



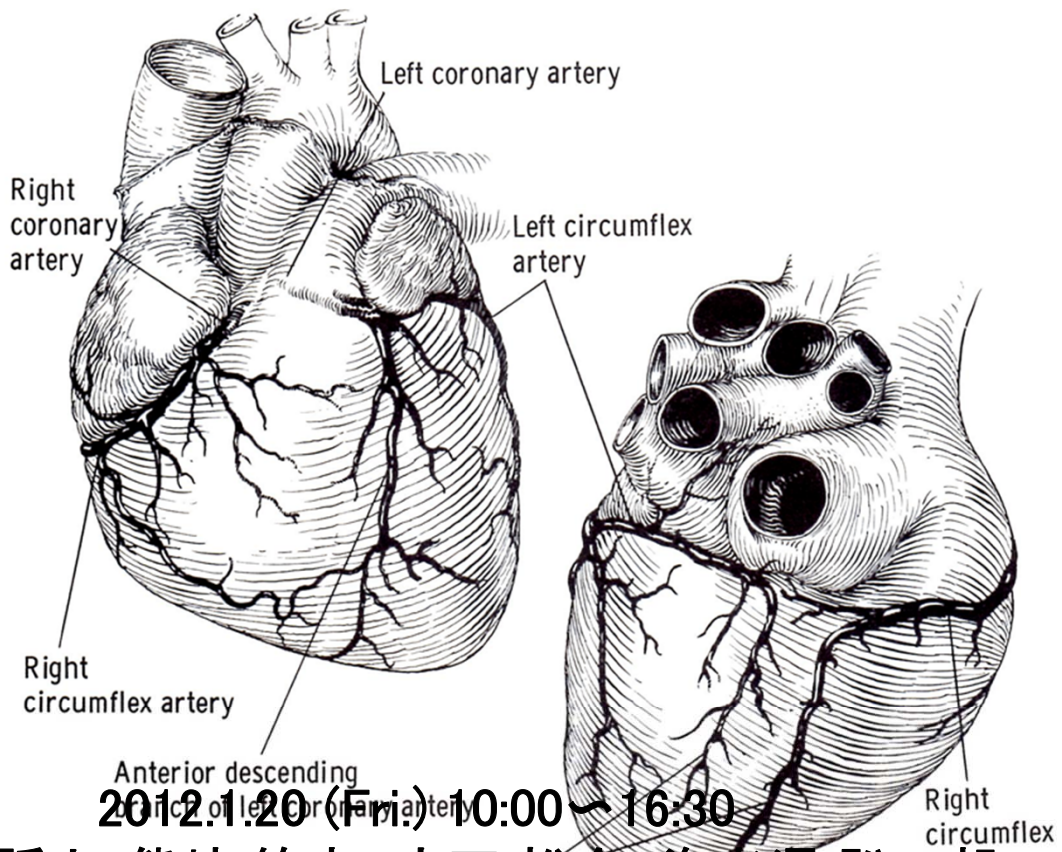
LOCALIZATION OF MYOCARDIAL INFARCTION BY ELECTROCARDIOGRAPHIC PATTERNS

第1回信大PCIライブ

By understanding the electrocardiographic patterns in specific leads of the electrocardiogram, one can localize anatomically the site of the infarction. In order to have a clear understanding of this, it will be wise to review briefly the anatomy of the coronary circulation.

The blood supply to the heart is derived from the left and right coronary arteries, which arise from the left and right aortic sinuses, respectively. Shortly after its origin, the left coronary artery divides into the left anterior descending and the left circumflex arteries. The former supplies the anterior surface of the left ventricle, the medial portion of the anterior surface of the right ventricle, and the lower third of the posterior surface of the right ventricle. The remainder of the right ventricle is supplied by the right coronary artery. The left circumflex artery supplies the lateral wall and the lower (apical) half of the posterior wall of the left ventricle. The upper (basal) half of the posterior wall of the left ventricle is supplied by the right coronary artery.

The S-A node is supplied by the right coronary artery in 60 to 75% of individuals. The A-V node is supplied by a branch of the right coronary artery in 90%. Both bundle branches are supplied by branches from both coronary arteries.



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会場: 信州大学附属病院 新外来棟4階 大会議室

病院関係者は参加費無料、当日参加可能

主催: 信大病院『チーム動脈硬化・血管内治療』プロジェクト

協力: 信州大学循環器内科、閉塞性動脈硬化症先端治療学講座、
心臓血管外科、中央放射線部