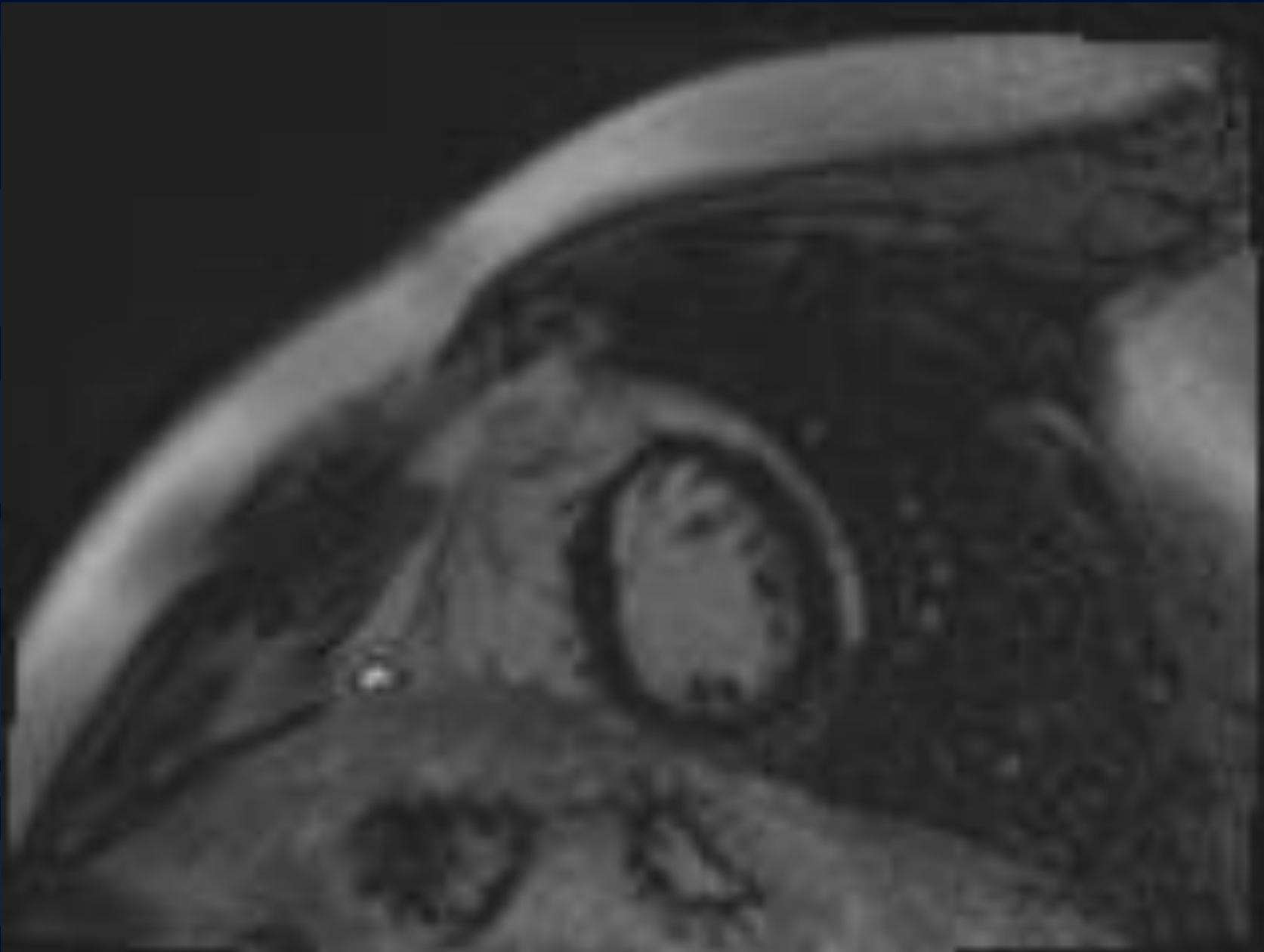
