



Aortic translocation (Nikaidoh type) in patients with coronary anomaly

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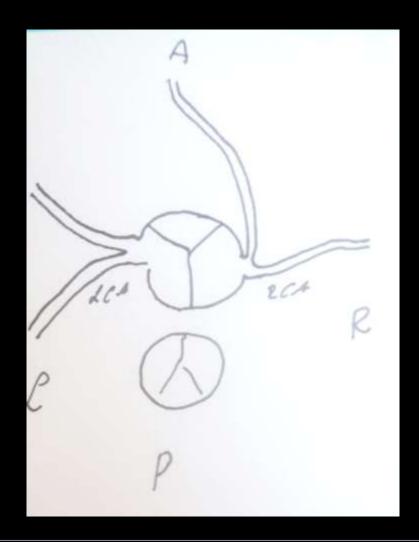




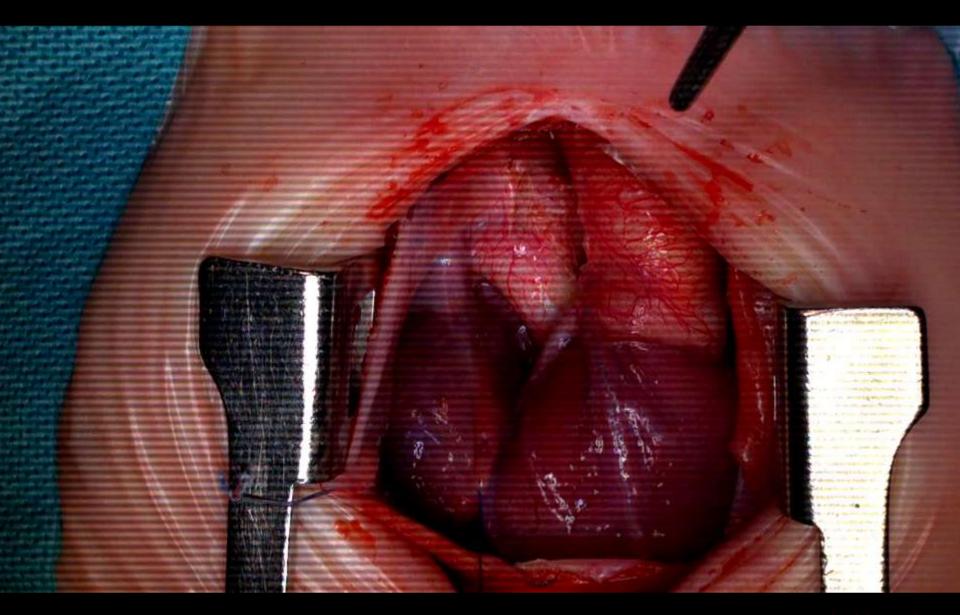




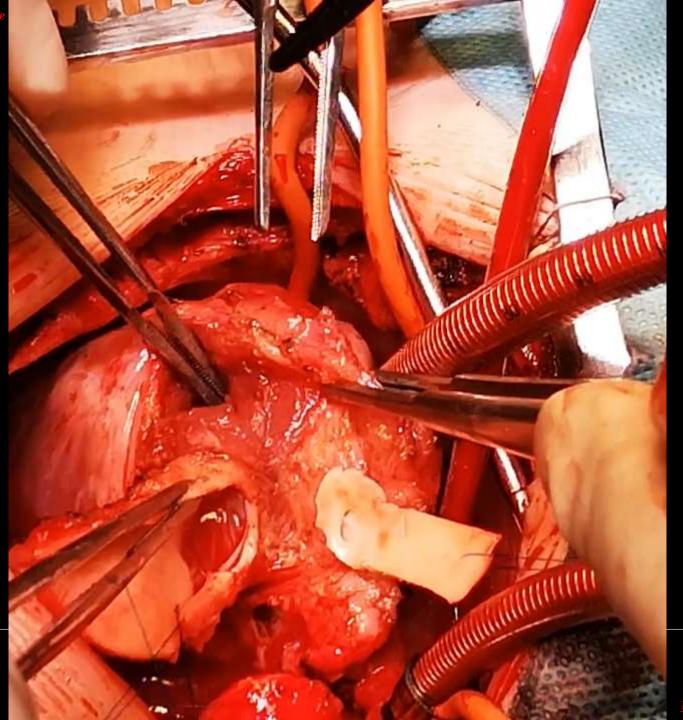
Case I



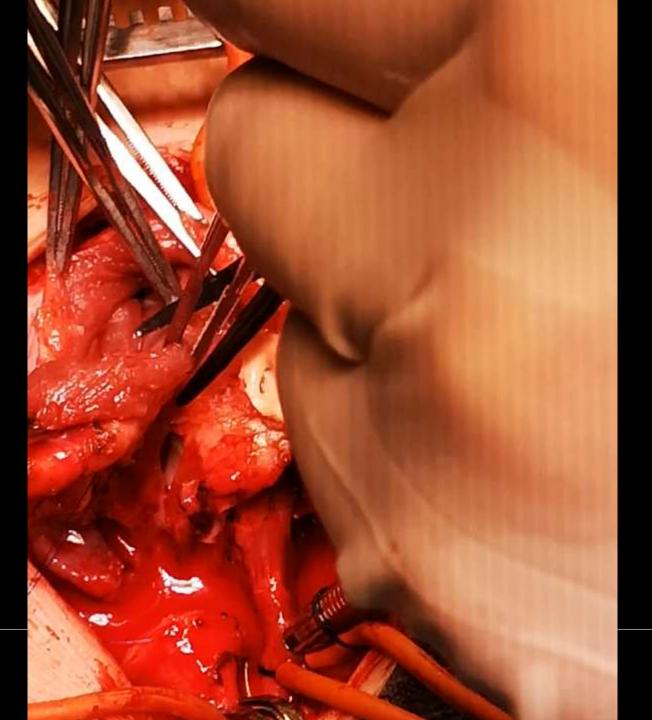




