

Retour

Veineux

Pulmonaire

Anormal

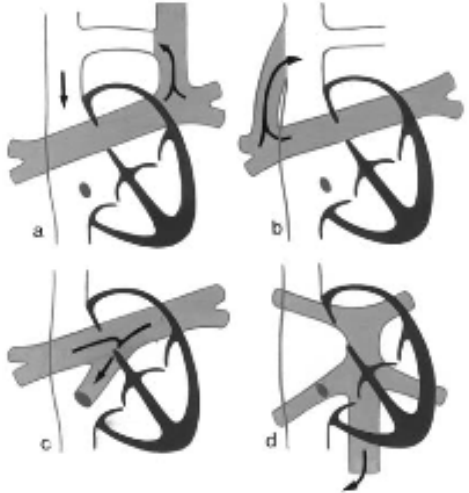
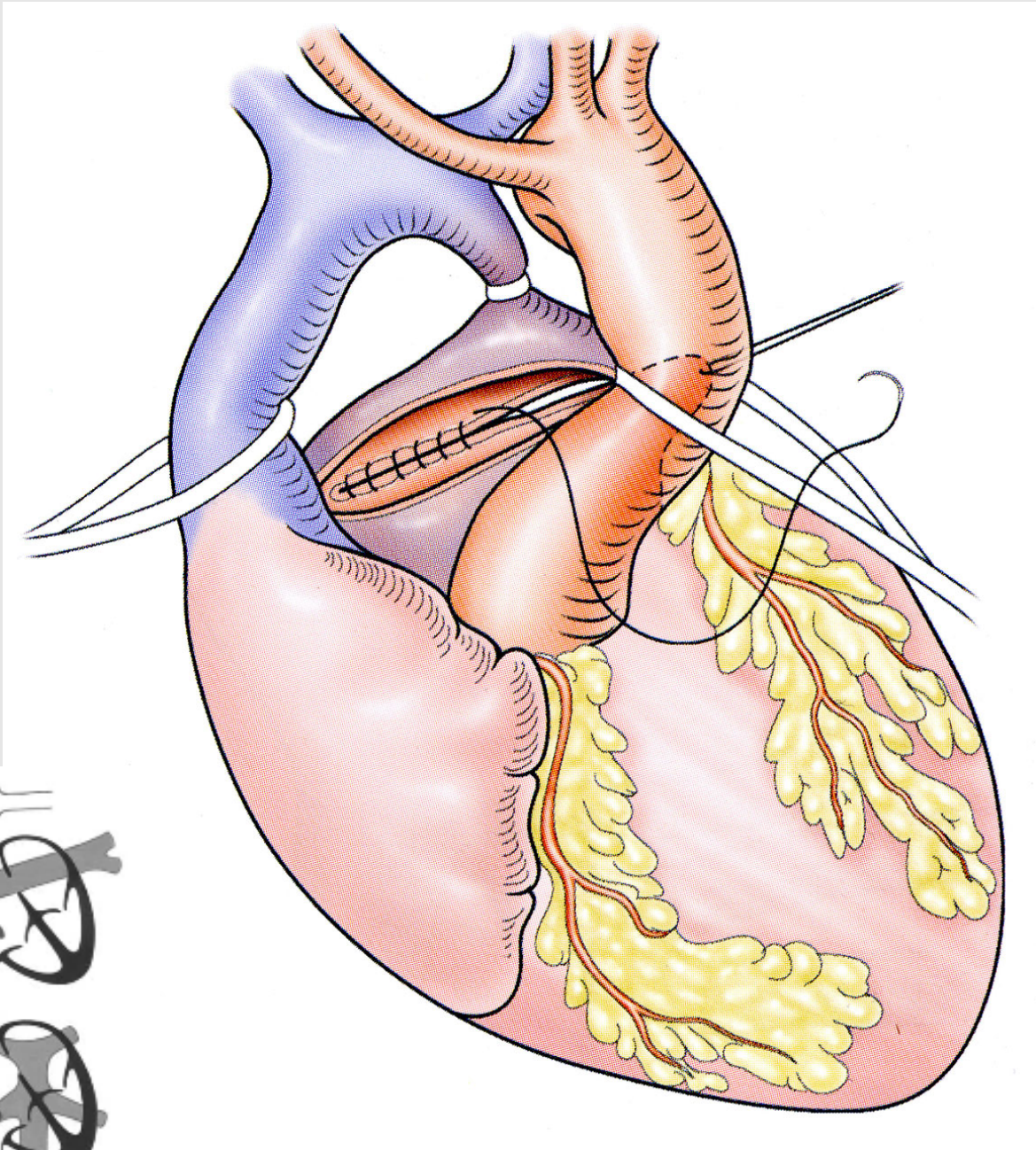
Total

