

Retour

Veineux

Pulmonaire

Anormal

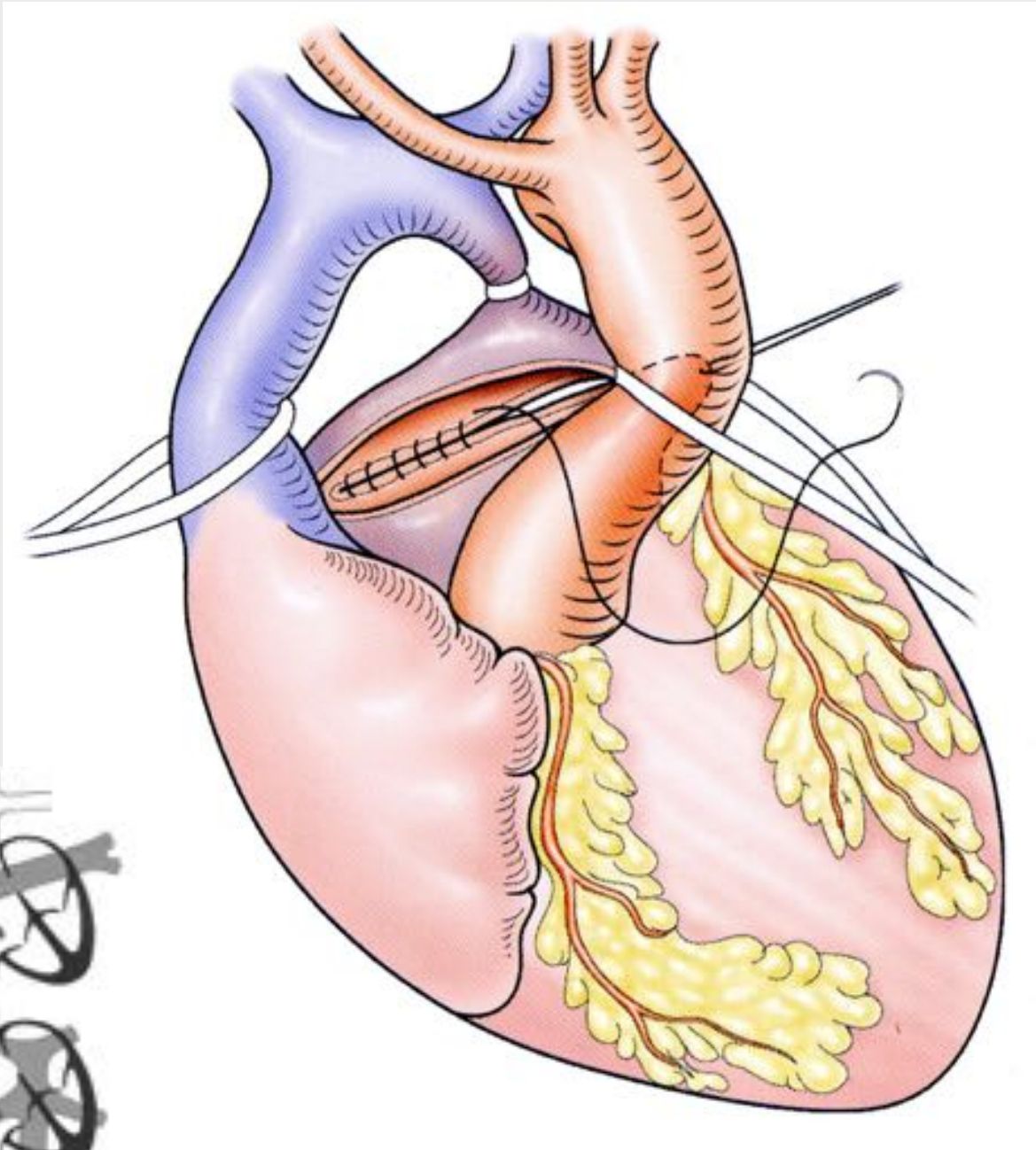
Total

# 1/ Technique de CEC

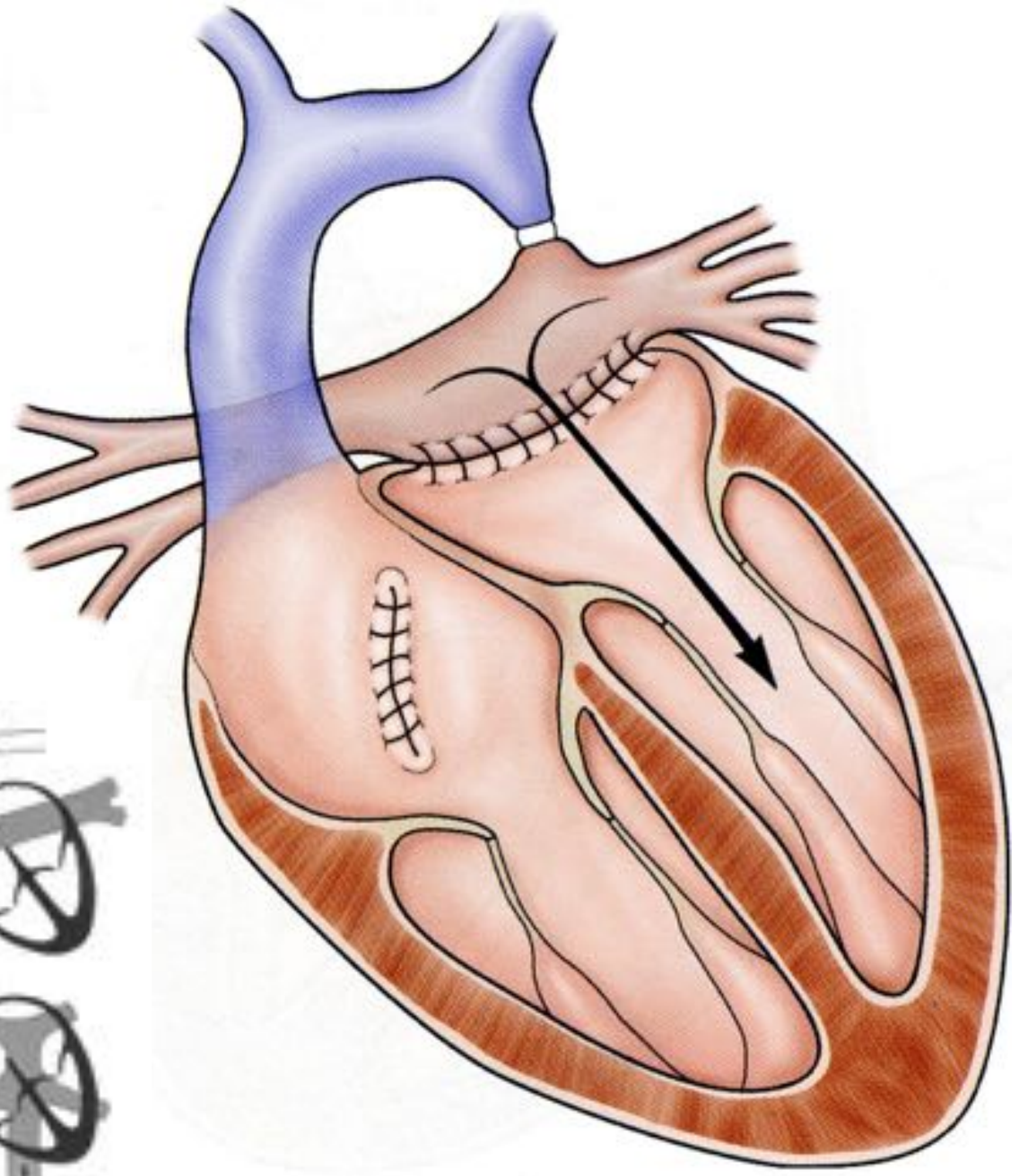
- arrêt circulatoire hypothermique
- CEC normothermique
  - cardioplégie sanguine chaude
  - sauf petit poids ( $< 2$  kg)

## 2/ Technique chirurgicale

- créer communication collecteur-OG
  - la plus large possible
  - technique variable / type RVPAT

