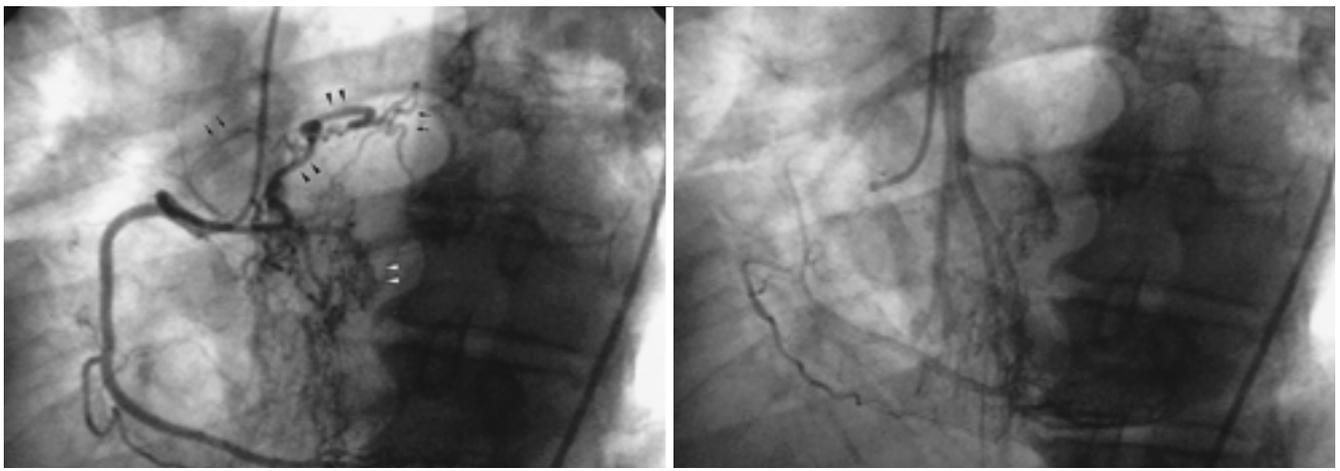




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6 1 - 4 , 13 von Haller 19  
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. 13 2 10 Indian ink  
(76.9%, Fig. 2), (3).  
(3)



**Fig. 1.** A 34-year-old woman with Takayasu arteritis.  
**A.** Right coronary cineangiogram in LAO 35° projection shows hypertrophied atrial branch (arrows heads) originating from the right coronary artery has a tortuous course and connects with the bronchial artery (arrows) with adjacent hypervascular lesion (white arrow heads).  
**B.** In delayed phase, shunt to the pulmonary artery is also noted.



가 (9). 12  
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## Coronary to Bronchial Artery Communication<sup>1</sup>

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**Purpose:** To analyze the cineangiographic appearance and determine the clinical importance of coronary-to-bronchial artery communication.

**Materials and Methods:** The coronary cineangiograms of 4,620 patients were reviewed, and 12 cases of coronary-to-bronchial artery communications were observed in 10 patients (M:F=6:4; mean age, 48.4 years). The cineangiographic findings were analyzed and correlated with these of other imaging studies [perfusion scan (n=5), computed tomographic angiography (CTA) (n=4), conventional chest computed tomography (CT) (n=1), and conventional angiography (n=6)].

**Results:** Cineangiography revealed that hypertrophied branches of the coronary artery communicated with bronchial arteries in which adjacent hypervascular staining, was observed, and which were accompanied by pulmonary shunts (n=9). The underlying diseases identified among the ten patients were Takayasu arteritis (n=5), chronic inflammatory pulmonary disease (n=3), pulmonary thromboembolism (n=1), and or newly diagnosed pulmonary tuberculosis (n=1). The lung fields supplied by coronary-to-bronchial communication showed close correlation with the territories of perfusion defects, decreased pulmonary vascularity, or inflammatory lesions revealed by other imaging studies.

**Conclusion:** Coronary-to-bronchial artery communication can present as a secondary result of occlusive disease of the pulmonary arteries or chronic pulmonary inflammation, and in patients with hemoptysis involving, for example, incomplete embolization or myocardial infarction, it may be problematic.

**Index words :** Arteries, bronchial  
Coronary vessels, diseases  
Takayasu arteritis

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