

# Dysfonction diastolique:

importance, mécanisme, et diagnostic

André Denault MD PhD



Montréal, le 24 novembre 2010

# Objectives


- Réaliser l'importance de connaître la fonction diastolique de votre patient
- Comprendre le langage utilisé en diastologie
- Apprécier les implications thérapeutiques des dysfonctions diastoliques

## What about the other two-thirds of the cardiac cycle?

Barry A. Finegan, MB

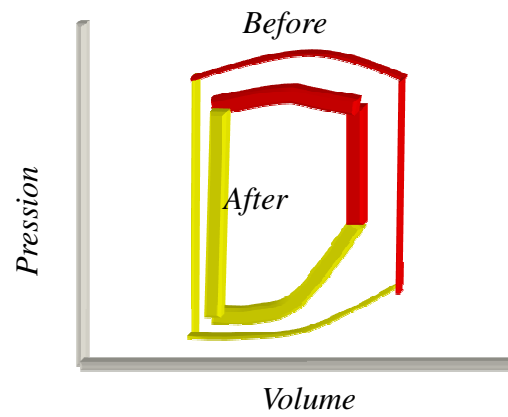
What then is the busy clinician to take home from these findings? Is diastolic dysfunction an esoteric entity best left to cardiologists and anesthesiologists who are skilled in echocardiography and have the time and interest to pursue this arcane property of the ventricle, i.e., the ability to relax? While this may seem the appropriate

## Importance

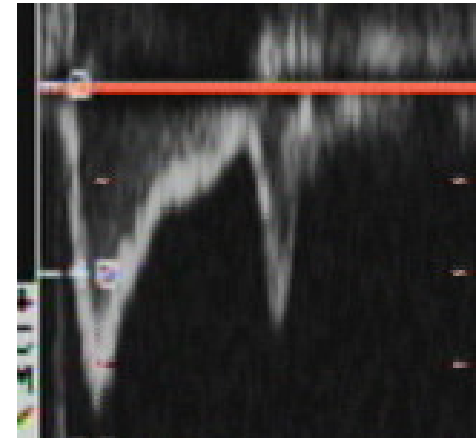
 The New England Journal of Medicine

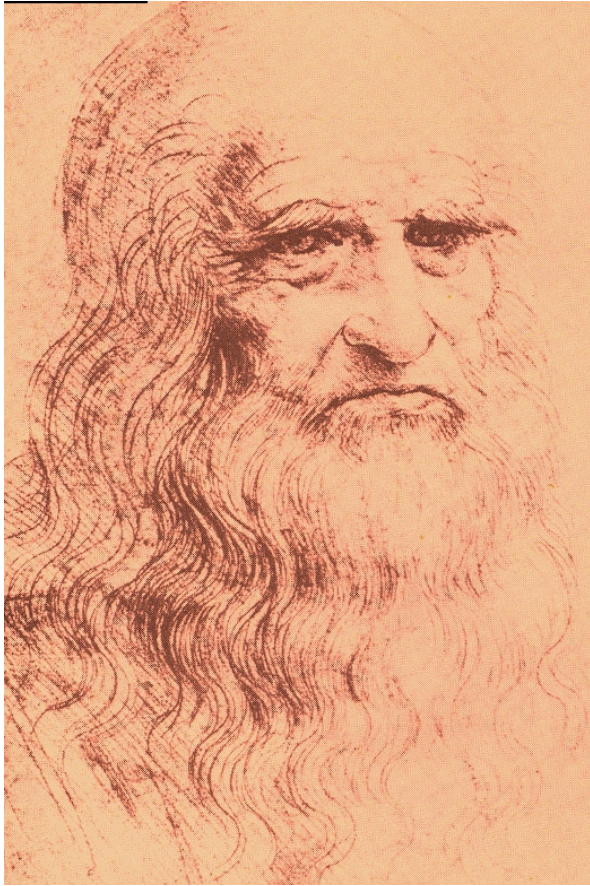
**DIASTOLIC HEART FAILURE  
NO TIME TO RELAX**