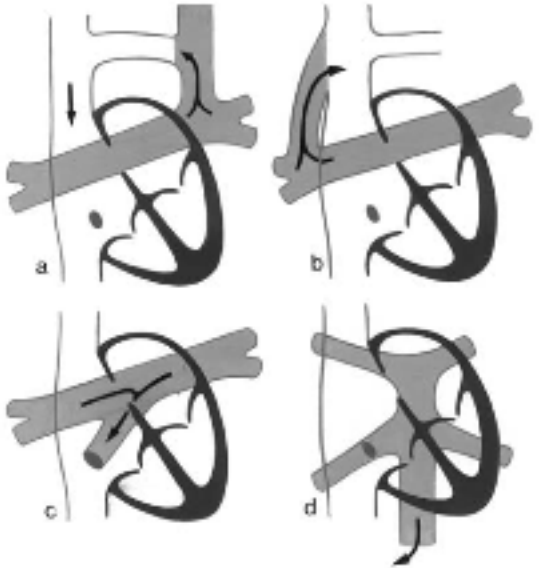
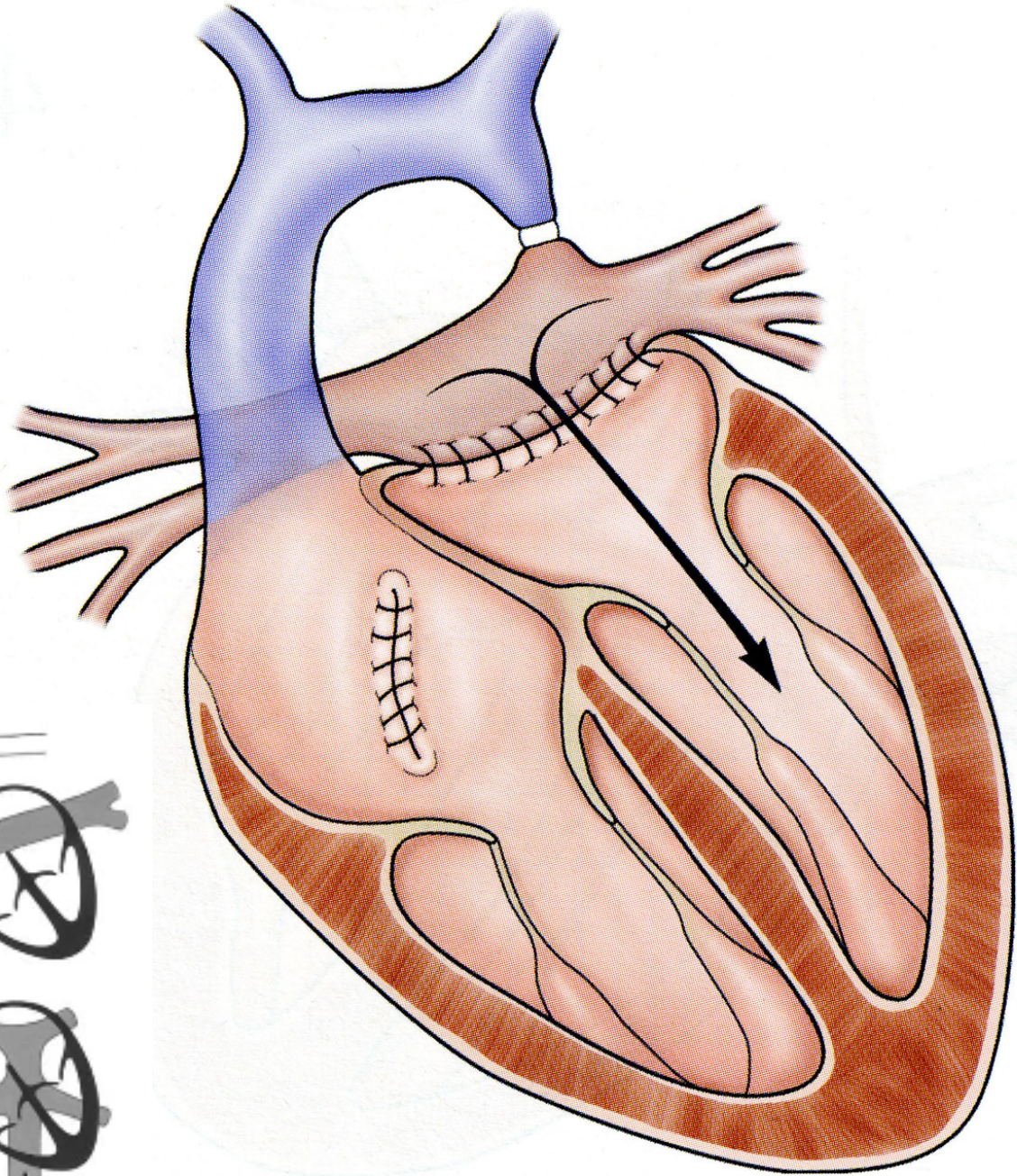
# 1/ Technique de CEC

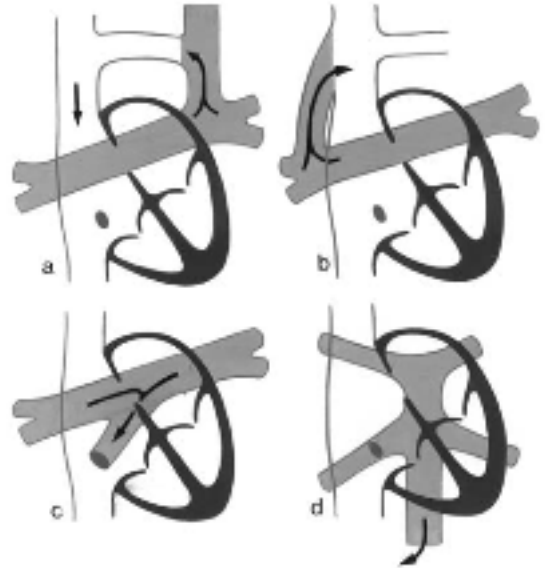
