

Debate Proposition

*That this House believes MVP SCD relates to
diffuse myocardial fibrosis*

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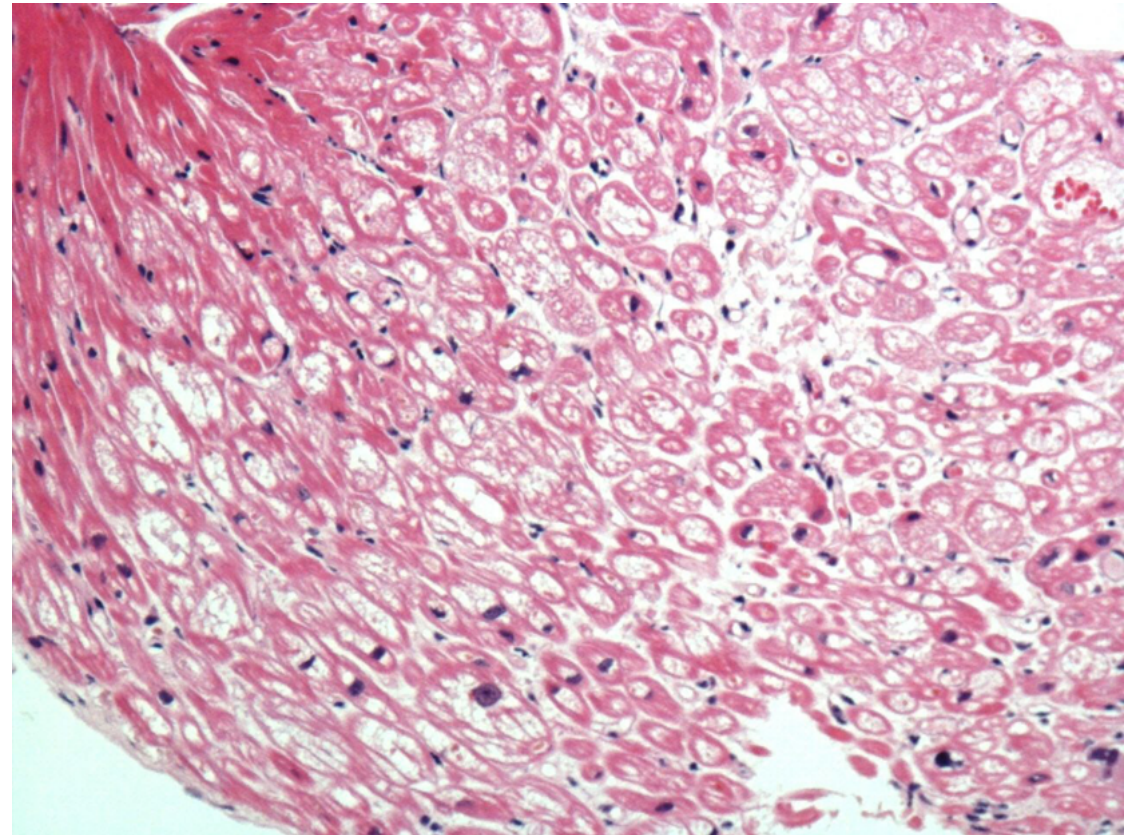
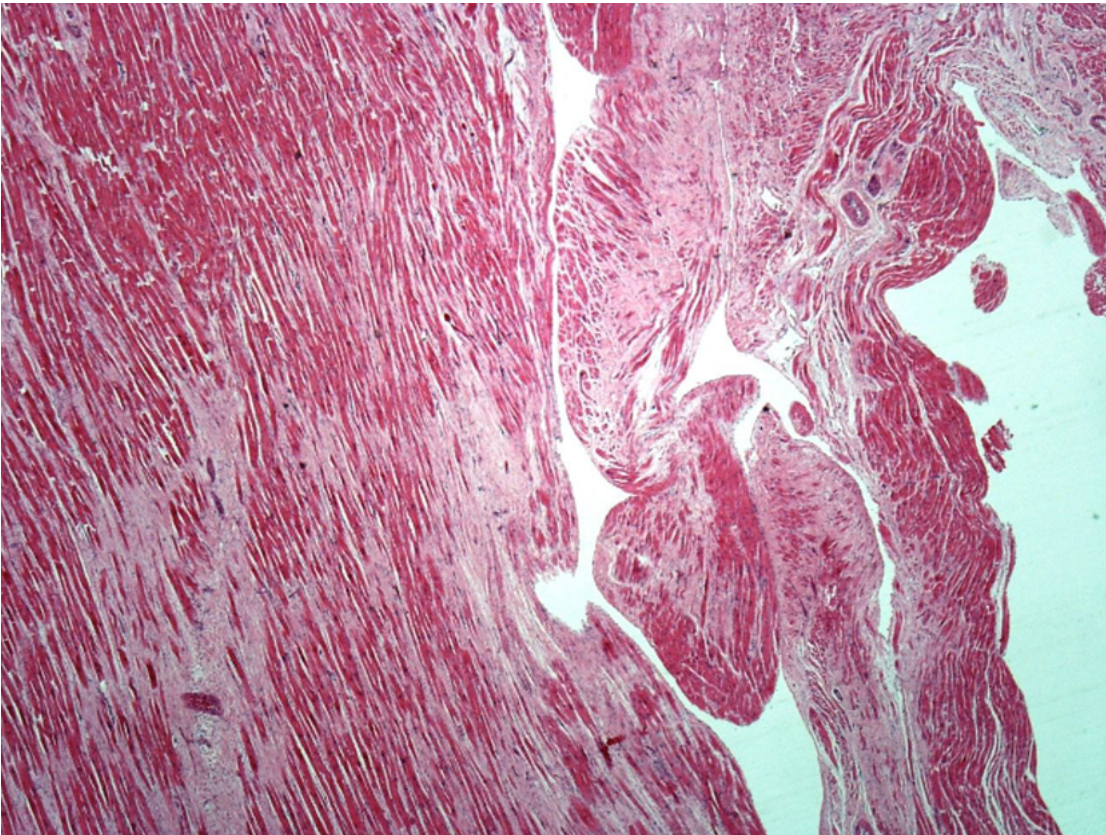
Pathology evidence = Barlow Cardiomyopathy

