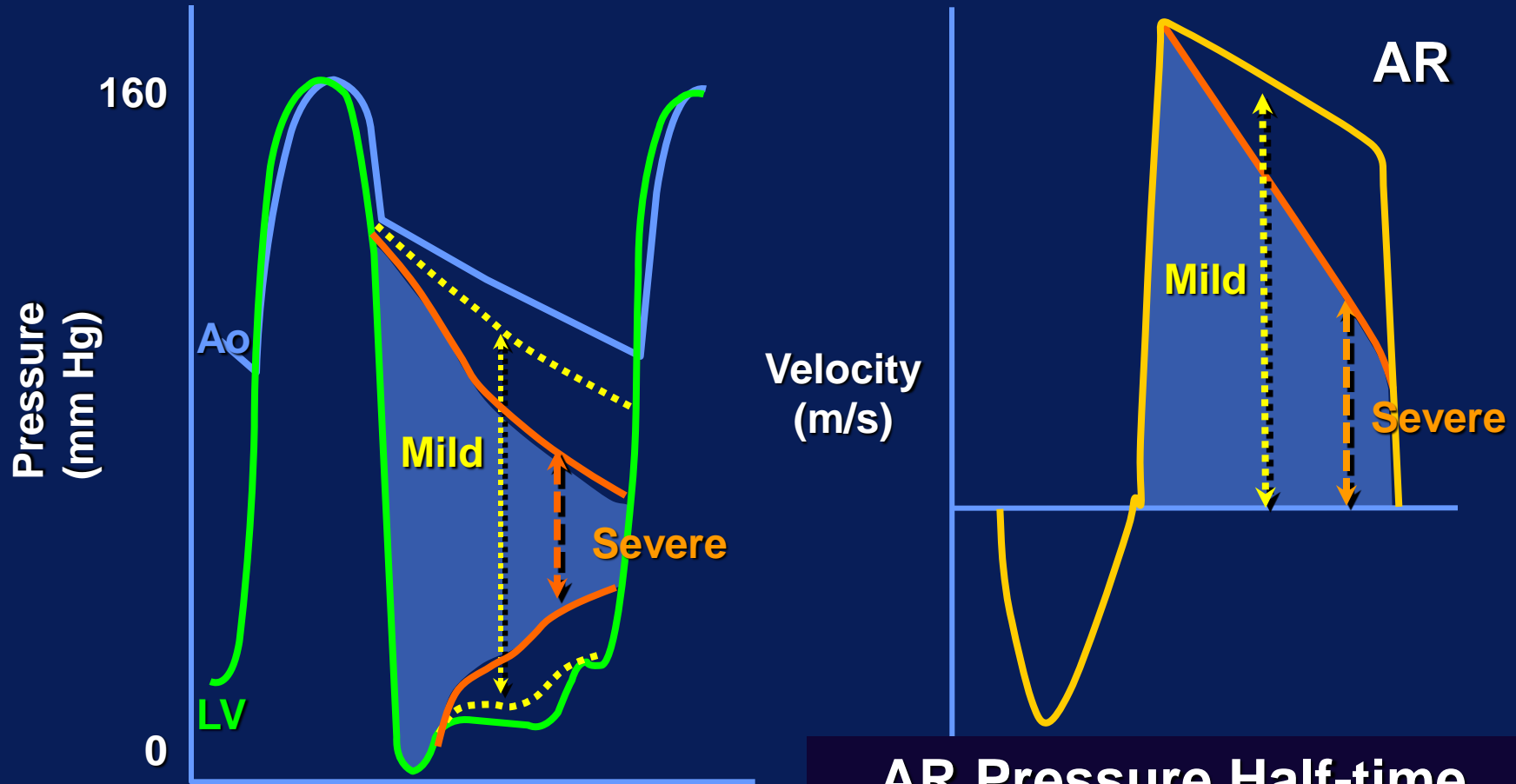
Nishimura RA, CM Otto, et al. JACC 2014; 63: e57

