Questions and Responses from the Ultrasound in Context Presentation:

Echo Assessment of the Heart Failure Patient

Robert Carter: Questions may be asked here
Karen Lamble: So if I only have 2D Echo, which is the best technique?
Karen Lamble: Dr Salgo: if its pure 2D then for an accurate global EF - it must be Simpsons Biplane
Karen Lamble: Dr Salgo: For timing, TDI velocity is the most widely used technique
Karen Lamble: Dr Slago: Speckle tracking technology is gaining a lot o f interest for timing because it is not angle dependant, like TDI
Karen Lamble: Stephane Husson: SPeckle adbvantage gives direct access to the myocardial diplacement & deformation
Karen Lamble: Any more questions?
Karen Lamble: Dr Salgo & Stephane Husson are waiting
Karen Lamble: So Tim has this answered your questions about Heart Failure?
Tracey Collinsworth: This presentation was very beneficial and informative thank you
tim ranlett: some but how can 3D be used and what is gained over tdi VVi 2d
Tamara Kinnee: If I am using 3D for timing assessment, what are normal values for SD and % R to R on my report pages?
Karen Lamble: Tim: VVI is a 2D technique and is susceptible to foreshortening errors & geometric assumptions
Karen Lamble: 3D has definitevely been shown to be more accurate than single plane 2D techniques for assessing global LV function
Karen Lamble: Tamara - we purposely did not give those and there is no official value for the tool - please refer to the published literature - Dr Monaghans paper in circulation Aug 06
Karen Lamble: Tamara - however the larger the SD then it stands to reason that the dysynchrony is worse
Karen Lamble: Hope that helps
tim ranlett: isaSD under 10 considered normal
Karen Lamble: The official position of Philips is not to report any specific value - we do advise you to go to the peer reviewed literature