## Mechanism

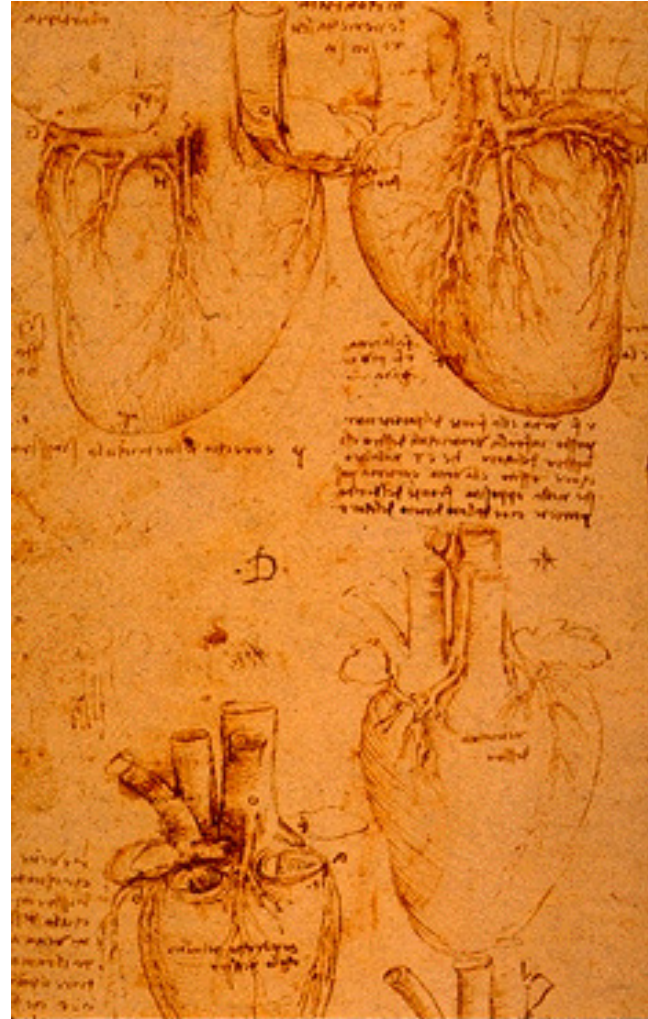


## Bedside diagnosis

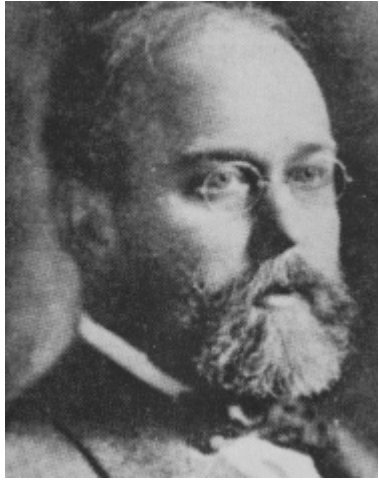




1452-1519



*“The lower chamber filled with blood from the upper chambers”*



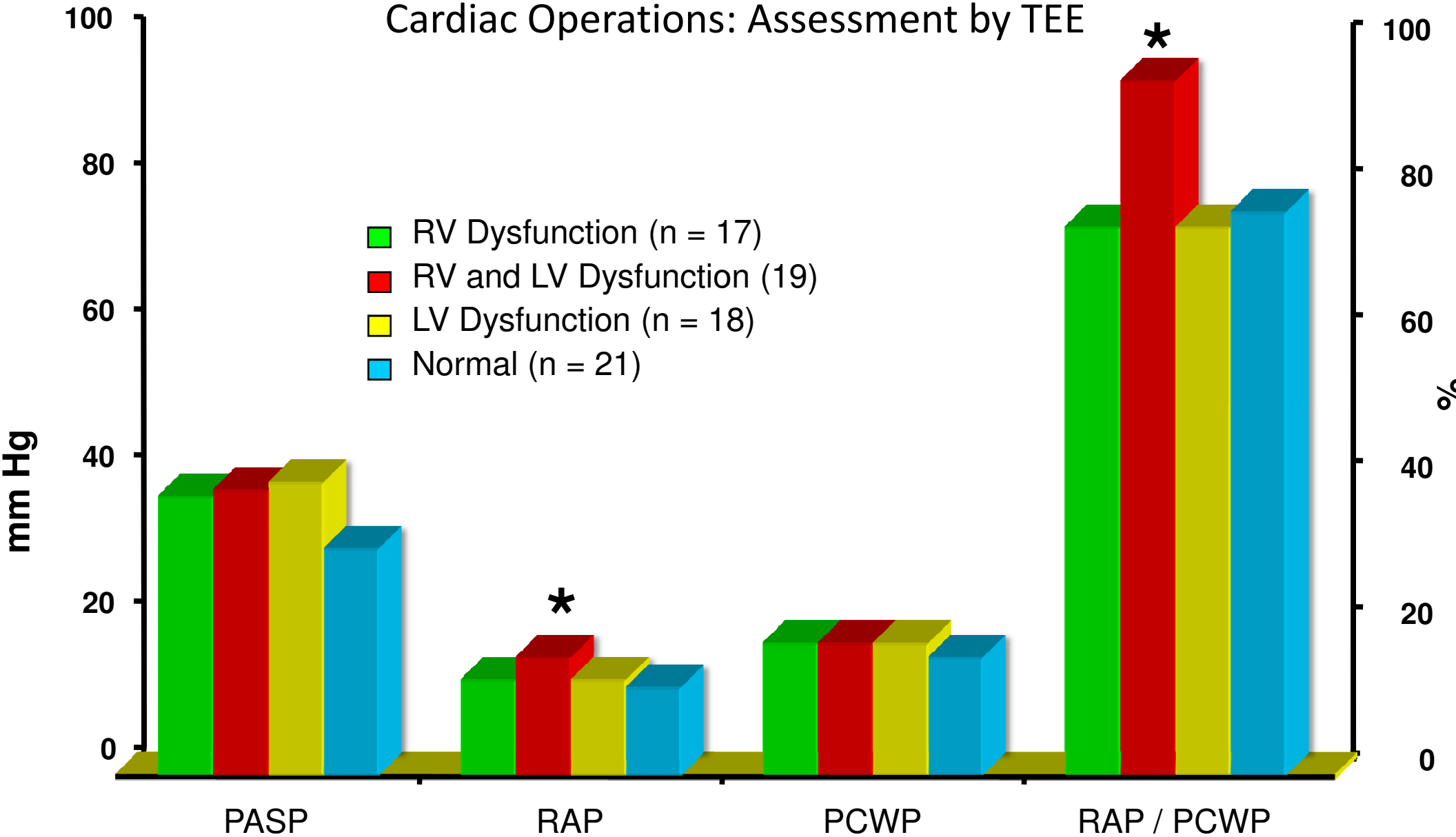
LJ Henderson 1923

« When the old man's heart relaxes slowly, his capacity for physical exertion is still limited...even though the systolic contractions were still like those of youth. »