Quantitation of Aortic Regurgitation

Corroborating Findings

Hemodynamics of Aortic Regurgitation

Doppler Pressure Half-Time

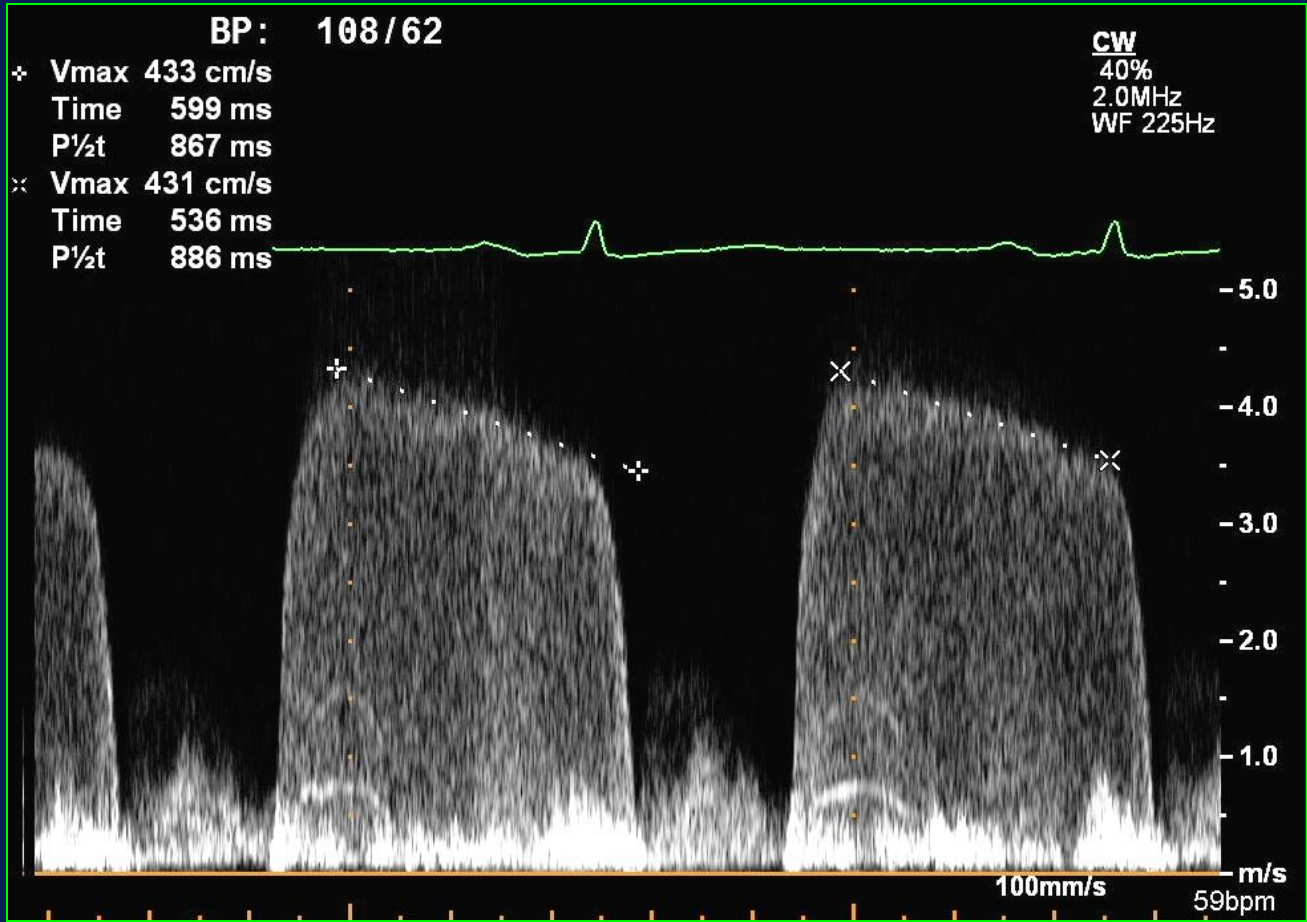


AR Pressure Half-time

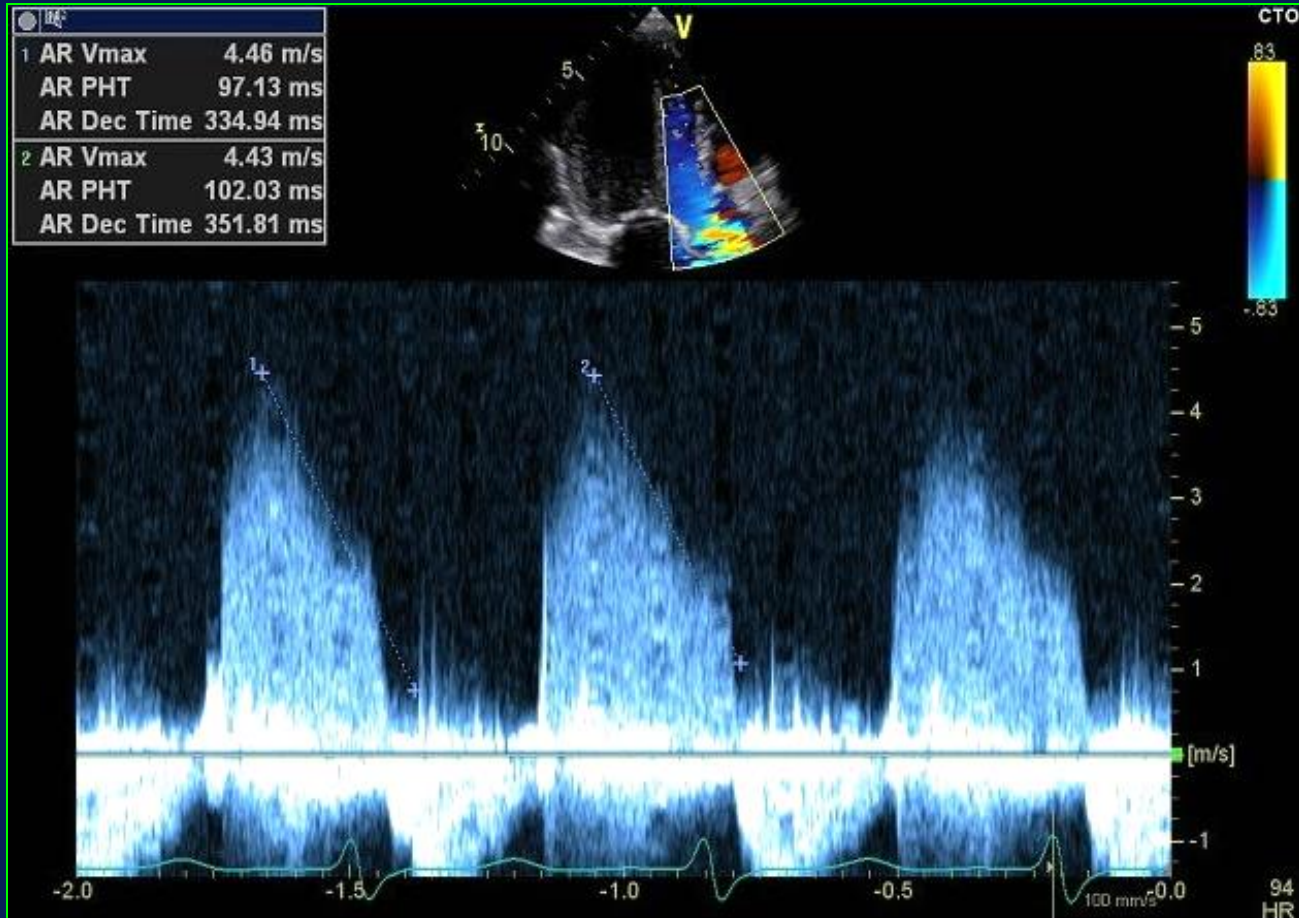
Mild AR: > 600 msec
Severe AR: < 250 msec