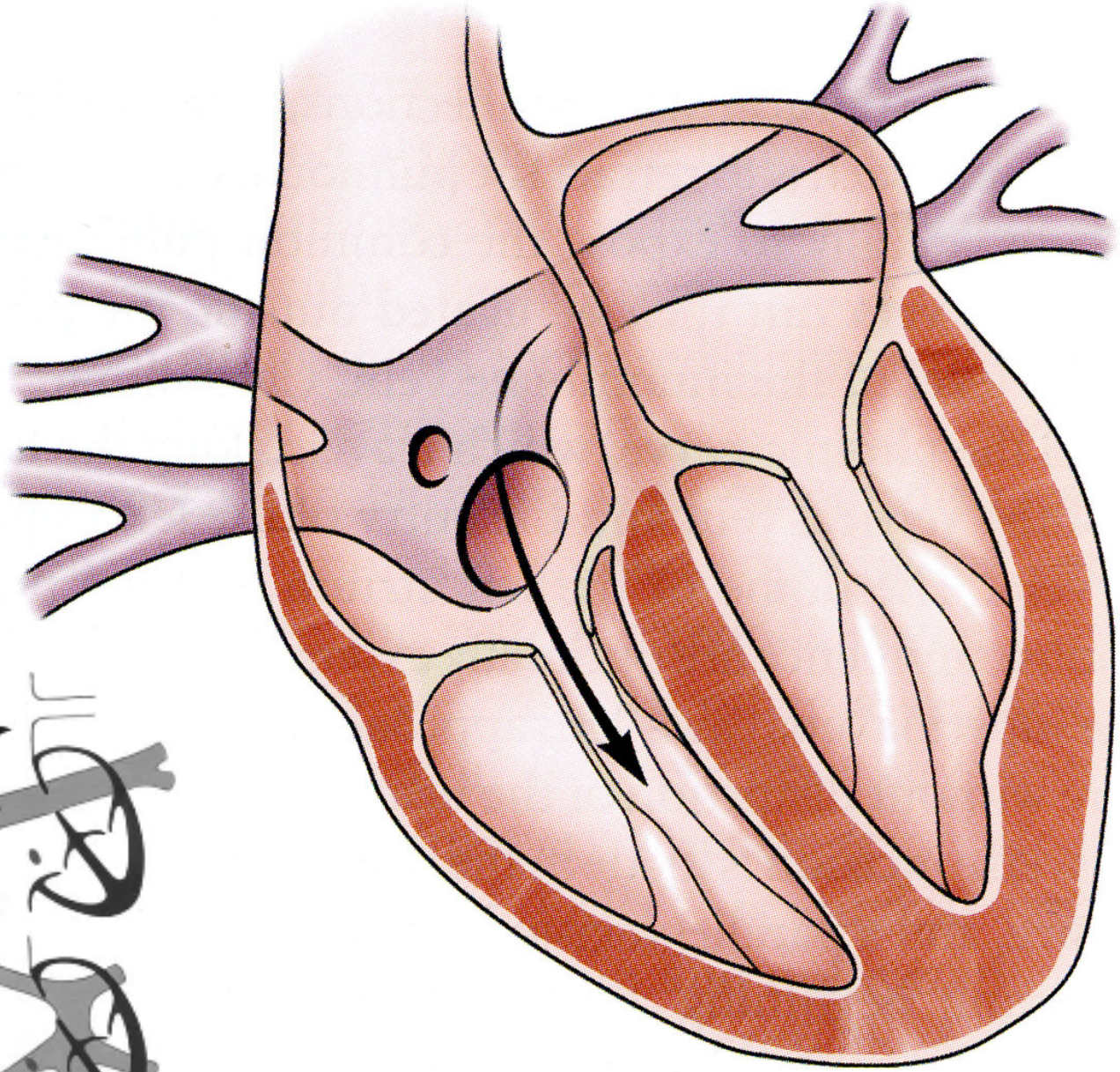
- arrêt circulatoire hypothermique: --
- CEC normothermique: ++