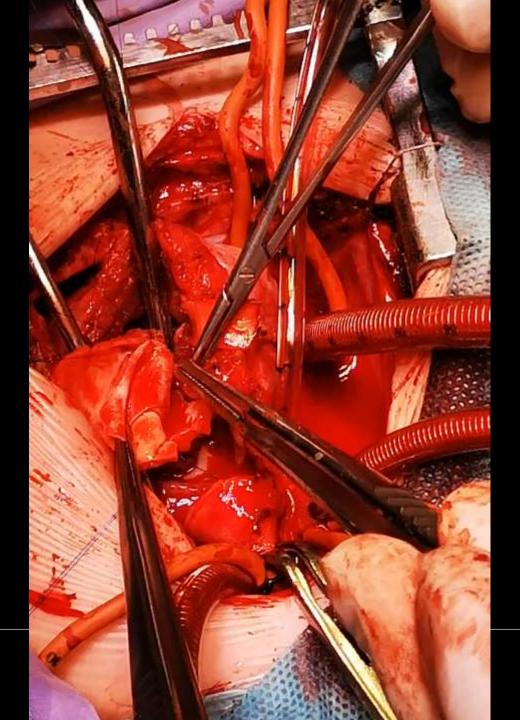








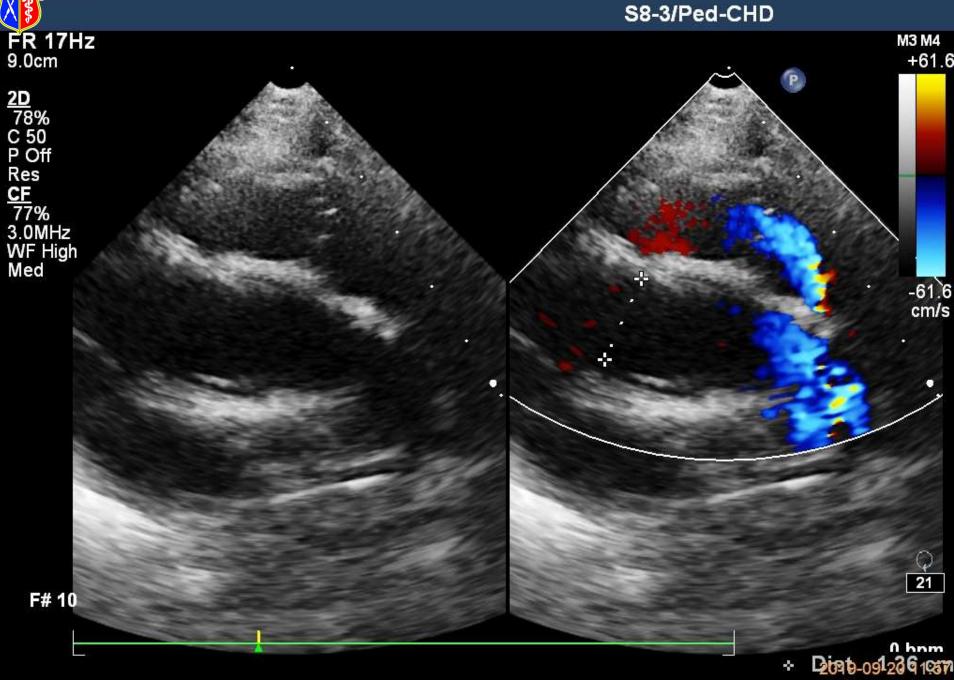










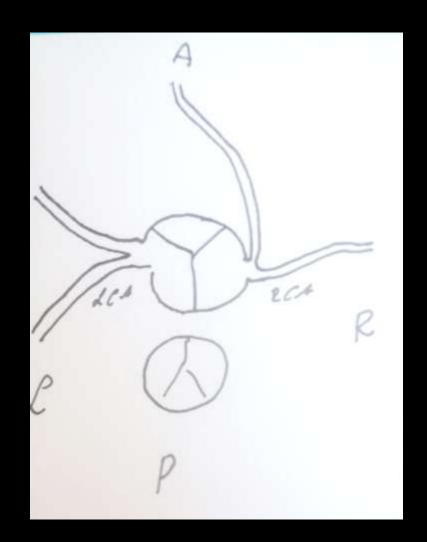






Case I

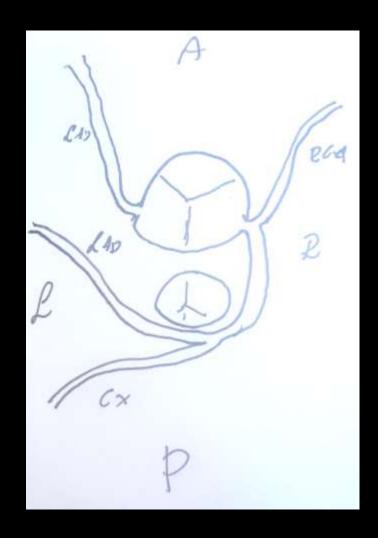
Coronary arteries were harvested and reimplanted with patch augmantation of RCA ostium