Mild AR: CW Doppler

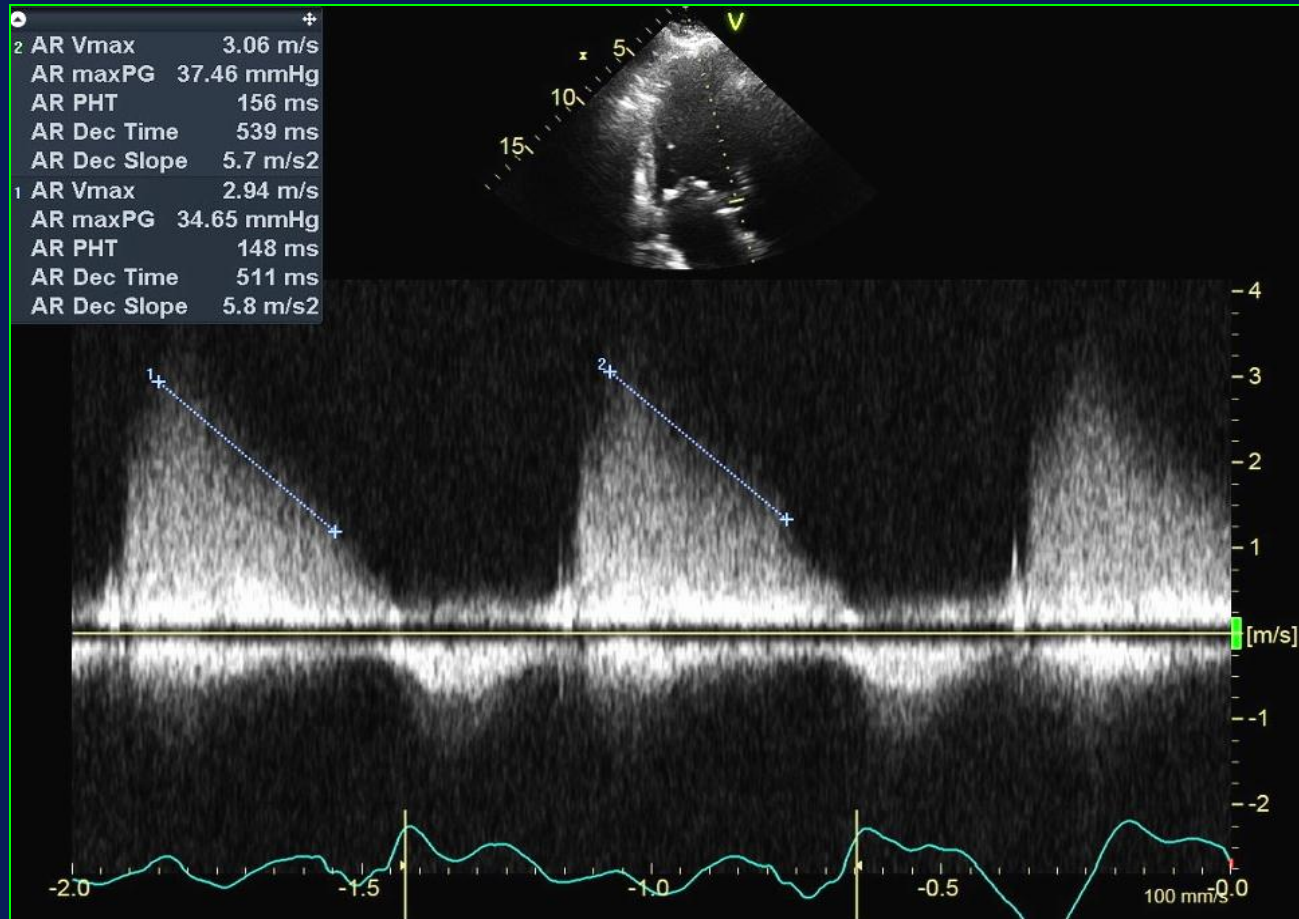
Pressure Half-time = 870 msec



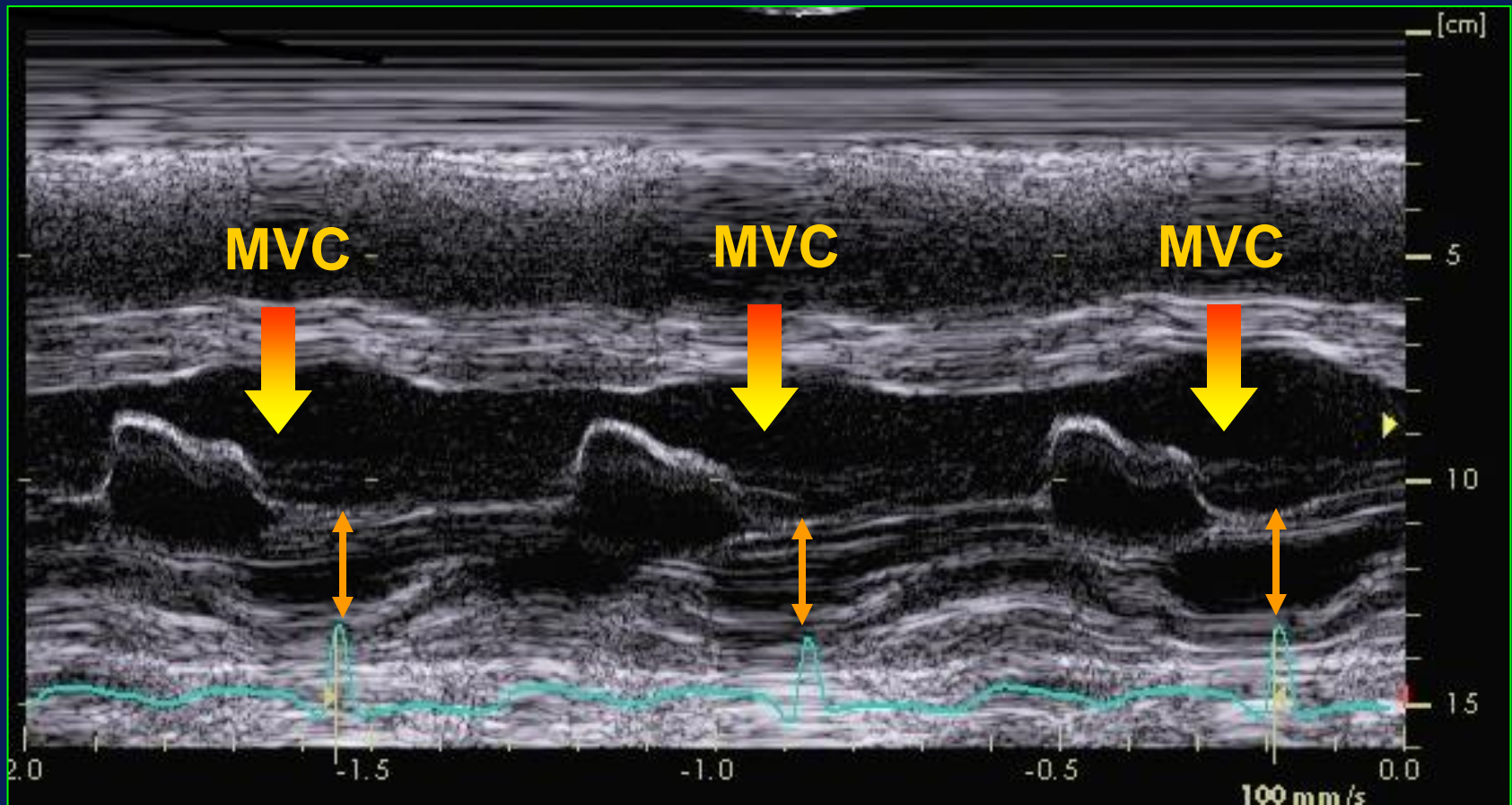
Acute Severe AR: CW Doppler Pressure Half-time = 100 msec