68 consecutive cases with MVP as “cause of death” (SCD reference centre)

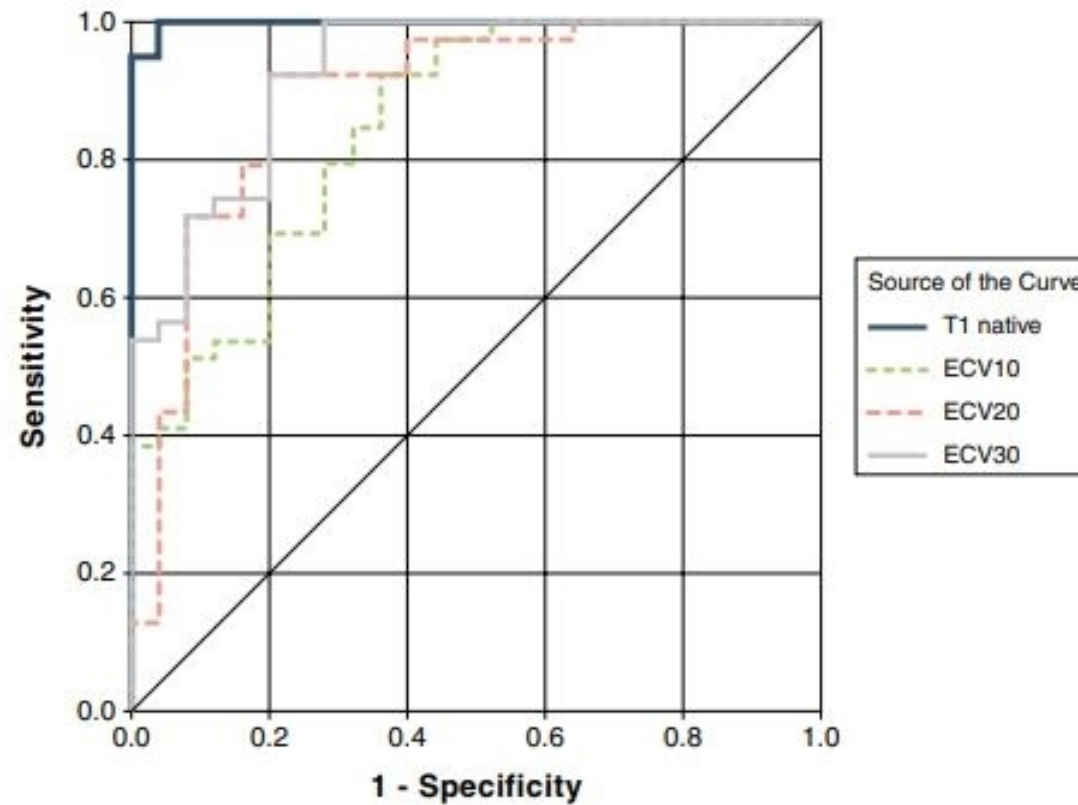
all were Barlow valves

they had microscopic interstitial myocardial fibrosis

& myocyte degeneration, cytoplasmic vacuolation suggestive of a distinct cardiomyopathy