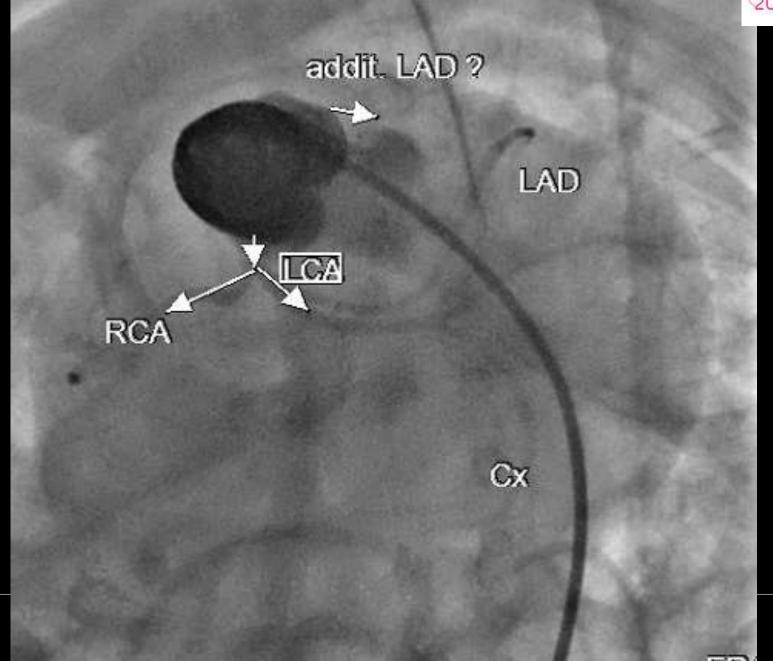




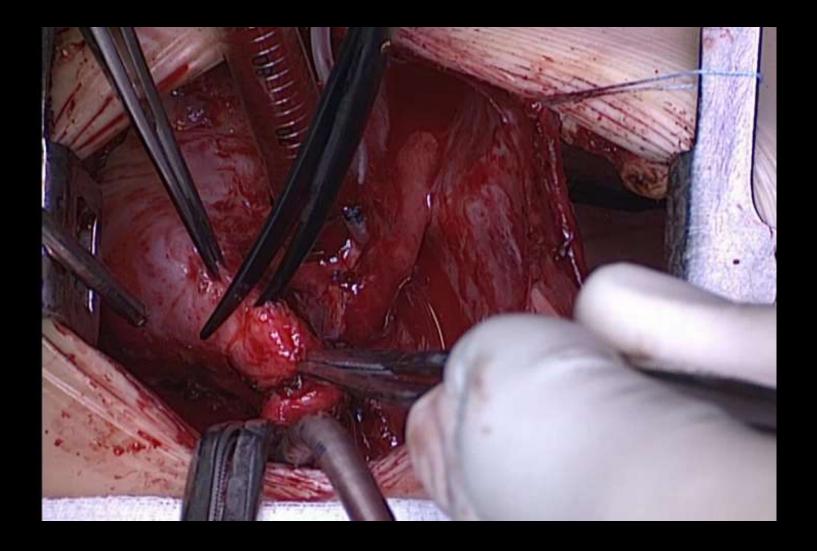
Case II



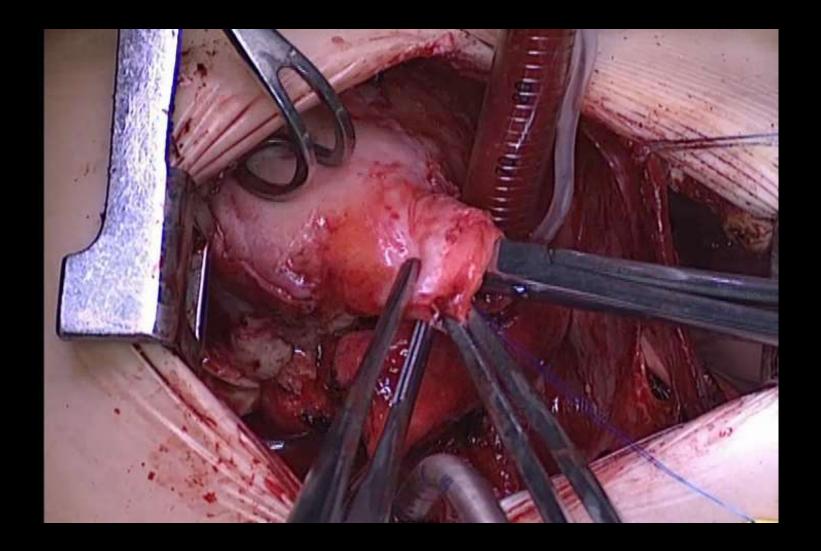




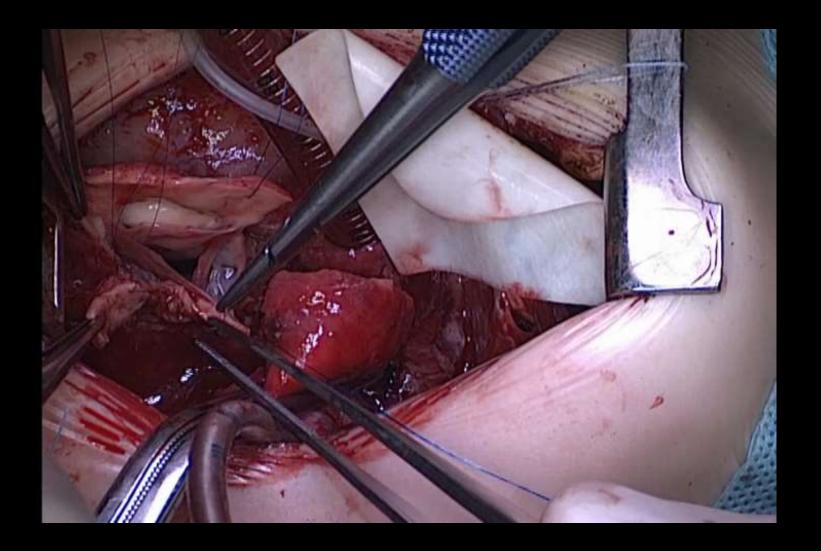




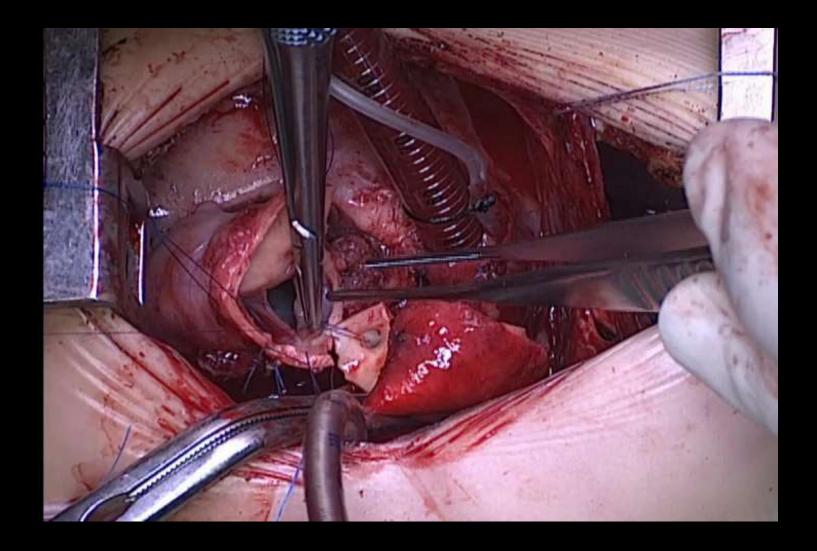