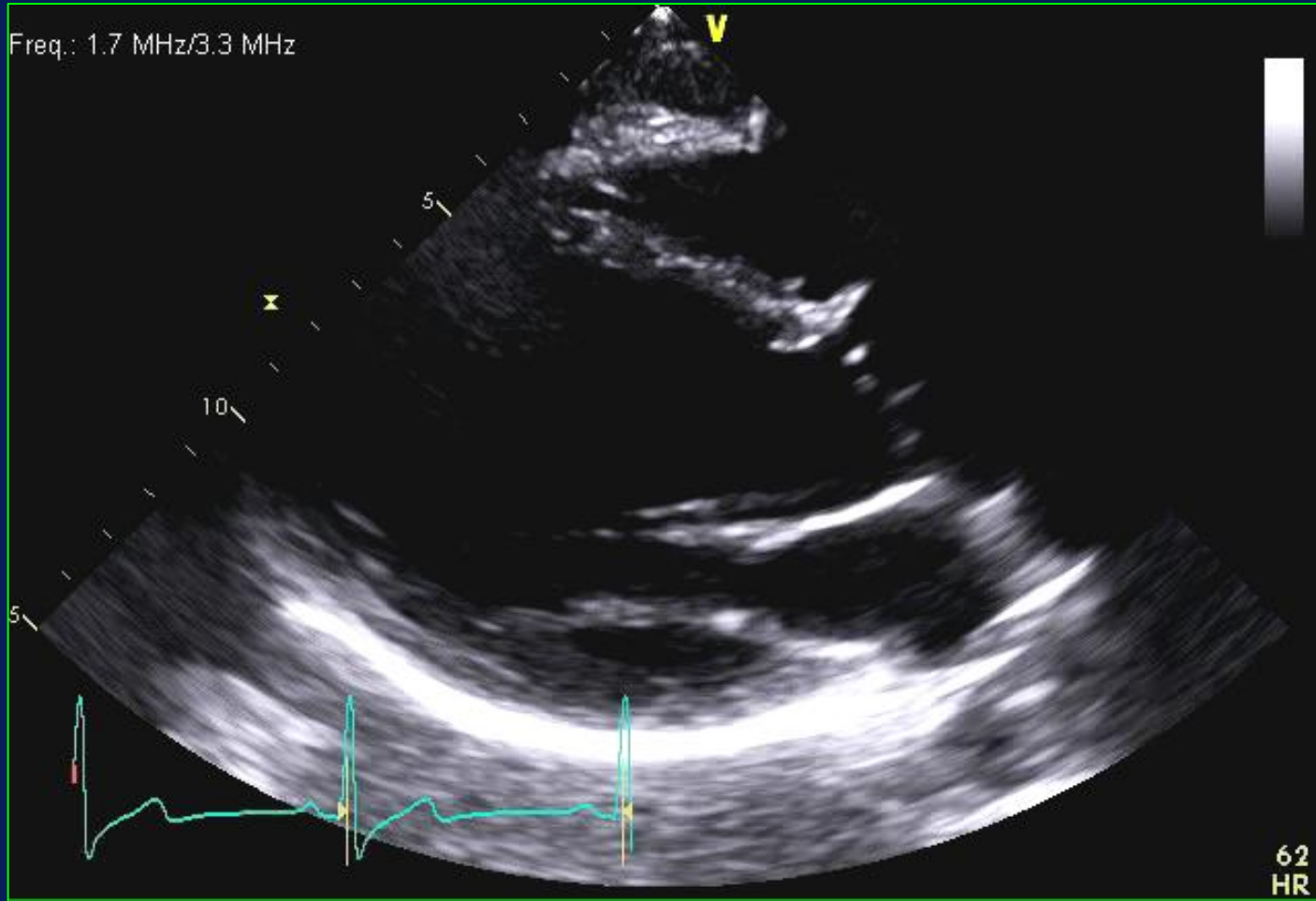
Acute Severe AR: CW Doppler Pressure Half-time = 150 msec