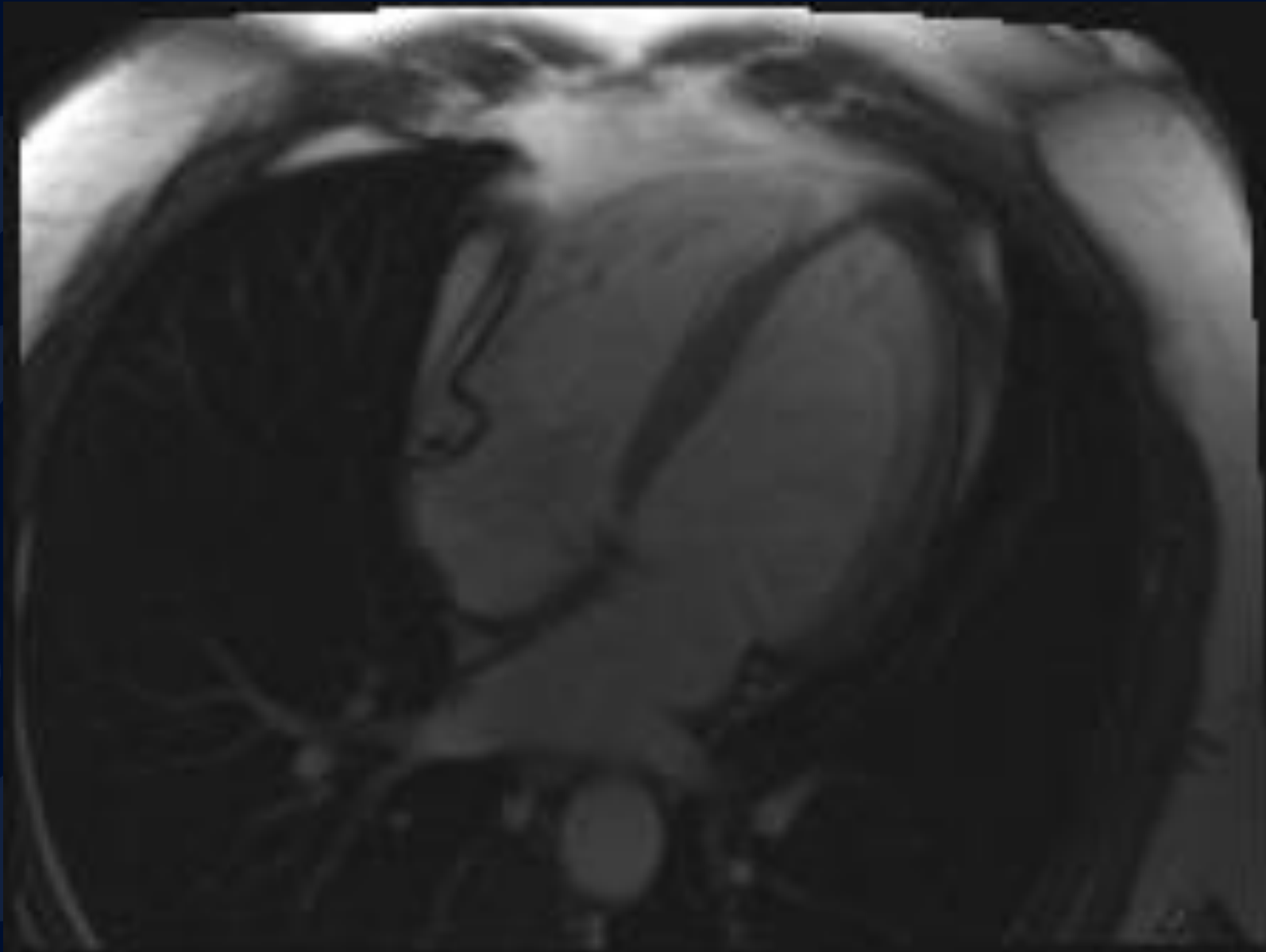


