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Ventricular septal defect as casual finding in non-invasive CT-angiography

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A 69 year-old man with history of diabetes, hypertension, and dyslipemia was admitted to emergency department for evaluation of chest pain with non-diagnostic ECG and negative myocardial markers. Multidetector CT angiography was performed without showing any significant coronary stenoses. Moreover CT showed small ventricular septal defect (arrows) (Panel A, volume rendering reconstruction) (Panels B and C, maximum intensity projection reconstruction). No interventricular shunt was demonstrated with colour doppler echocardiography. Only with Ultrasound contrast (Sonovue®) the shunt became patent (Panel D). Patient remains asymptomatic on medical therapy with ACE inhibitors and statins.

This case illustrates the importance of using reconstructions protocols not only for the study of coronary arteries morphology but also for other cardiac structures that are included in the same acquisition.

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