Acute Severe AR: M-Mode Premature closure of mitral valve

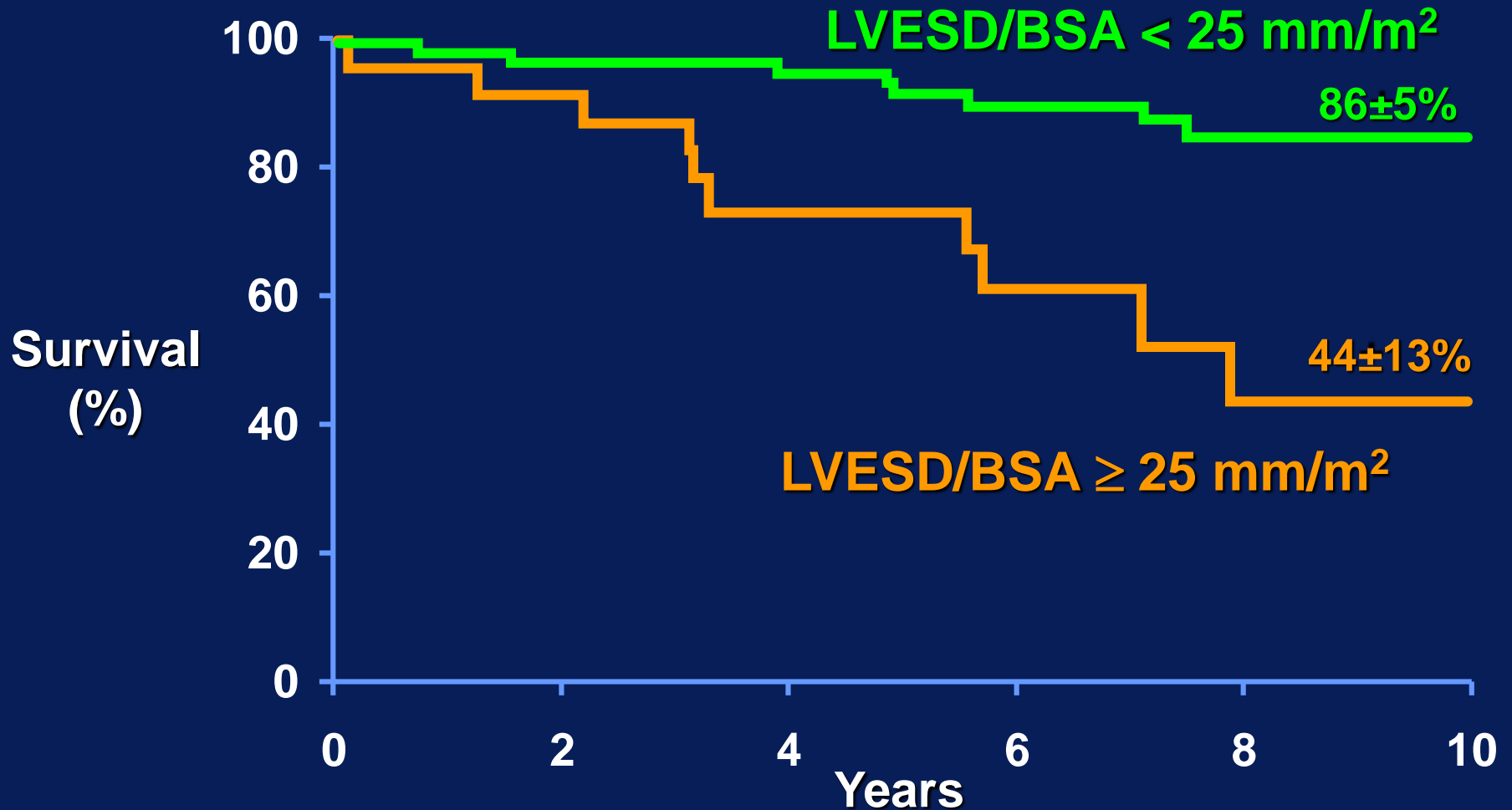


? Severity of Aortic Regurgitation

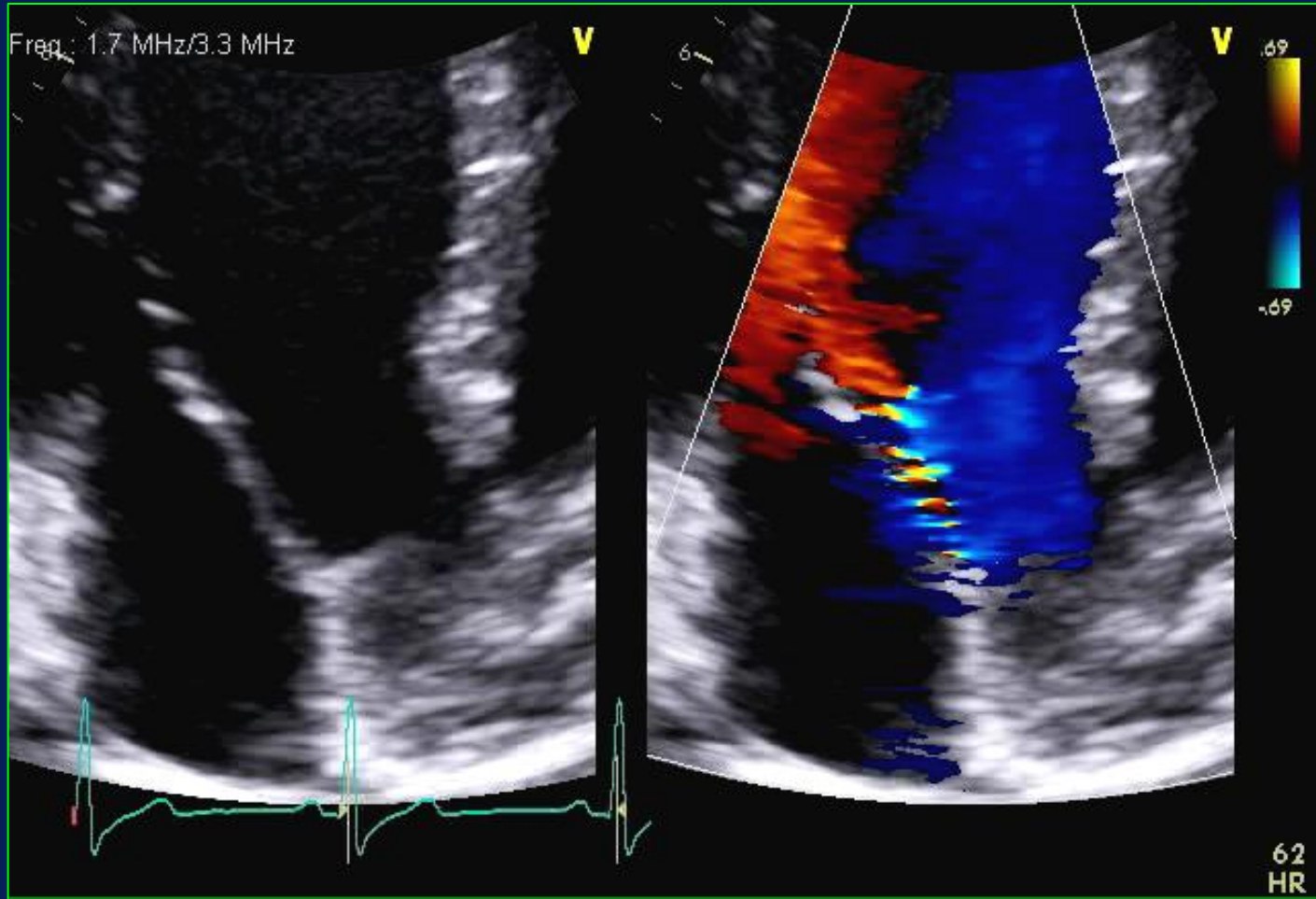


Chronic Aortic Regurgitation

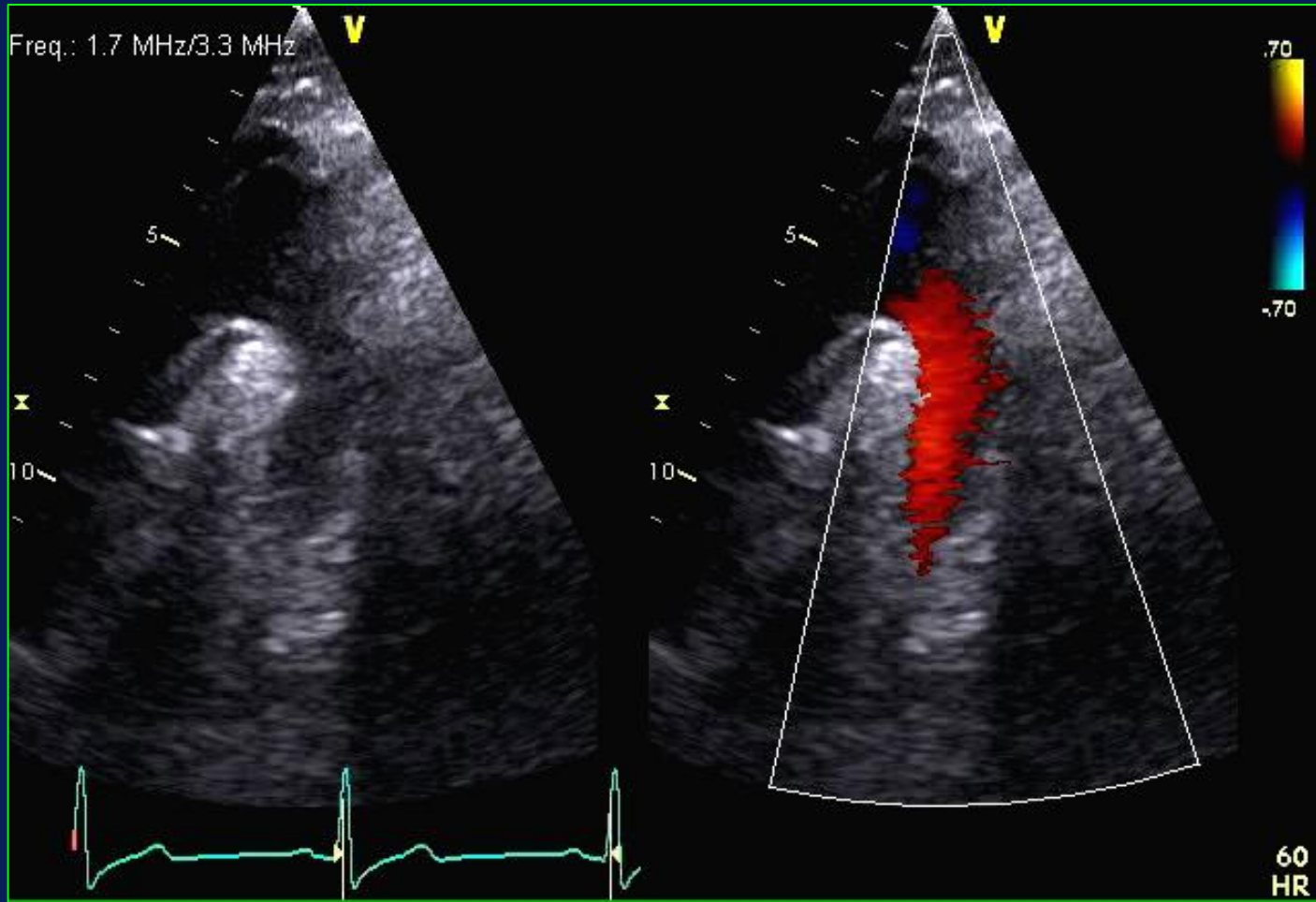