# Patients at risk

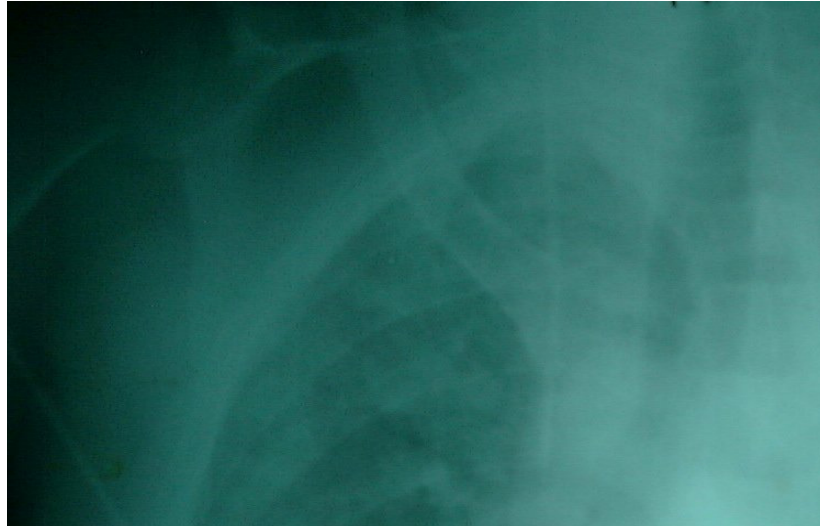
- Elderly patients
- Chronic hypertension with LV hypertrophy
- Chronic renal failure patients
- Hypertrophic cardiomyopathy
  - young and elderly
- Aortic stenosis
- Secondary diastolic dysfunction in CAD

# Right Ventricular Dysfunction in Low Output Syndrome After Cardiac Operations: Assessment by TEE



N = 75





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