  - cardioplégie sanguine chaude
  - sauf petit poids (< 2 kg)

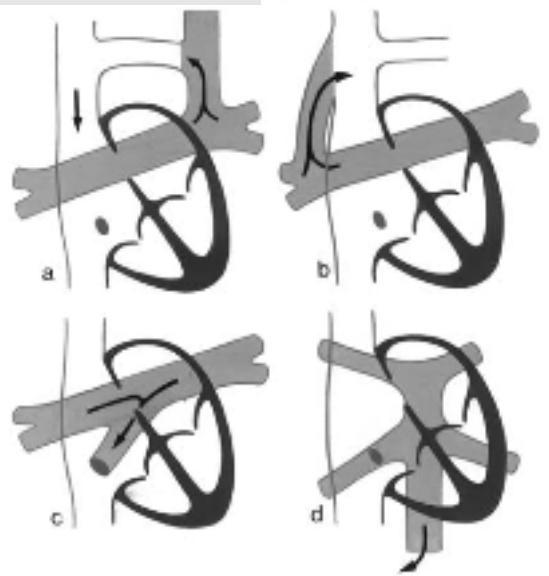
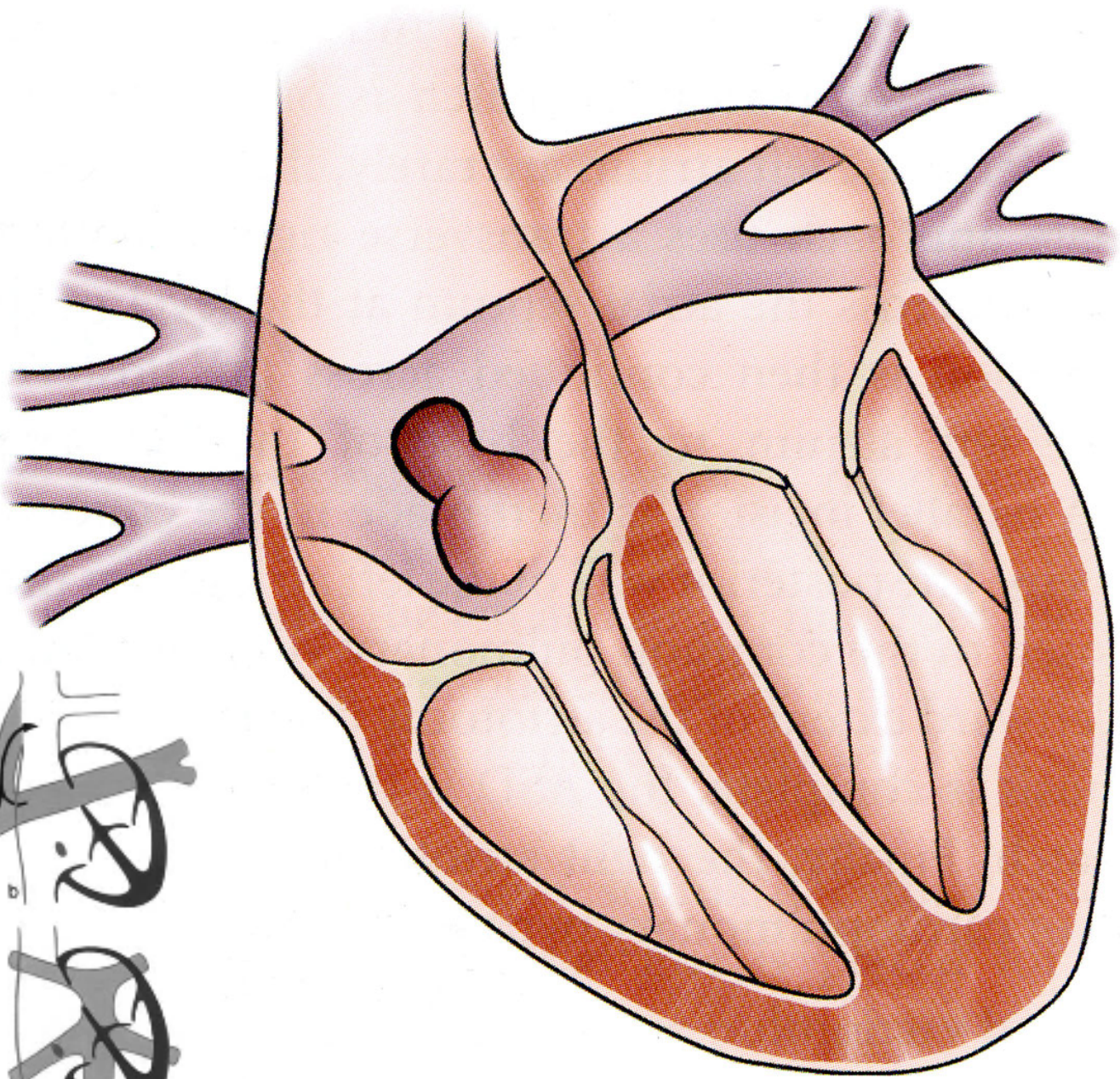