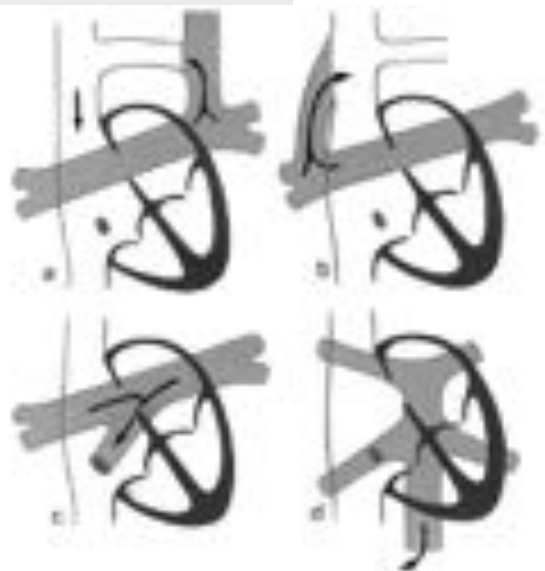
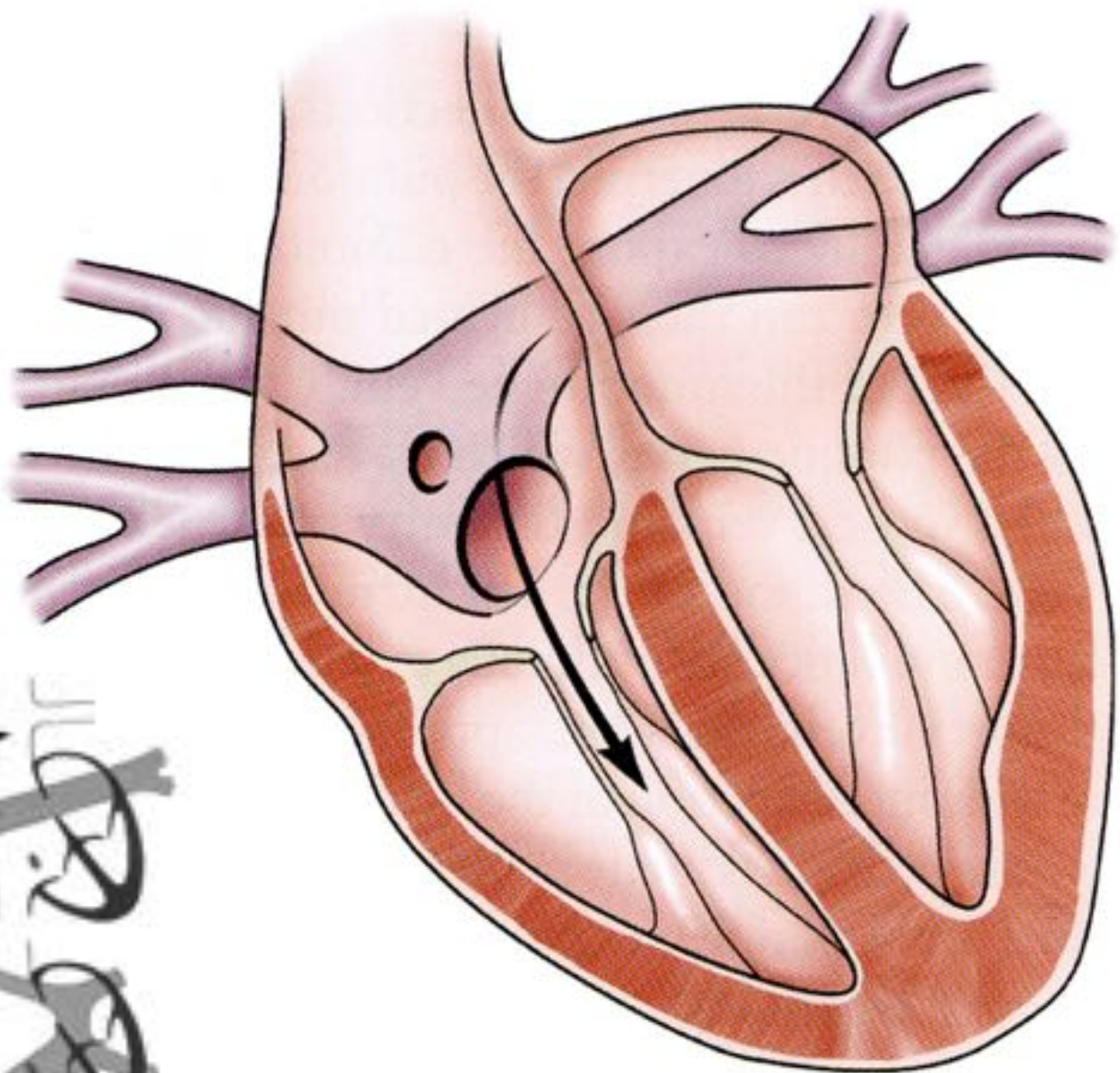