LV End-Systolic Dimension (LVESD) Index



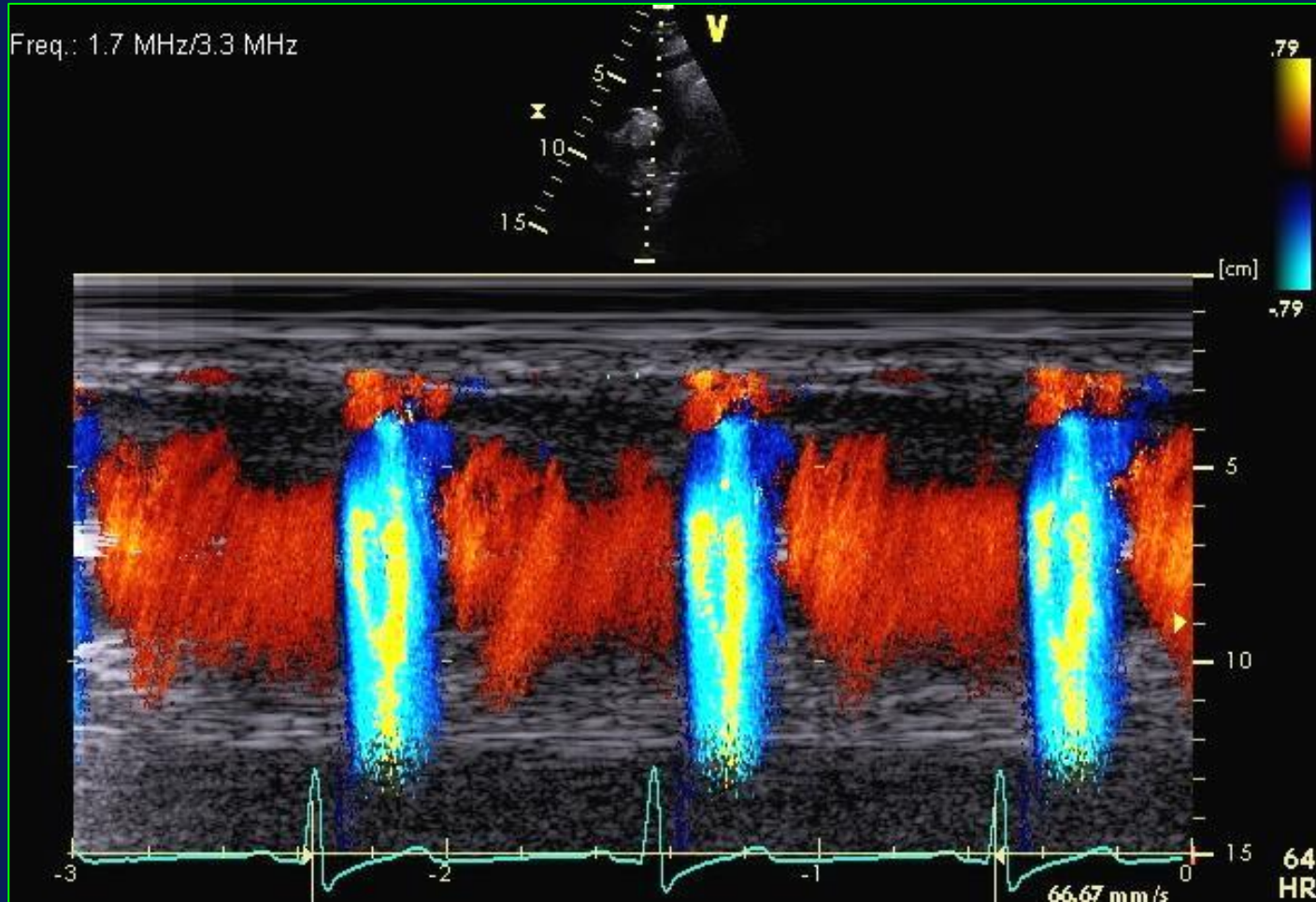
? Severity of Aortic Regurgitation



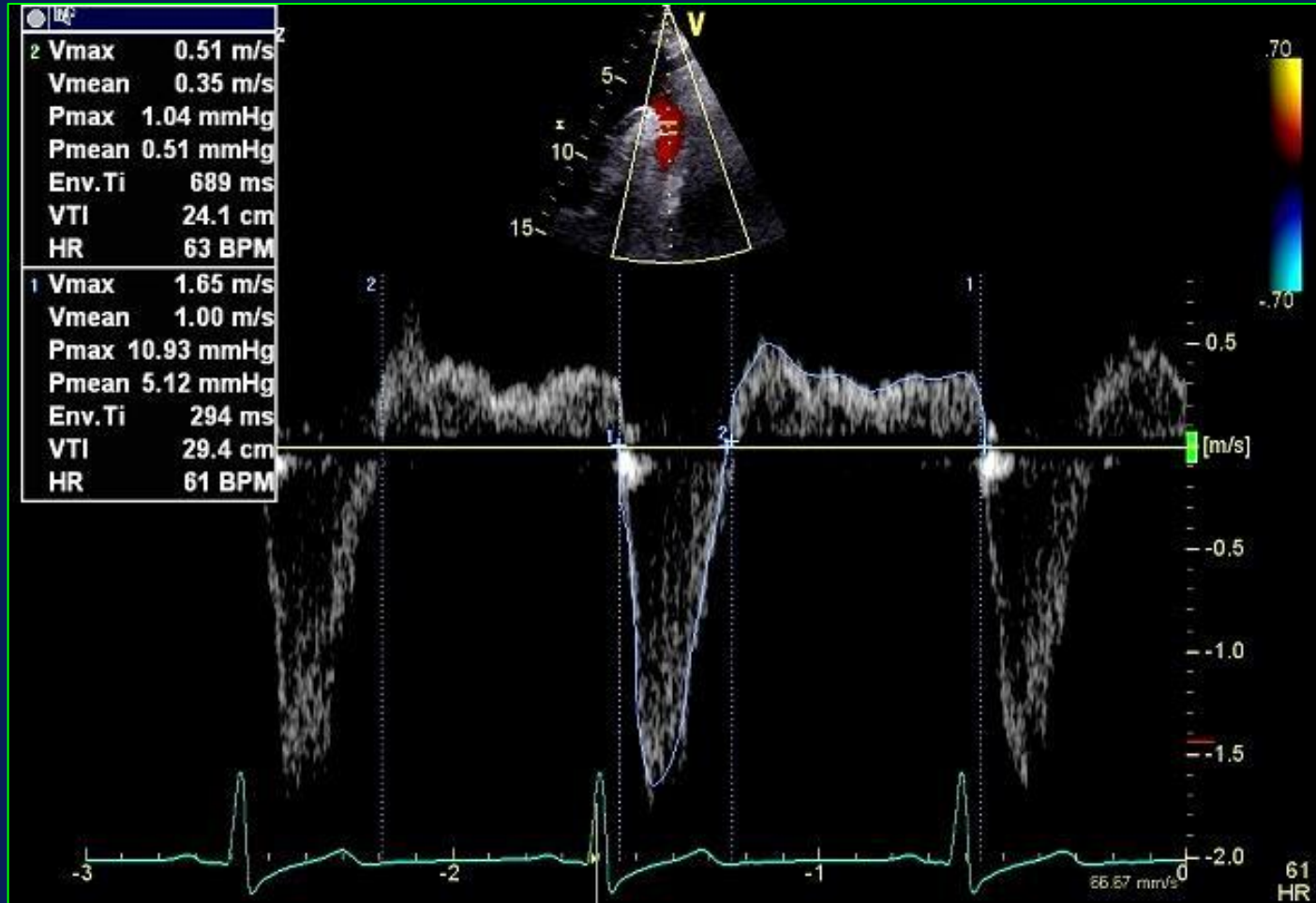
Descending aorta



Descending aorta: Color M-mode



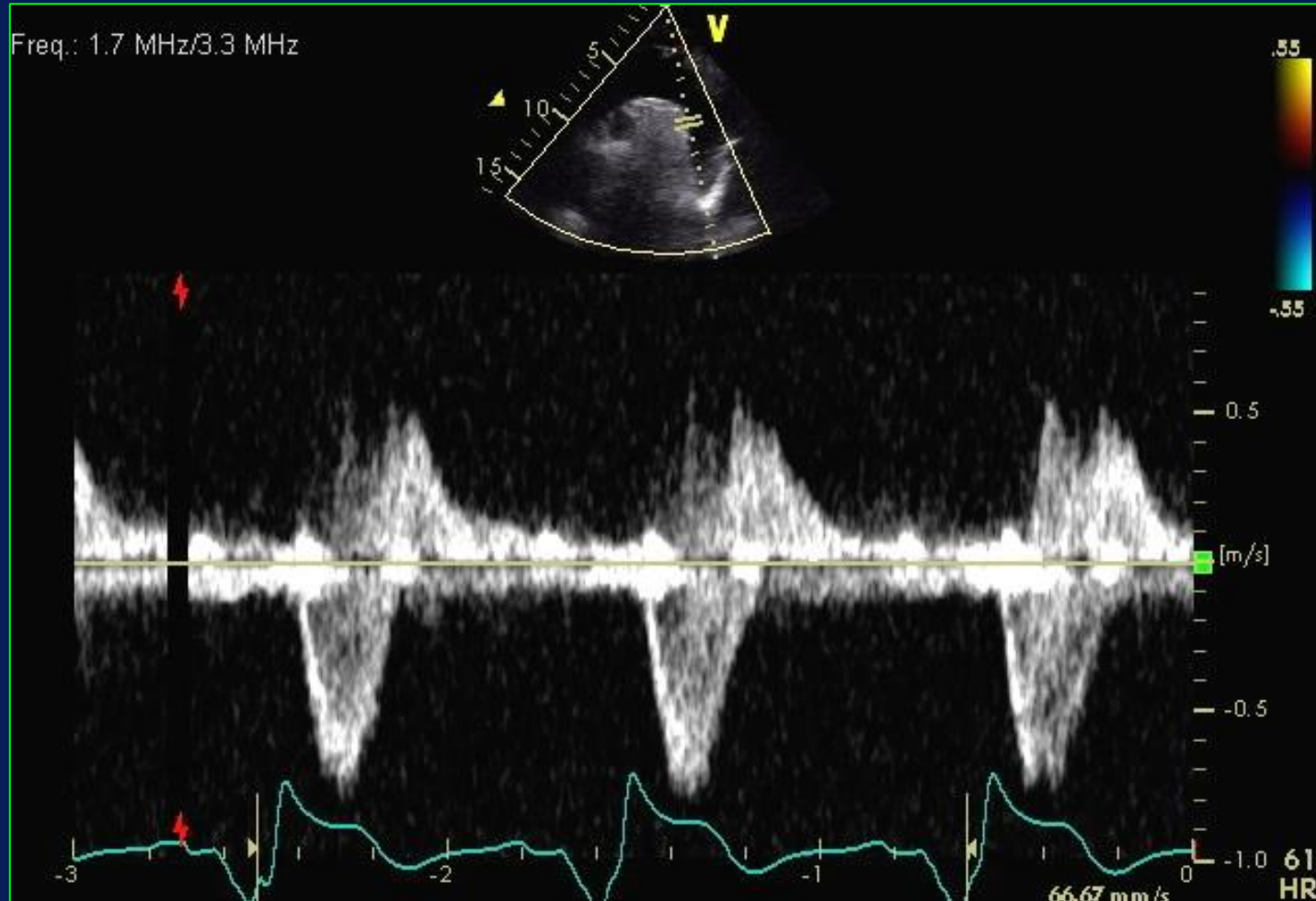
Descending aorta: Reversal TVI = 24 cm



Abdominal aorta: PW Doppler



? Diastolic flow reversals



Descending aortic eddy flow



Aortic Regurgitation (AR)

Evaluation by 2-D and Doppler Echo

- **Echocardiography remains the imaging modality of choice for the diagnosis of the mechanism and the quantitation of severity of AR**
- **Careful application of the concepts of the continuity equation are needed for accurate quantitation of AR**
- **Quantitation of AR is the sum of all 2-D and Doppler data, not a single parameter**