46 year old man with fatigue  
and lower extremity swelling

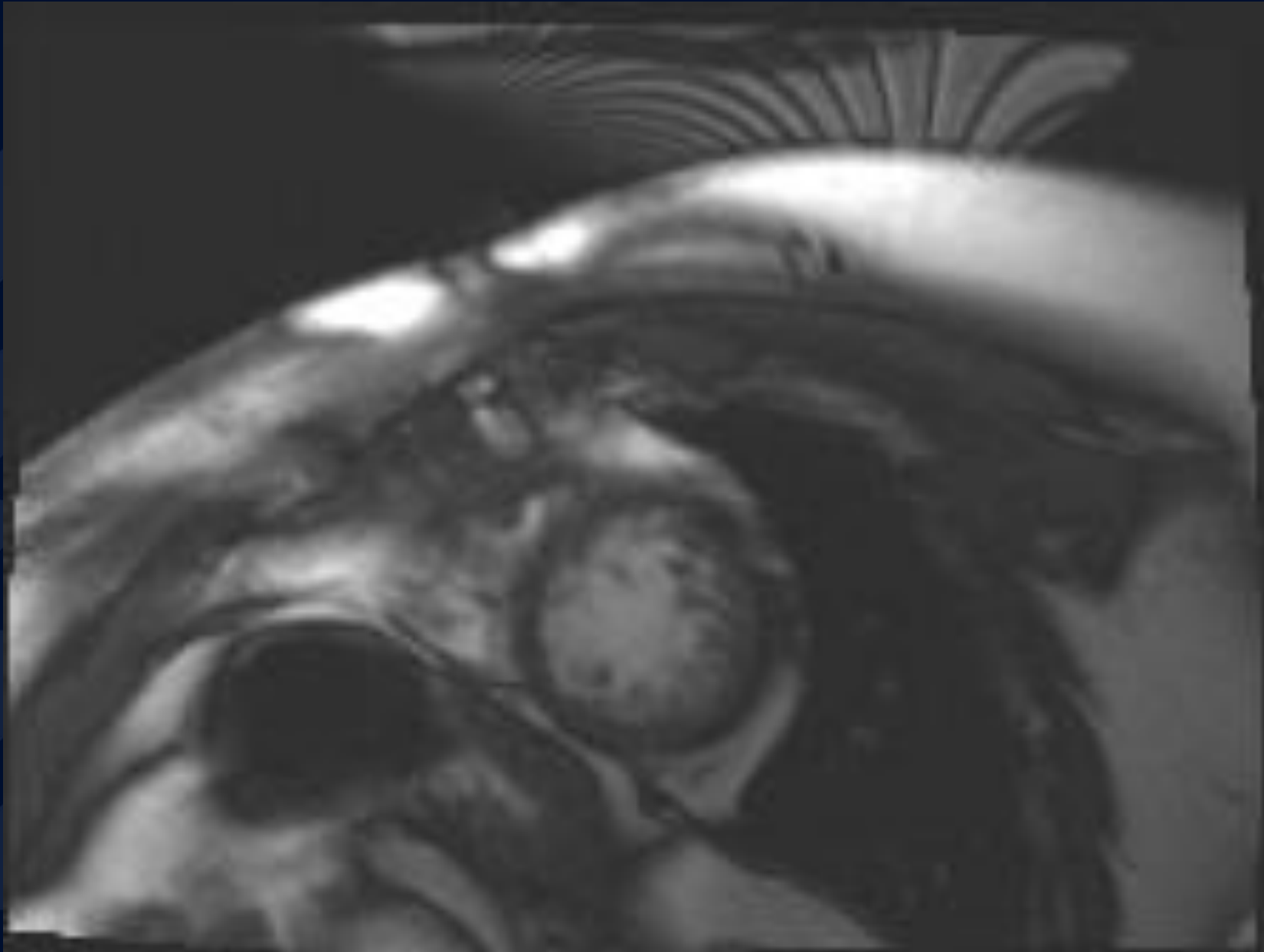
Rahul Dey, MD  