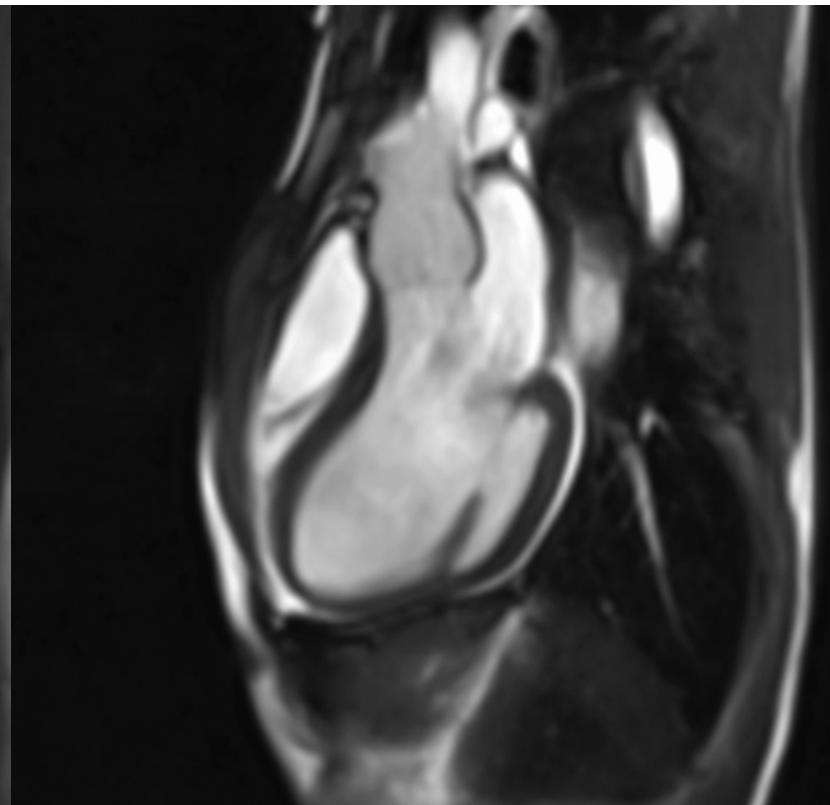
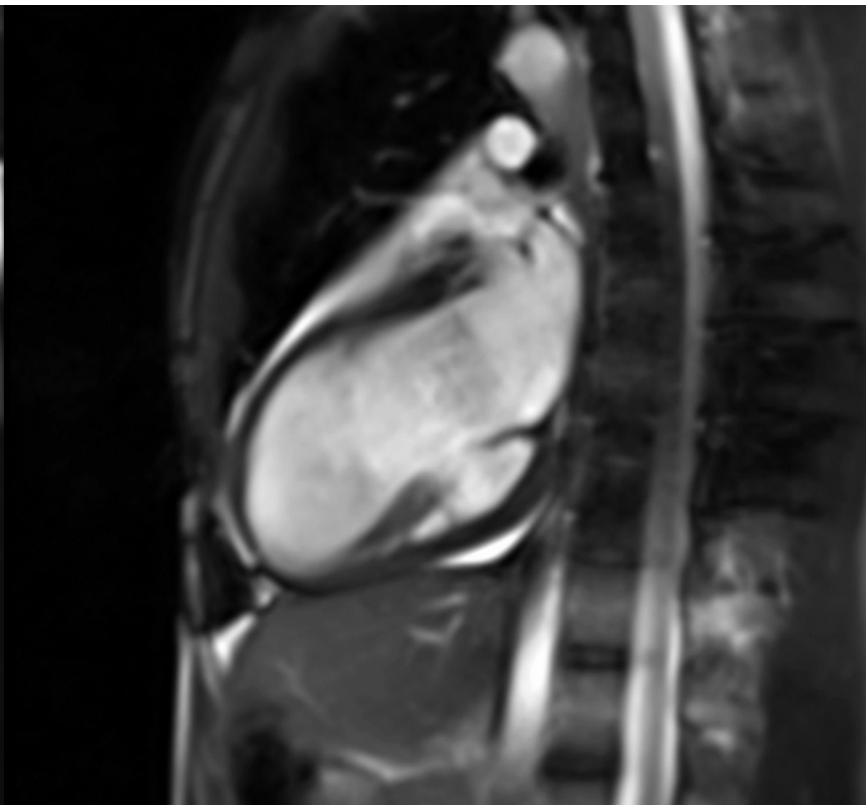
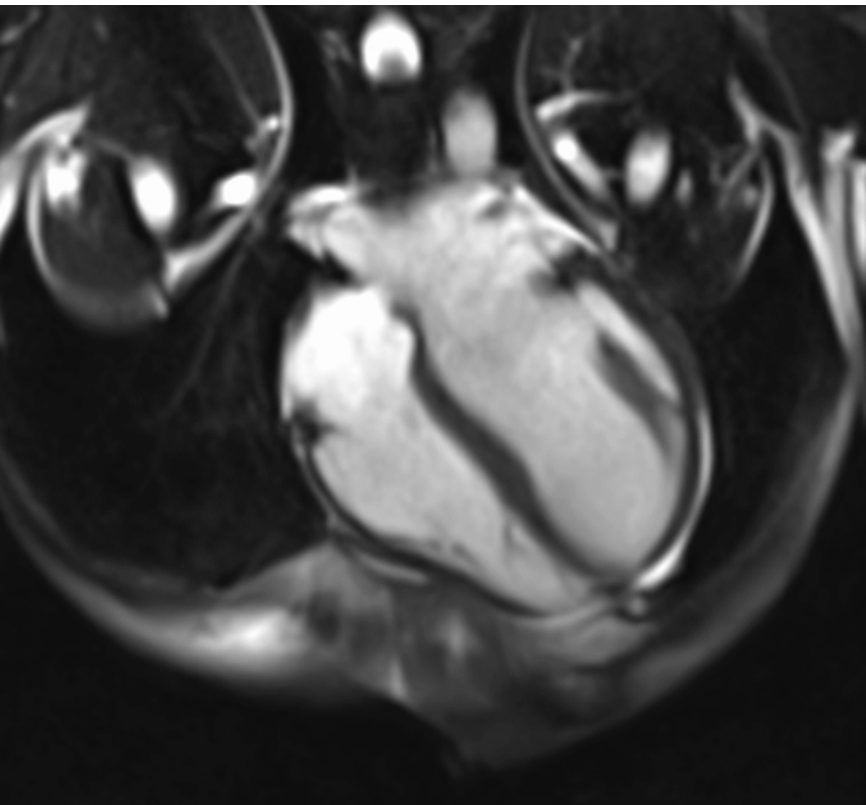


T1 mapping detects interstitial fibrosis differentiates normal / abnormal myocardium