## 2/ Technique chirurgicale

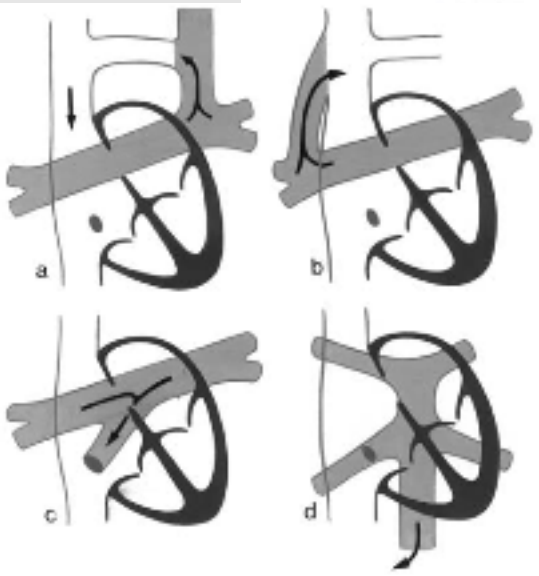
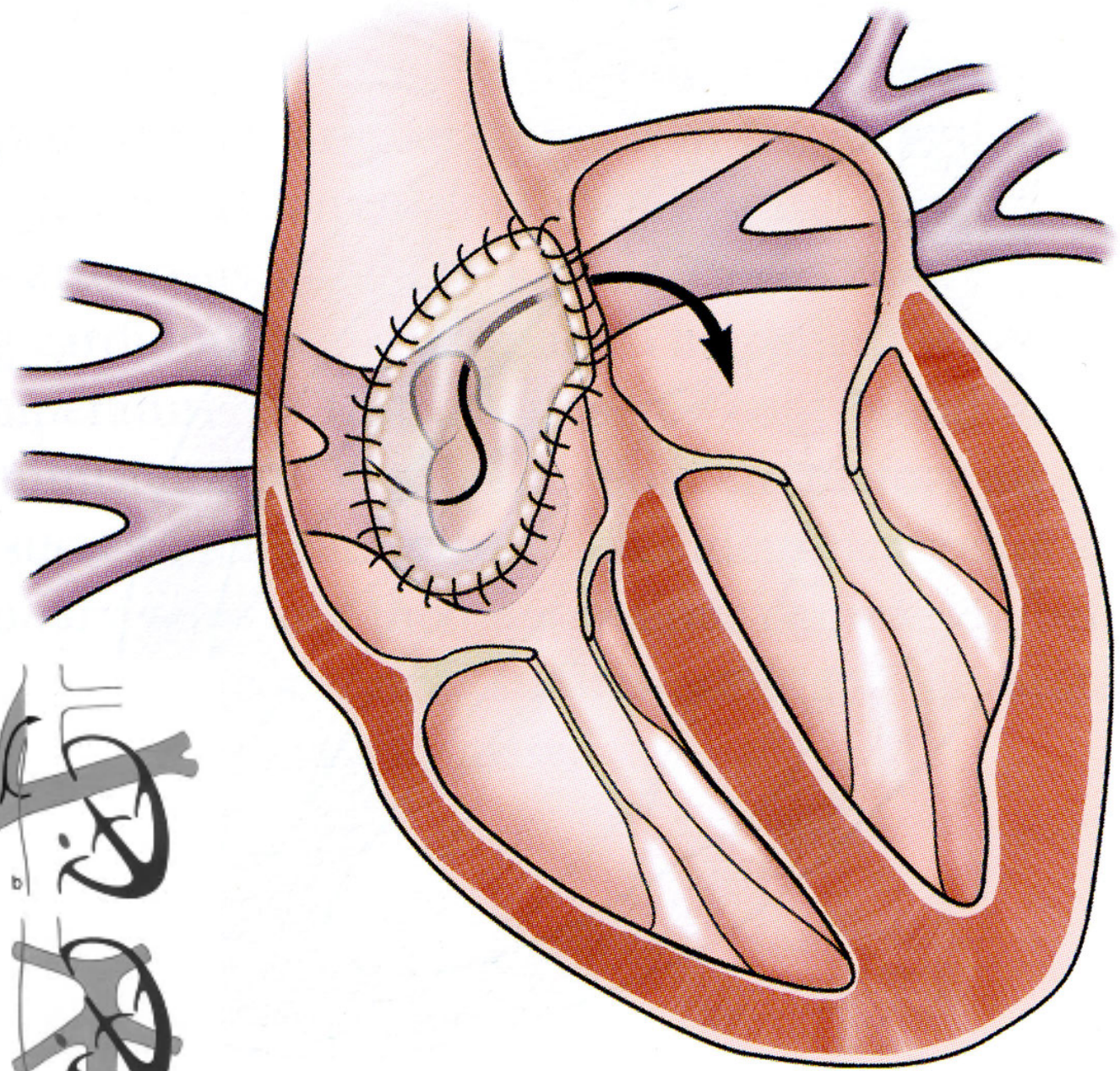