Clifford Yang, MD



Short Axis Late Gadolinium Enhancement MR



4 Chamber Steady State Free Precession MR

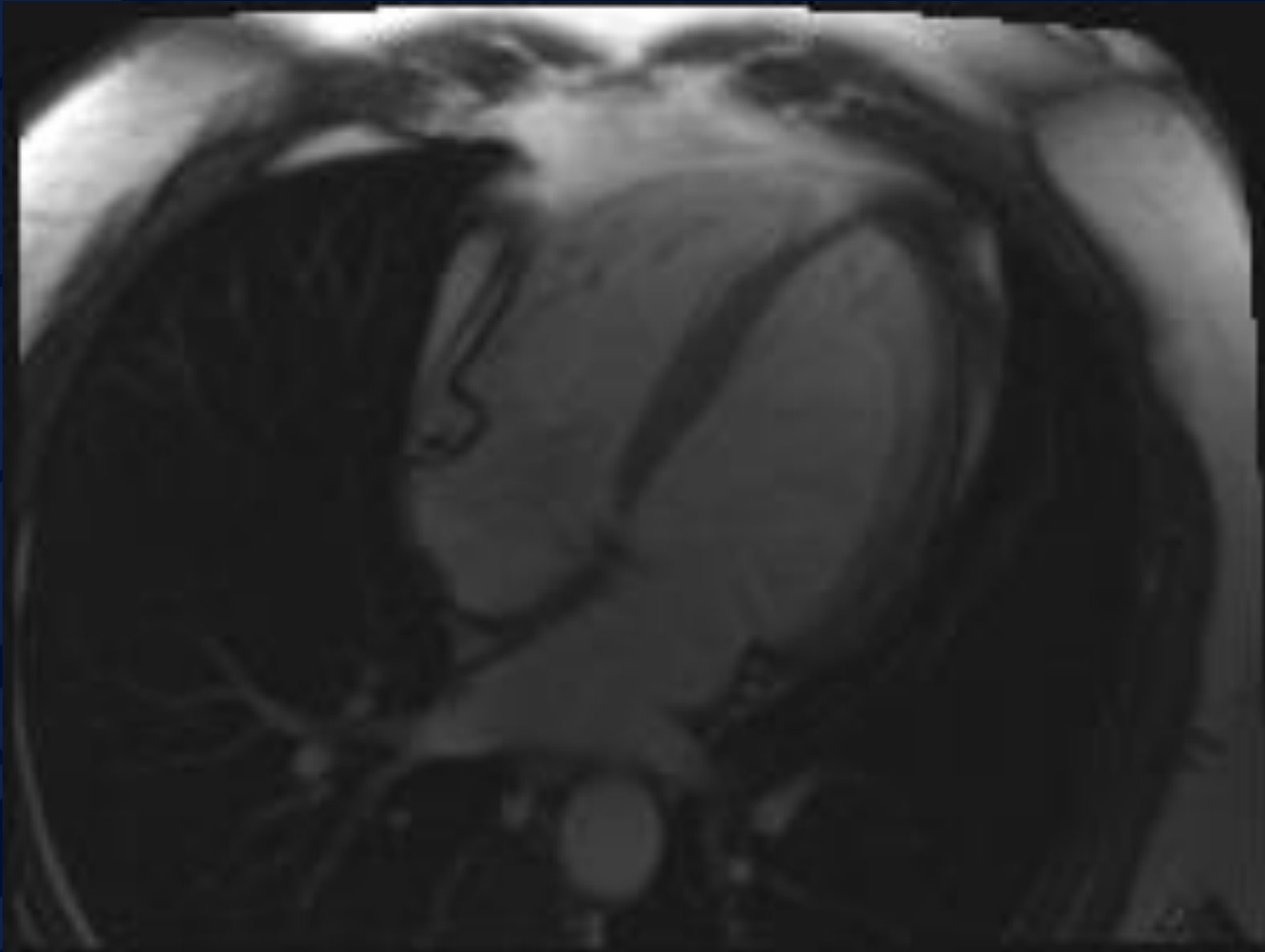


Short Axis Steady State Free Precession MR



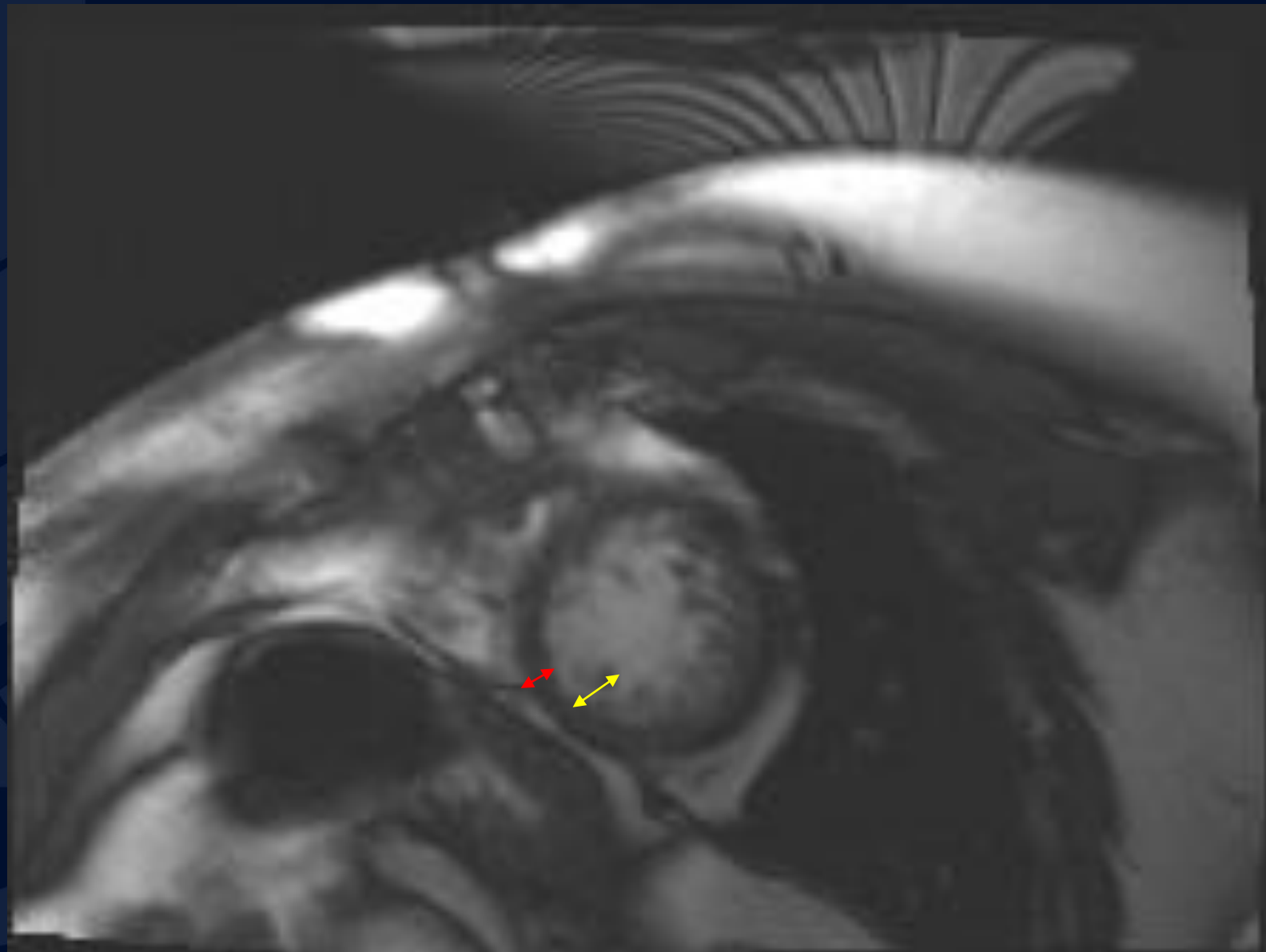
?