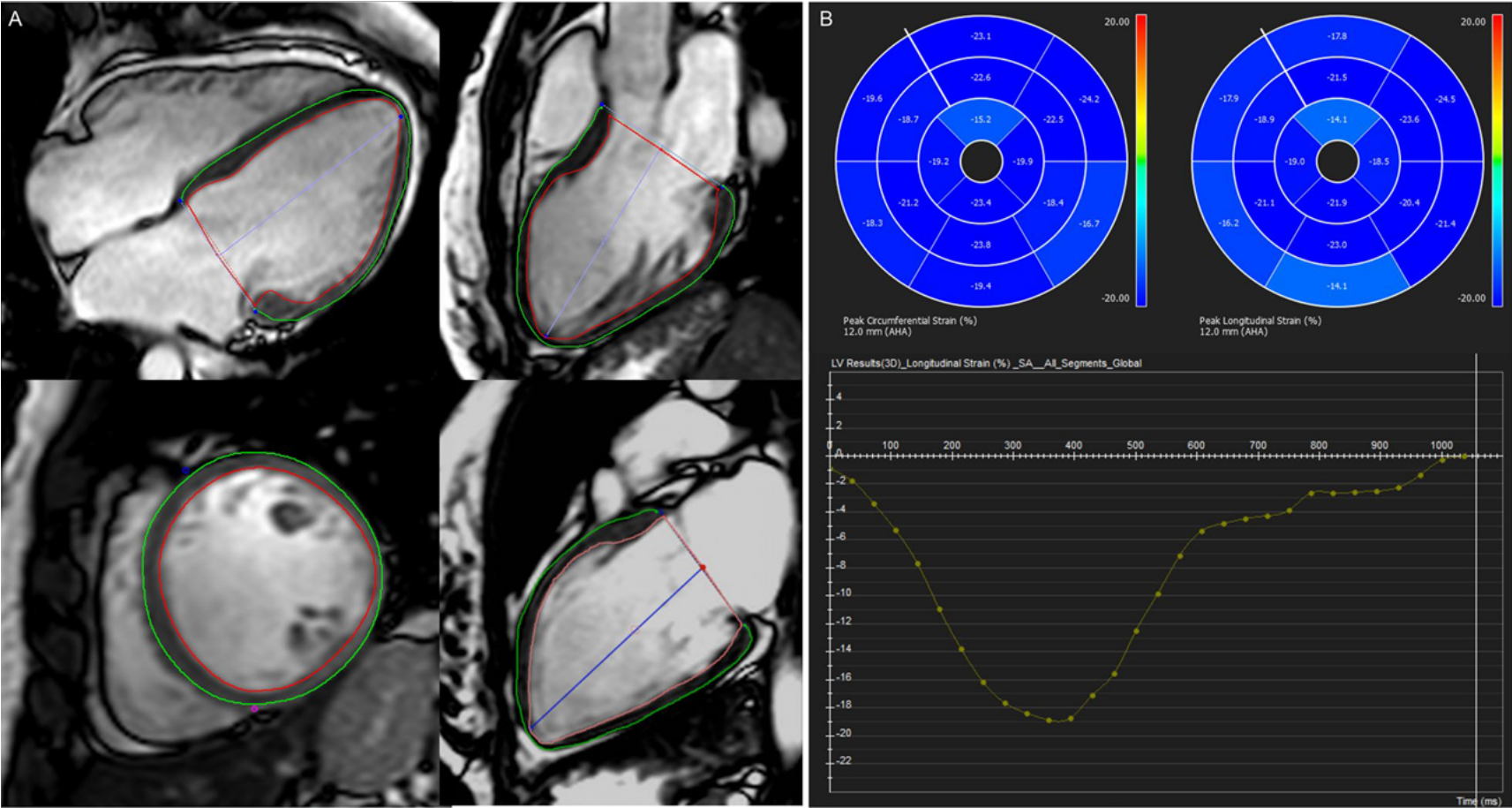


Puntmann et al, JACC-CVI 2013

MRI: myopathic LV & bi-leaflet MVP