- créer communication collecteur-OG
  - la plus large possible
  - technique variable / type RVPAT

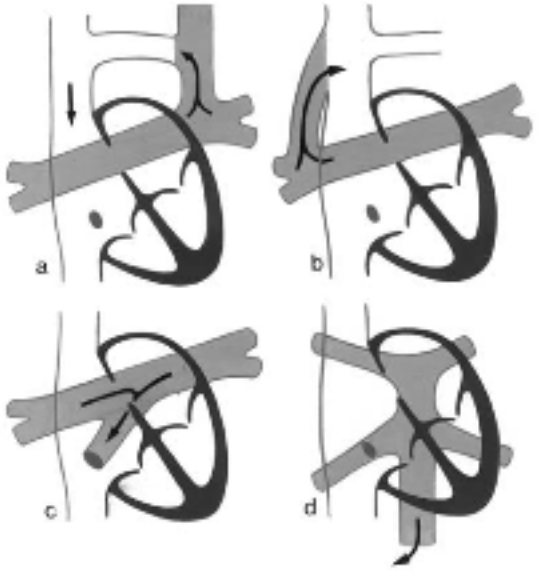
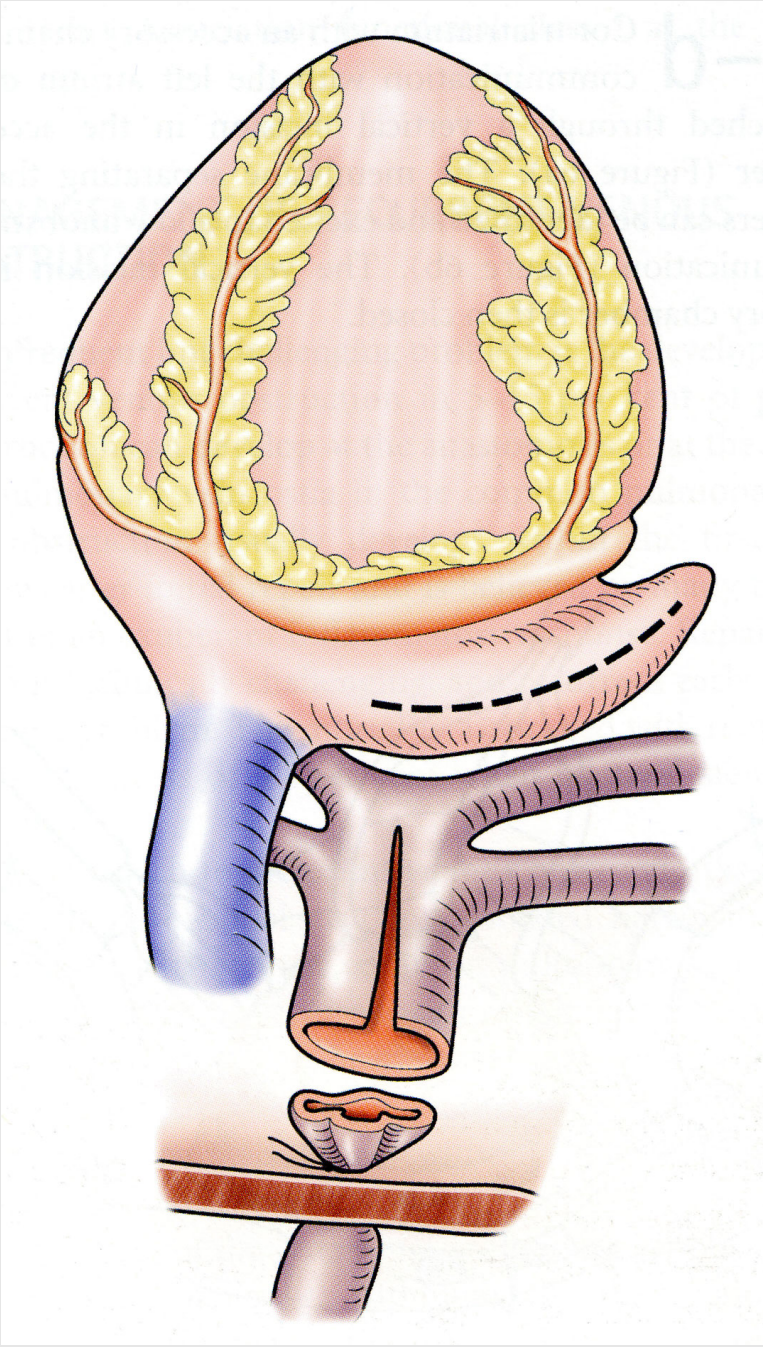


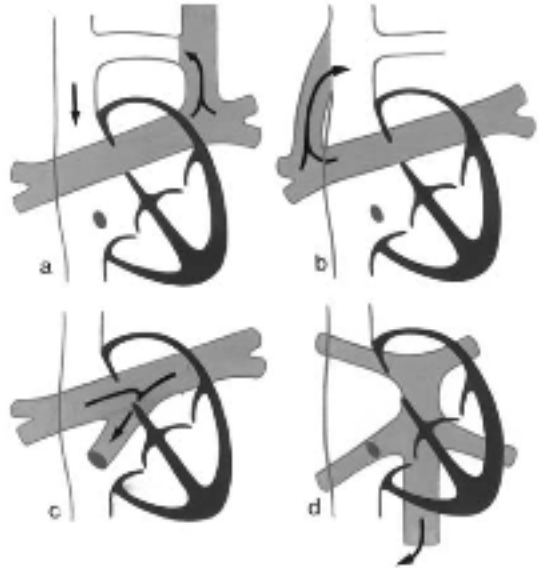
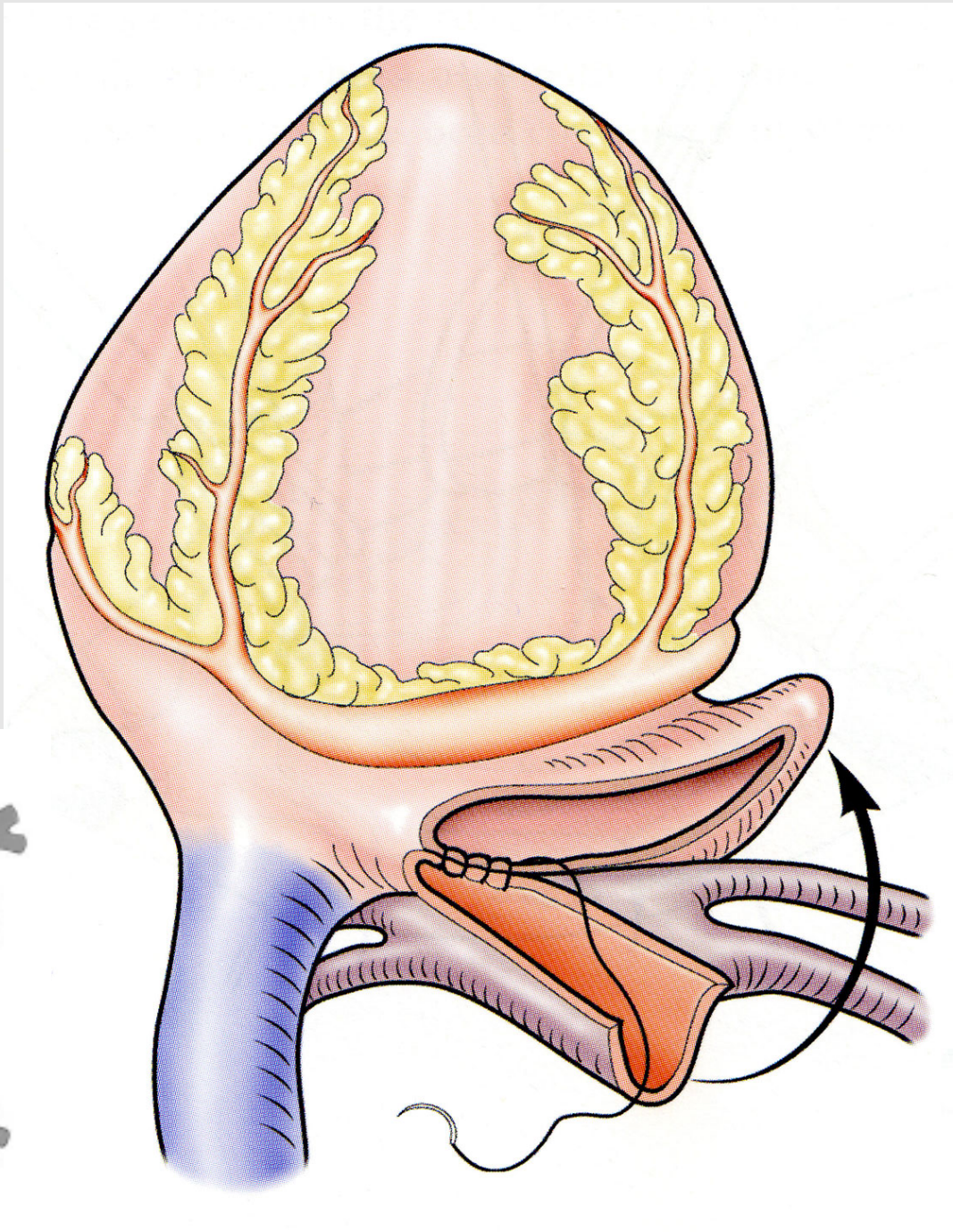