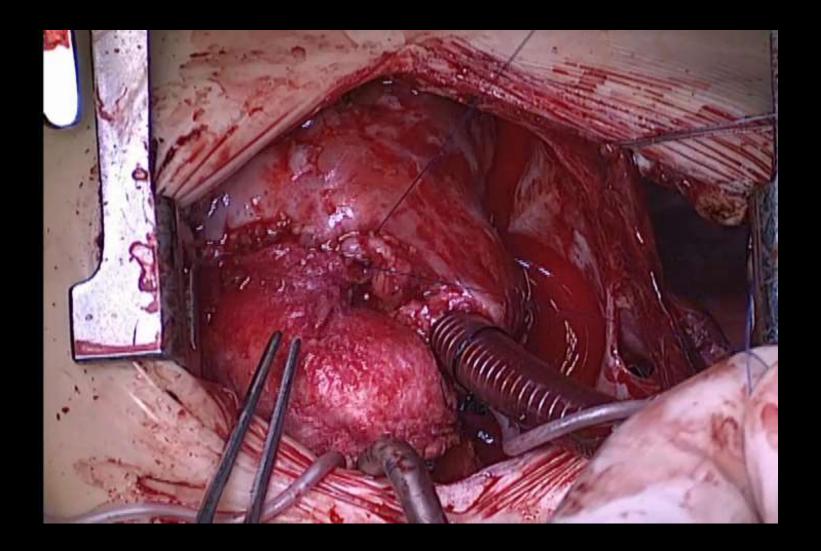










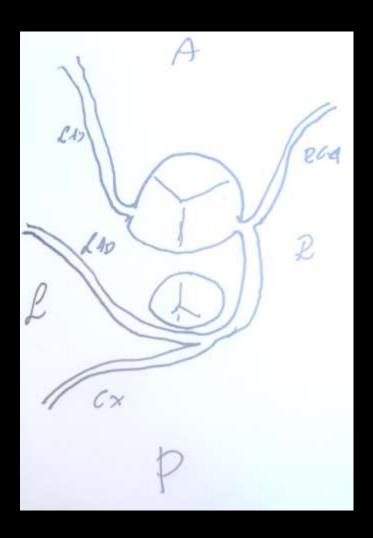






Case II

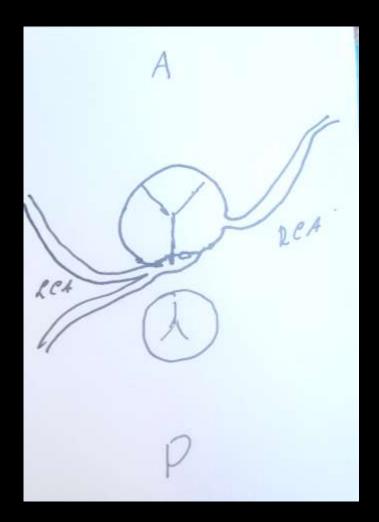
Coronary arteries were harvested and reimplanted, with some rotation of autograft