# Non-compaction Cardiomyopathy



Relatively thickened  
trabeculae relative to  
myocardial wall at apex

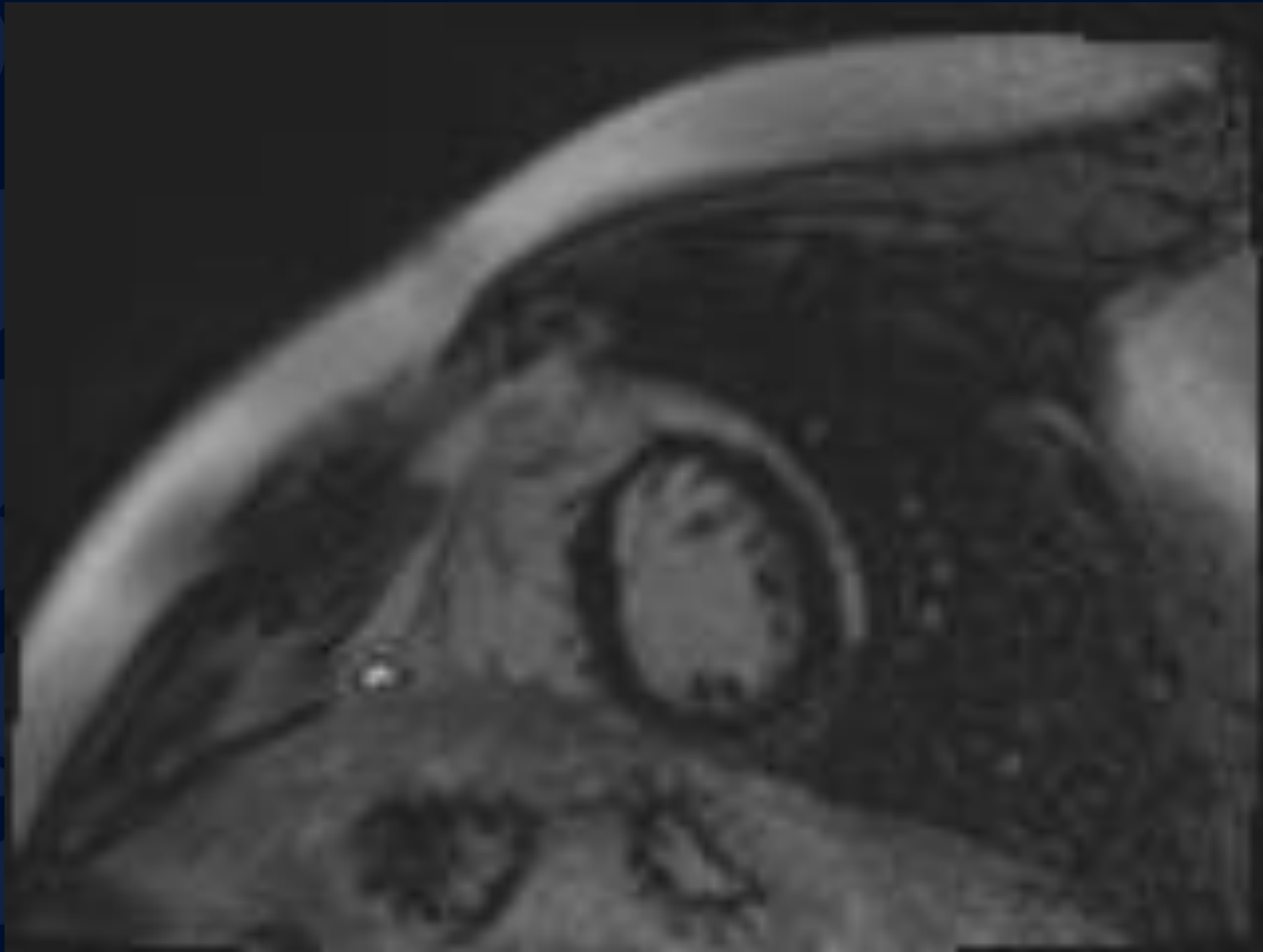
4 Chamber Steady State Free Precession MR



Ratio of non compacted myocardium (yellow arrow) to compacted myocardium (red arrow) is  $>2.3$

Short Axis Steady State Free Precession MR





Normal late  
gadolinium  
enhancement  
without fibrosis

Short Axis Late Gadolinium Enhancement MR

# Non-compaction cardiomyopathy

- Rare cardiomyopathy characterized by prominent left ventricular trabeculation, deep intertrabecular recesses, and a two layered myocardium consisting of compacted and non compacted layers
- Thought to occur due to abnormal intrauterine trabecular compaction, in which the primitive ventricular trabeculation network does not properly undergo remodeling to form the specialized contractile structure
- Largely genetic (in one systematic review, etiology was genetic in 83% of patients)
- Classically presents with a triad of heart failure (HF), arrhythmias, and cardio-thromboembolic events
  - Often asymptomatic (up to 50%)
- Treatment: based on existing recommendations for HF/treated symptomatically
  - ACE-Is, Beta blockers, Aldosterone antagonists
  - Implantable cardioverter-defibrillator in cases with ventricular tachyarrhythmias

# Imaging findings

- Transthoracic echocardiogram: compacted (C) thin epicardial band and a much thicker non compacted (NC) endocardial layer
  - Maximal NC/C ratio  $>2$  at end systole on short axis parasternal view
- Cardiac MR: NC/C myocardium ration of  $>2.3$  at end diastole
  - Late Gadolinium Enhancement (LGE) and T1 mapping identifies myocardial fibrosis (T1 mapping more sensitive)
- Cardiac CT useful for functional and anatomic assessment of ventricles and for excluding coronary artery disease

# References

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2. Santos L, Carvalho R, Fernandes S, Morais J. Understanding Noncompaction Cardiomyopathy: A Brief Comprehensive Review of A Controversial Entity. *Journal of Cardiology and Cardiovascular Sciences*. 2020;4(2):45-50. doi:10.29245/2578-3025/2020/2.1198
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