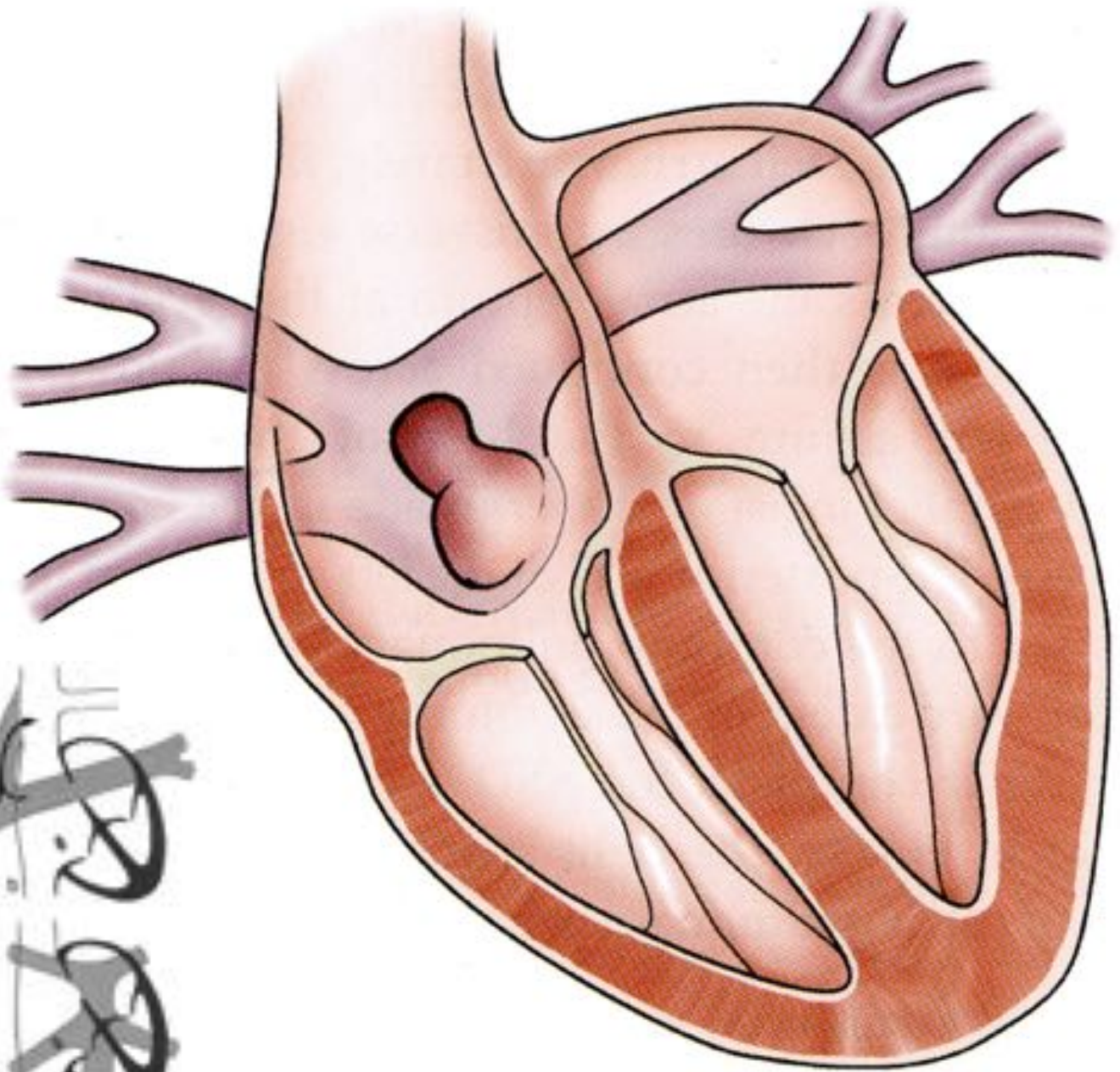
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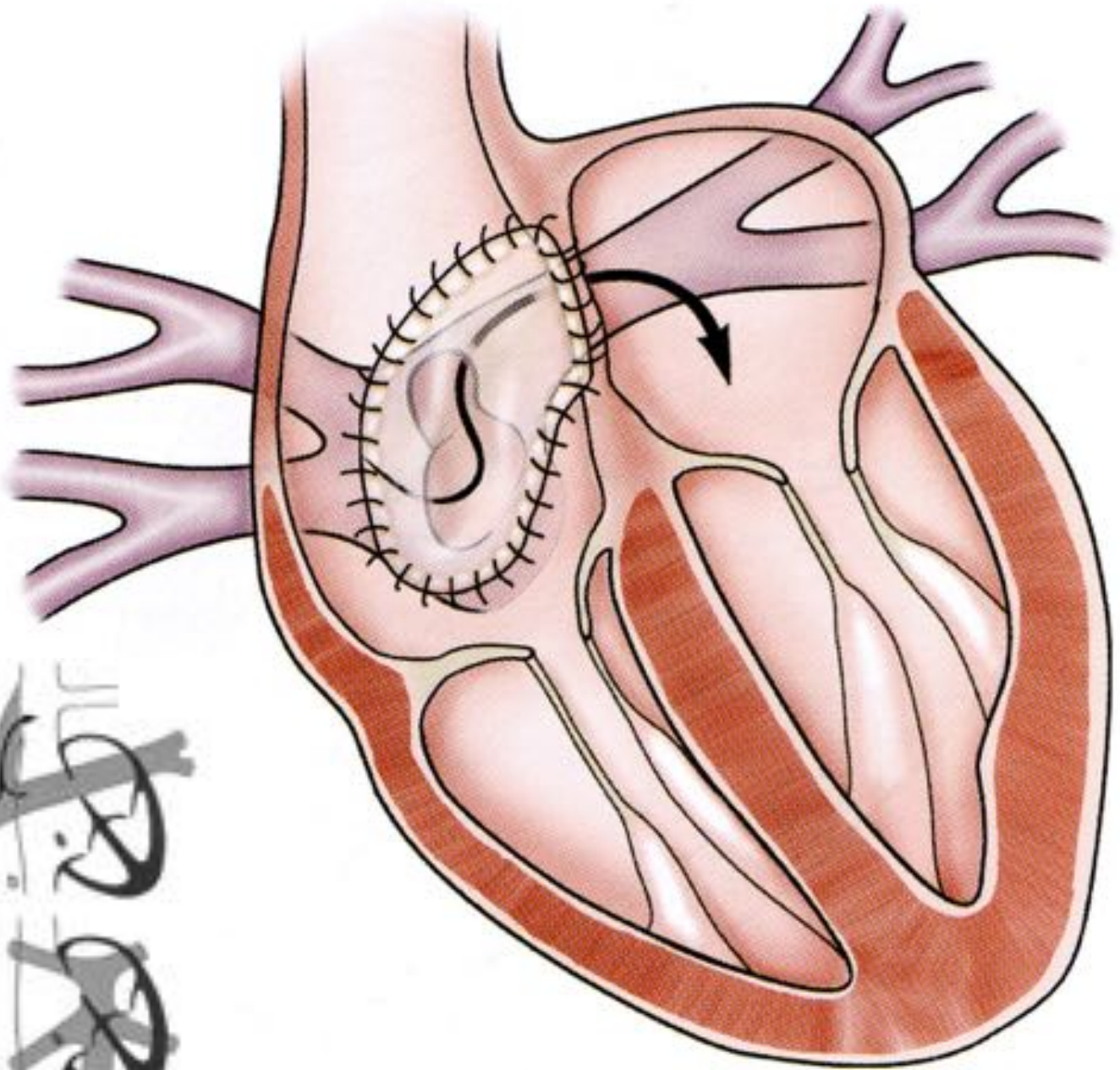
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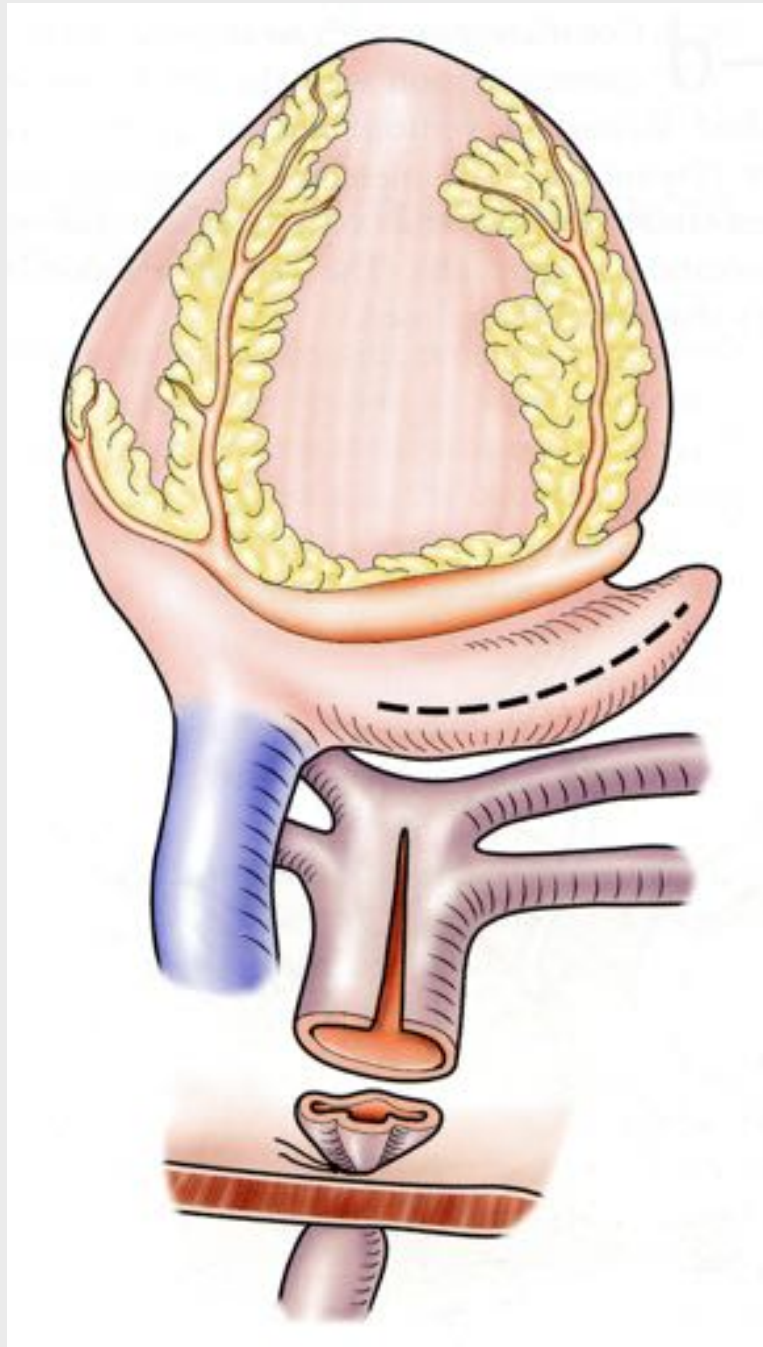