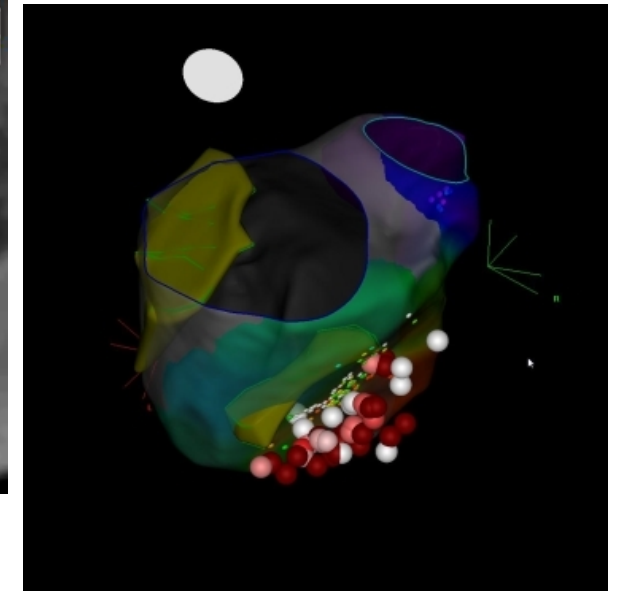
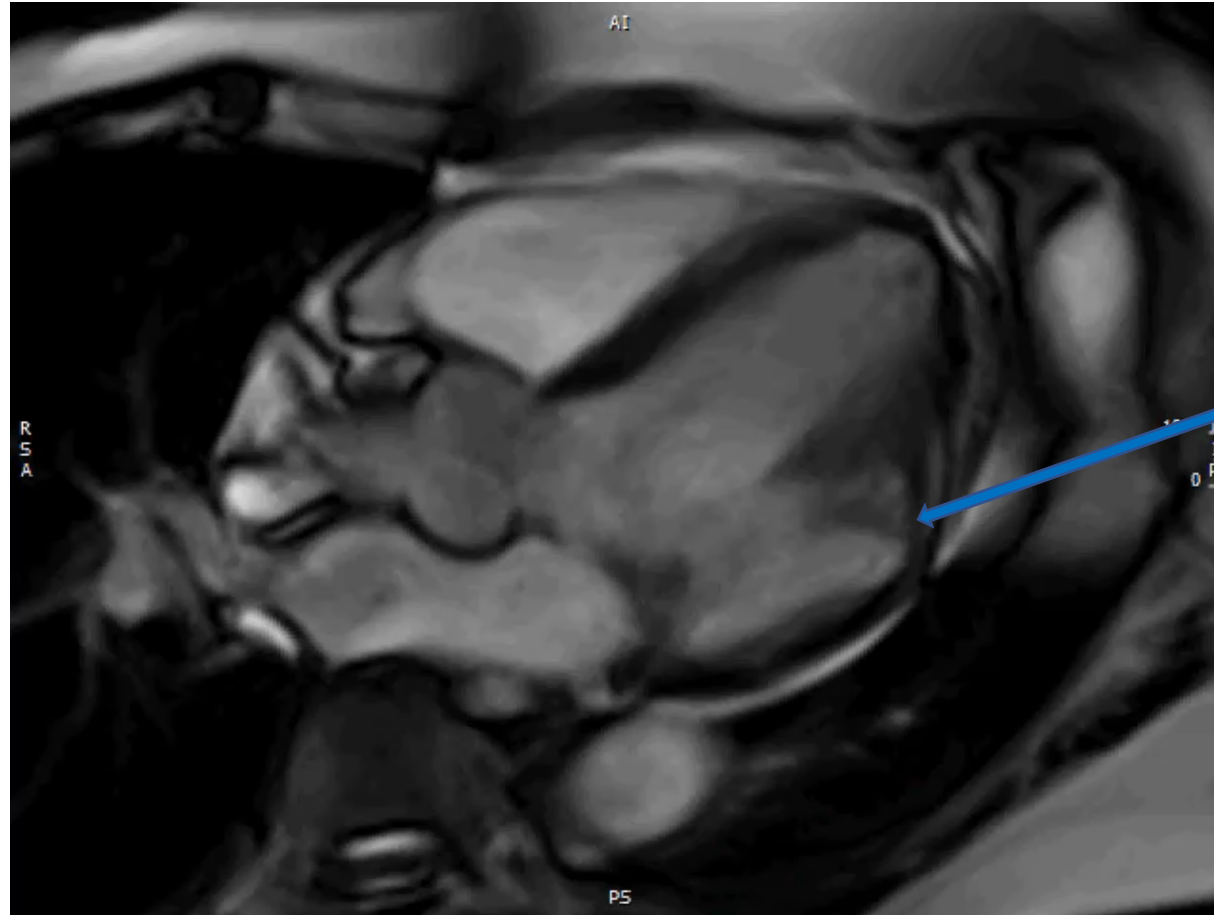