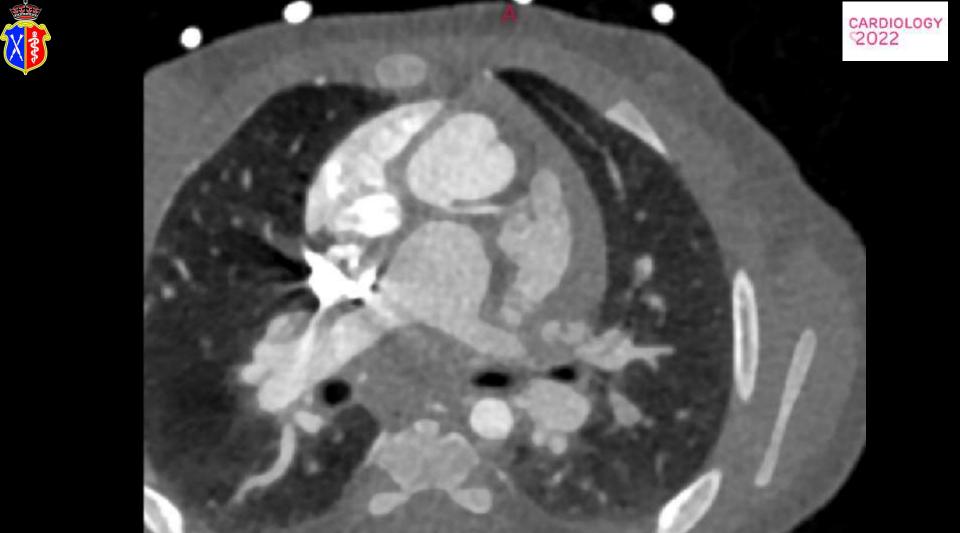


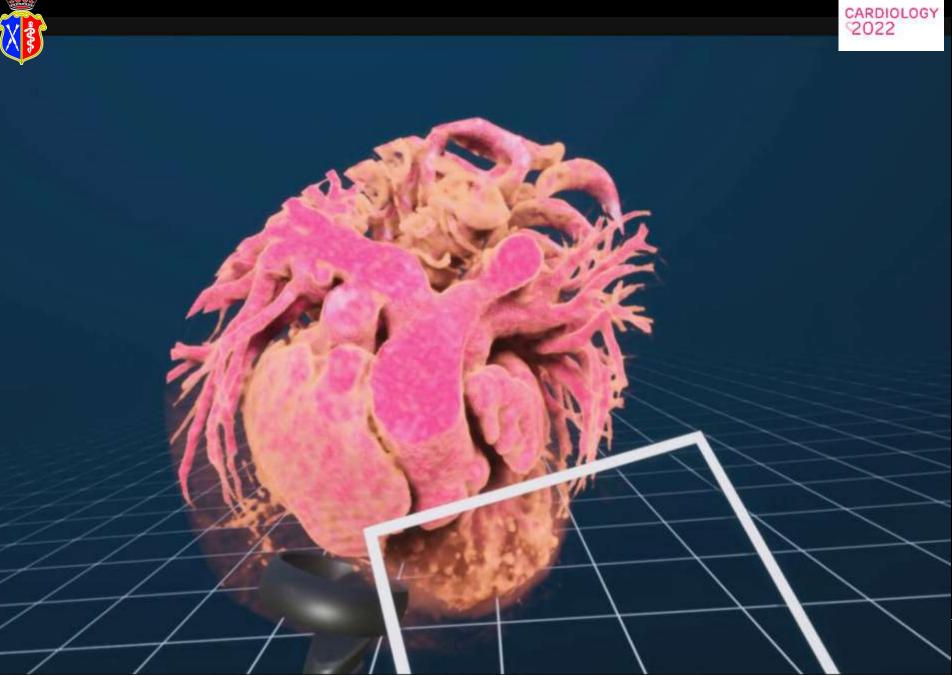


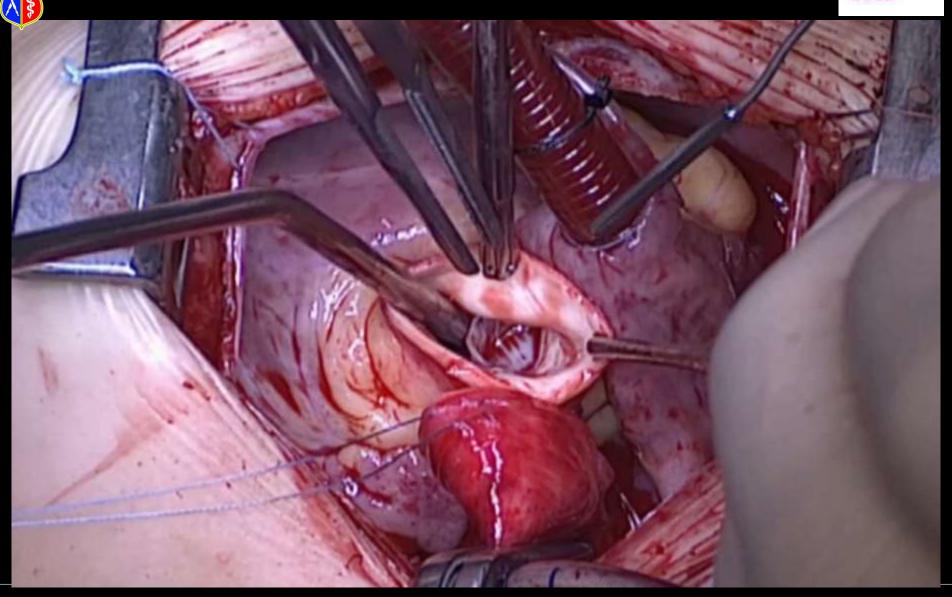


