Myocardial bridging

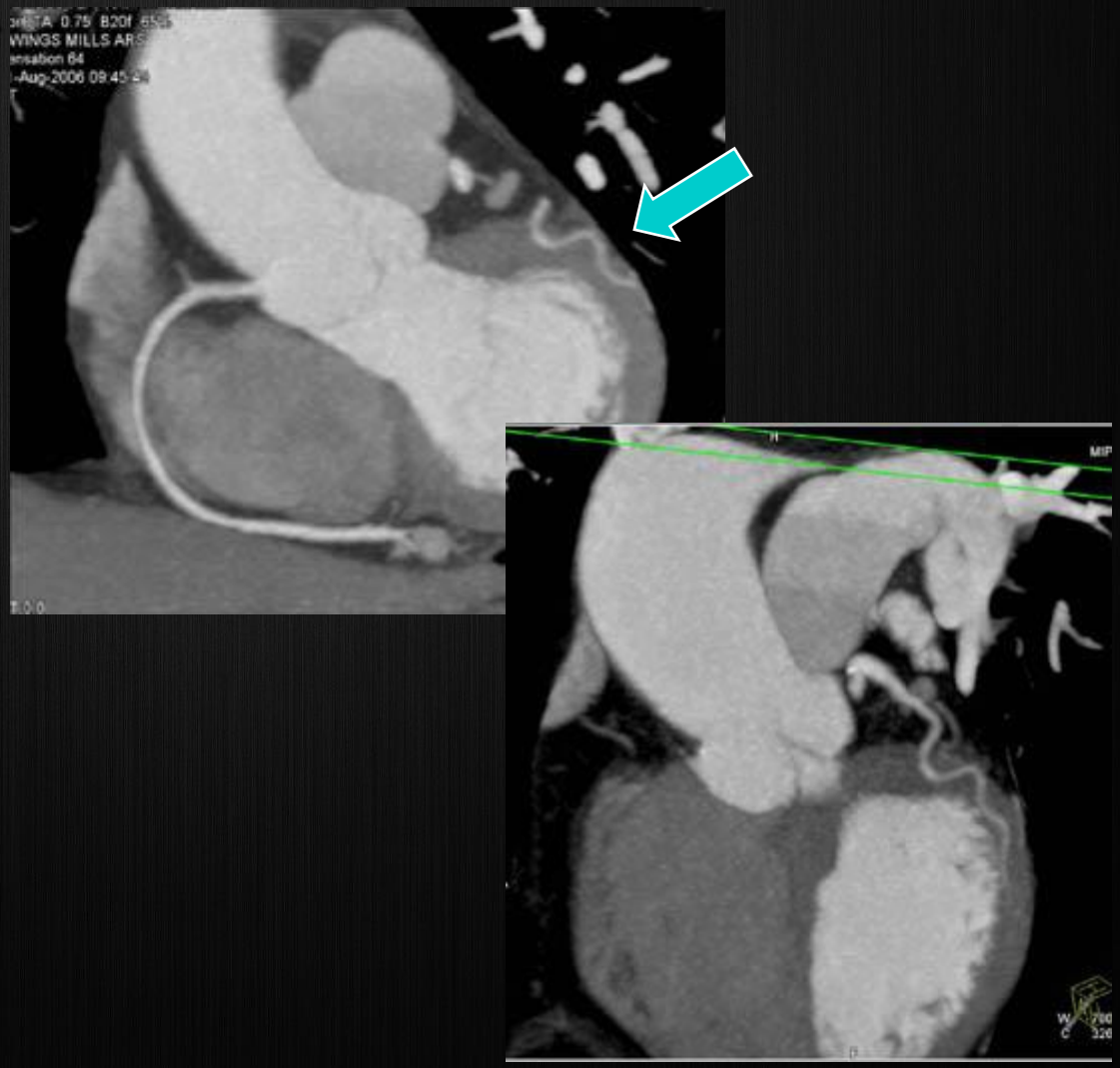
- Congenital coronary anatomic variant in which segment of epicardial coronary artery takes intramyocardial course
- Most common congenital coronary abnormality
- Most common location: Mid segment of left anterior descending (LAD) coronary artery

Clinical Issues

- Most asymptomatic, most patients have single bridge
- Rarely angina, arrhythmia, or sudden death; association with ischemia is controversial
  - Certain bridges (long, deep) are controversially associated with ischemia
- Most commonly at mid segment of LAD coronary artery
- β-blockers and calcium channel blockers are rarely needed
- Percutaneous coronary intervention can stabilize coronary artery lumen against muscular compression (very rarely)
- Surgical myotomy in patients with significant clinical symptoms
- Coronary artery bypass graft if failure of percutaneous coronary intervention or coronary disease (extreme rarity)

Myocardial bridging

- Seen in under 4% of the population.
- The significance of this finding is of uncertain clinical impact.
- Pretty examples of rendered right coronary arteries.



ll Screen Image

ry CTA shows a mid left anterior descending artery myocardial bridge →. Note calcified plaque ⇨ proximal to the but no atherosclerosis within the bridge.

ad to Presentation