Disease of the myocardium as well as of the valve

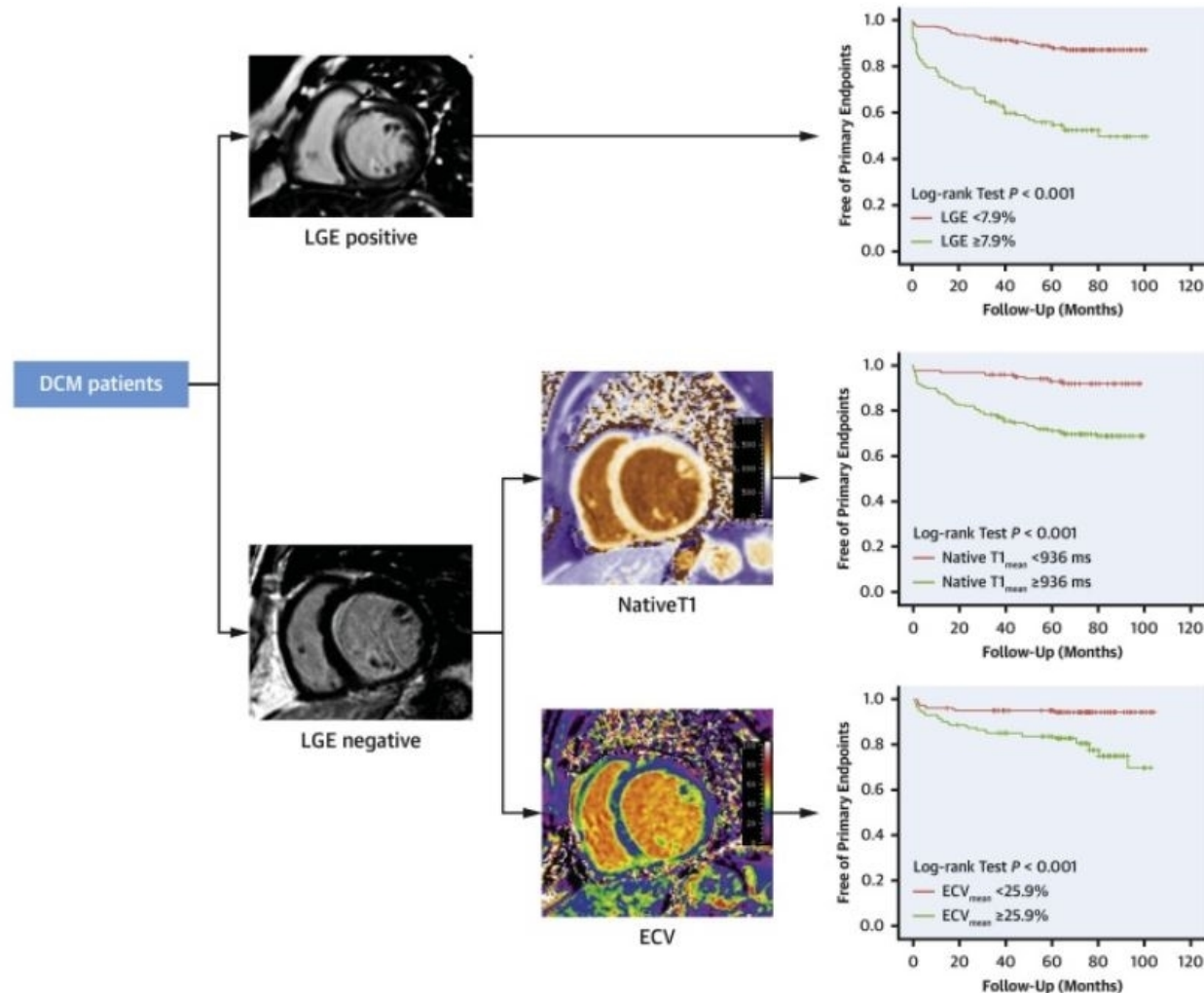


Typical LV morphology & contraction pattern

Myocardial origin of **automatic VT** with high VF potential



Diffuse fibrosis on T1-mapping associated with ventricular arrhythmia in the absence of LGE



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