Case III







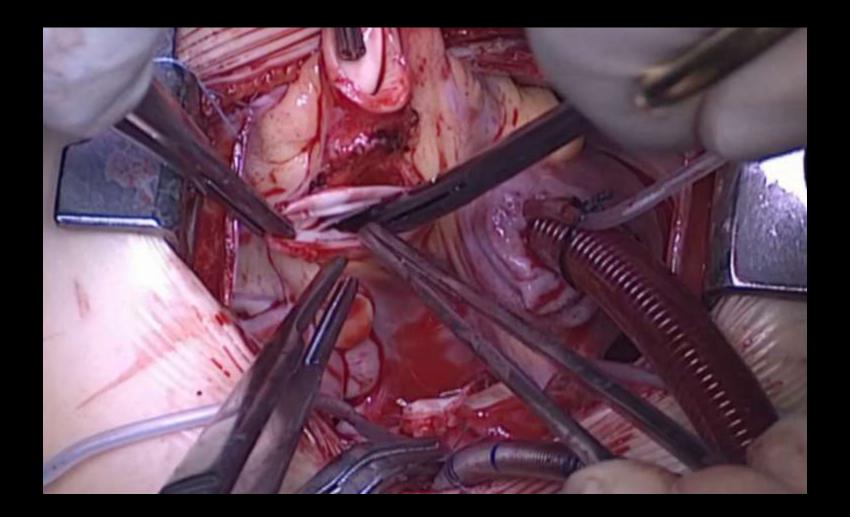




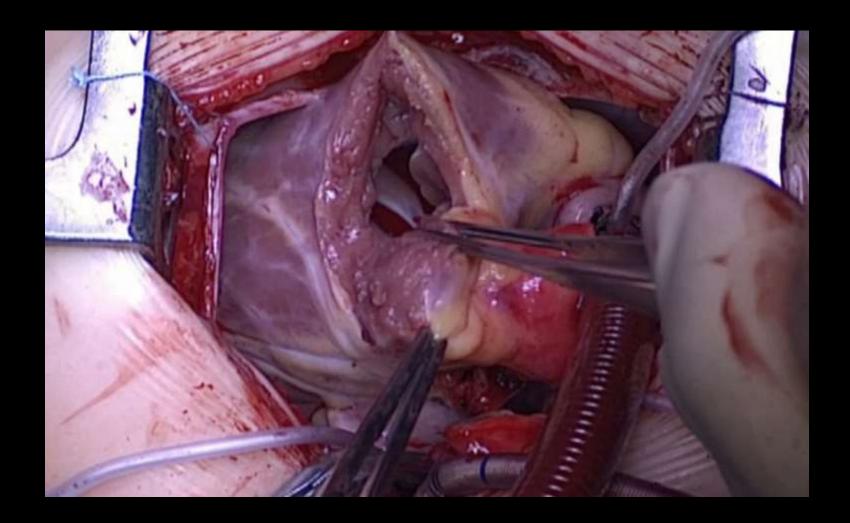


What next?