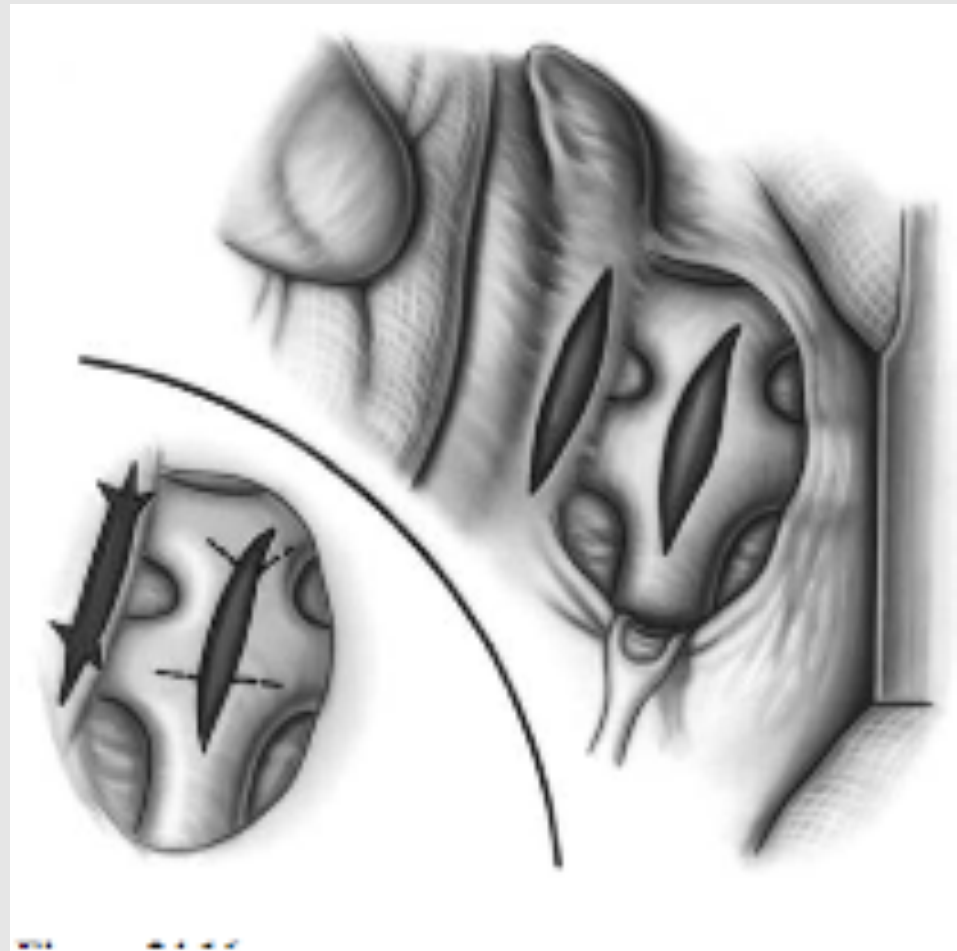












### 3/ Technique chirurgicale

- 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