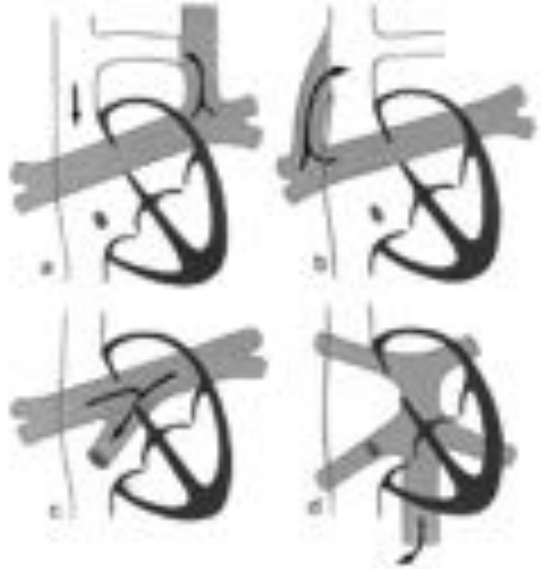
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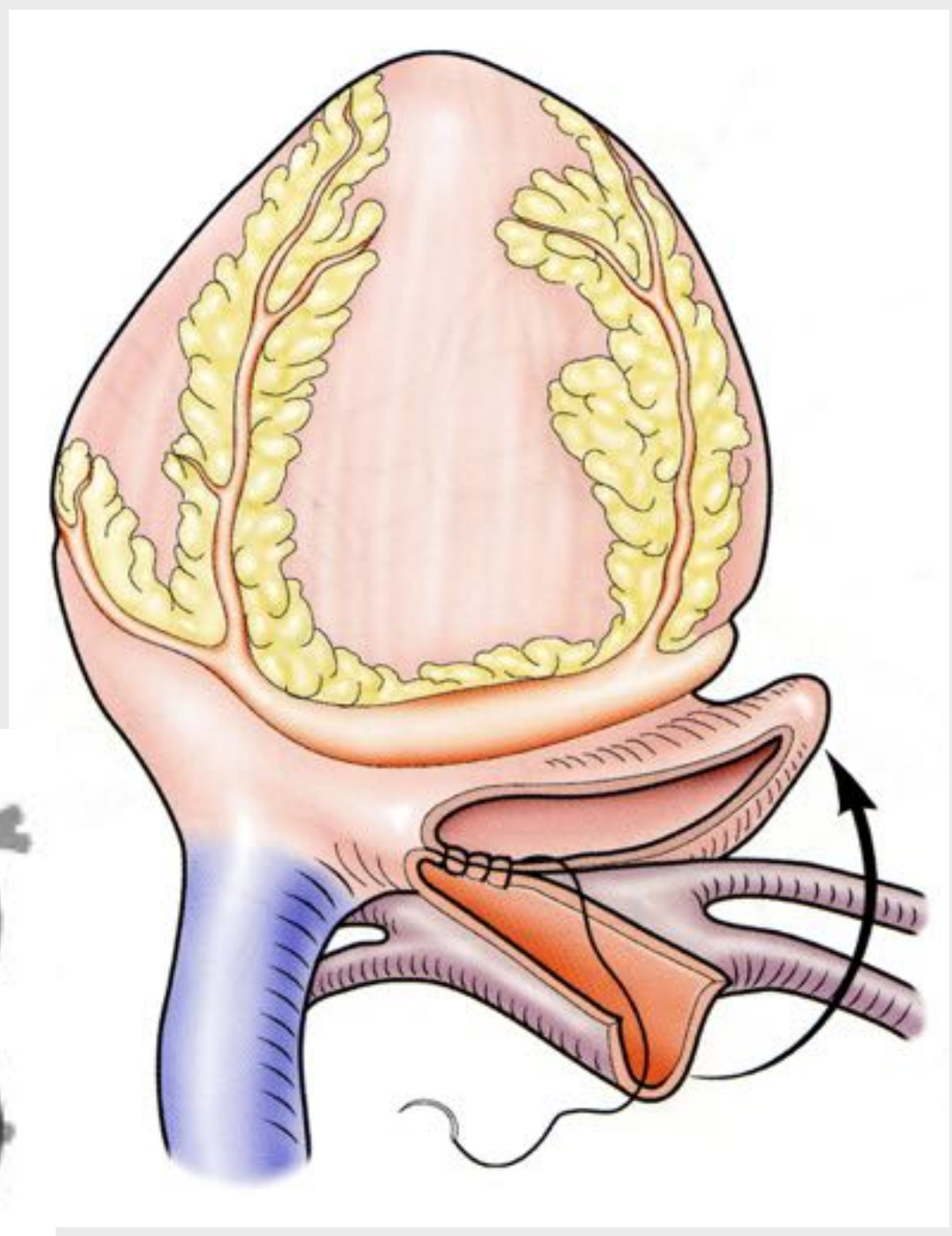


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### 3/ Technique chirurgicale

- laisser CIA calibrée
  - G/D : VG petit
  - D/G : crise d' HTAP
- prévenir HTAP
  - cathé AP
  - laisser collecteur ouvert ?
  - CEC normothermique

## 4/ Complication chirurgicale

- **précoce** : obstruction anastomotique
  - détectée par échocardiographie
  - réintervention immédiate
- **tardive** : obstruction veineuse pulmonaire
  - anastomotique
  - veineuse pulmonaire
    - maladie préalable ?
    - traitement difficile