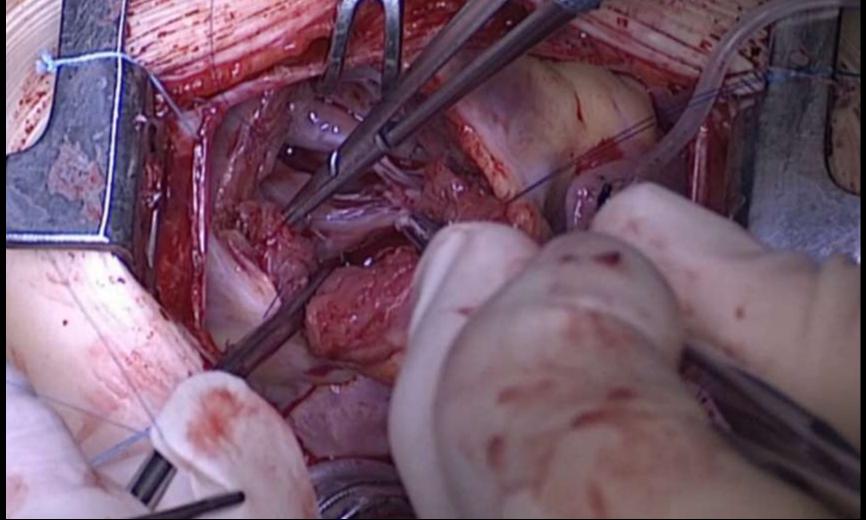


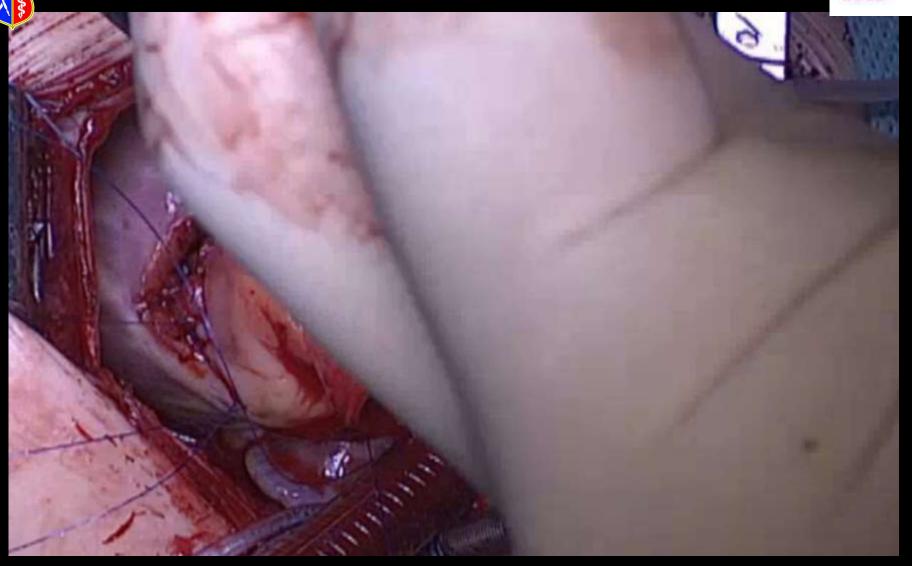










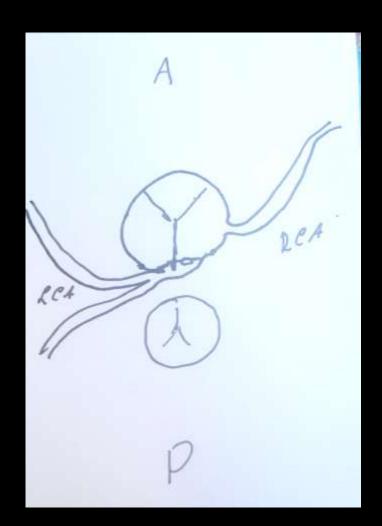






Case III

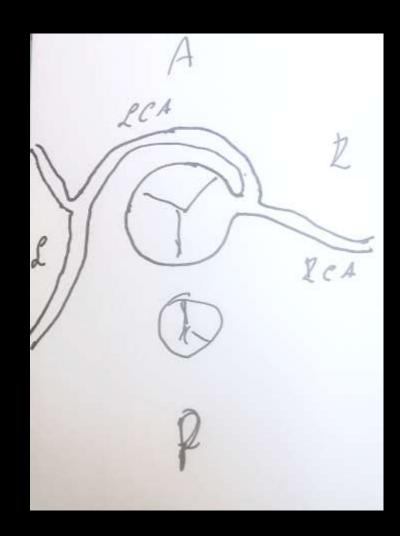
Coronary arteries remained untouched, but extensive mobilization of aortic valve



