

**Identification of a coronary-to-bronchial
-artery communication with MDCT shows the
diagnostic potential of this new technology:
case report and review**

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摘要

Abstract

Development and refinement of multidetector computed tomography (MDCT) has brought the potential to replace conventional coronary angiography with a noninvasive technique that has comparable spatial and temporal resolution with a single breath-hold. Although clinical use of MDCT has largely been confined to evaluation of atherosclerotic coronary artery burden and coronary artery anomalies, it can be applied to diagnosis of other problems concerning the thoracic vasculature. We present the case of a middle-aged man who presented with recent-onset exertional angina: 64-detector CT was used as an alternative to cardiac catheterization and identified the underlying anatomic anomaly, a rare coronary-to-bronchial-artery communication. Clinicians should be aware that the newest generation of MDCT equipment may allow many patients to forego diagnostic cardiac catheterization without compromise in quality of care.