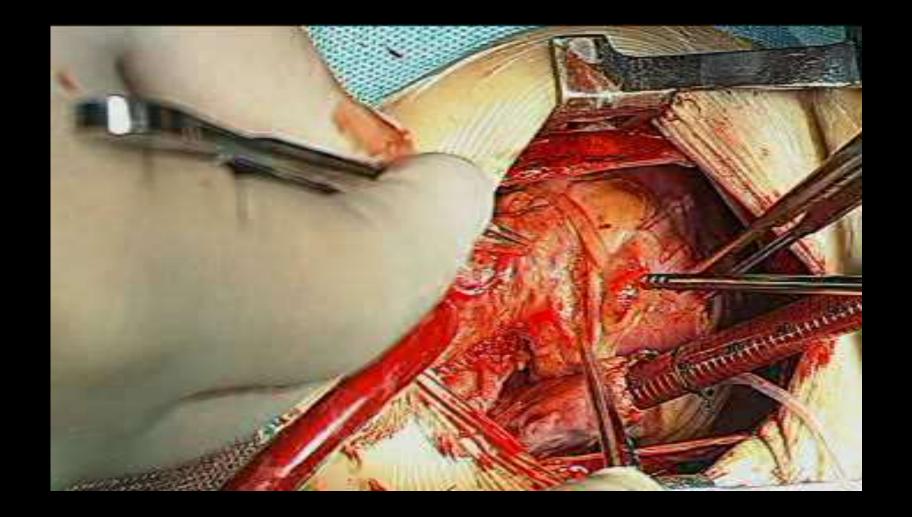




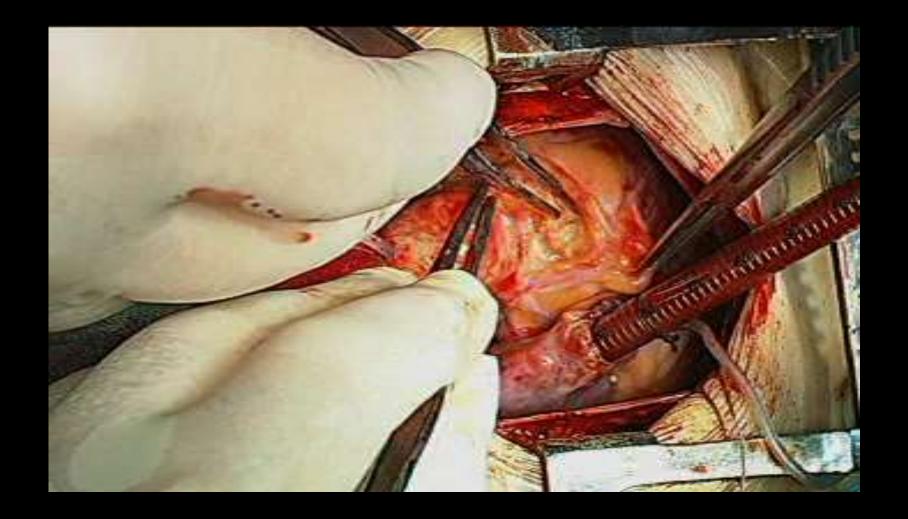
Case IV







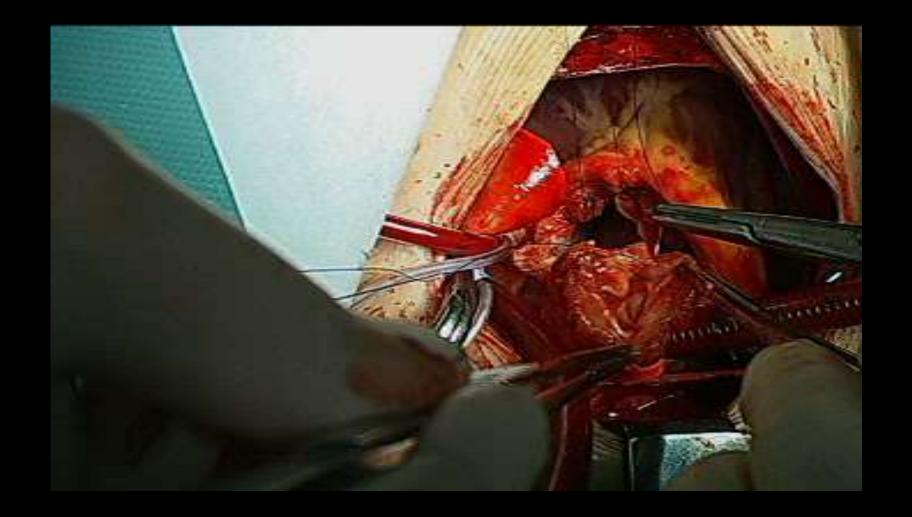




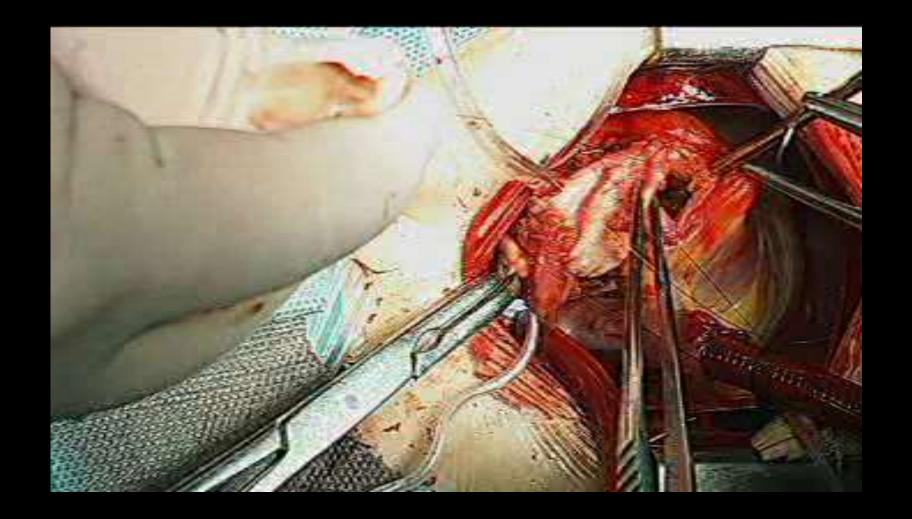
















Case IV

Coronary arteries remained untouched with rotation of aortic autograft

