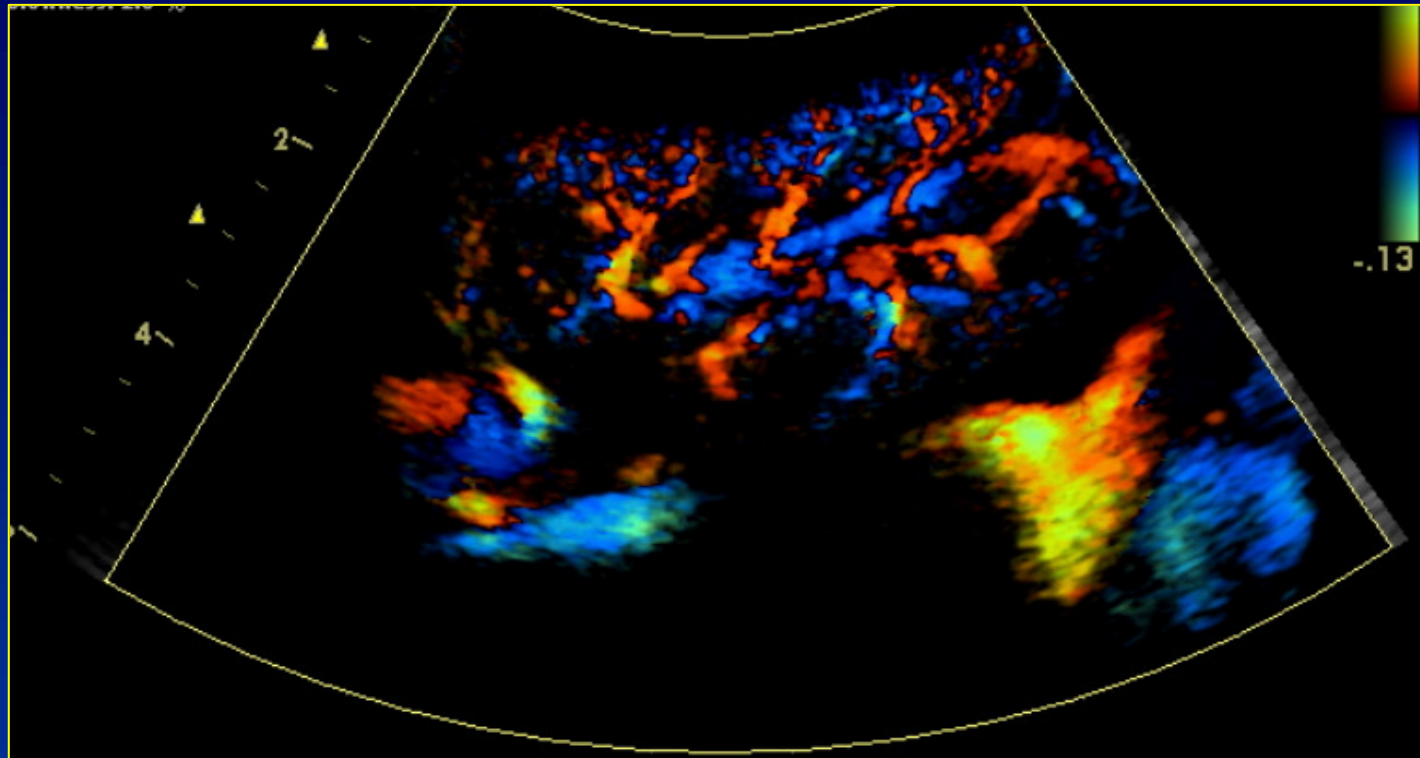


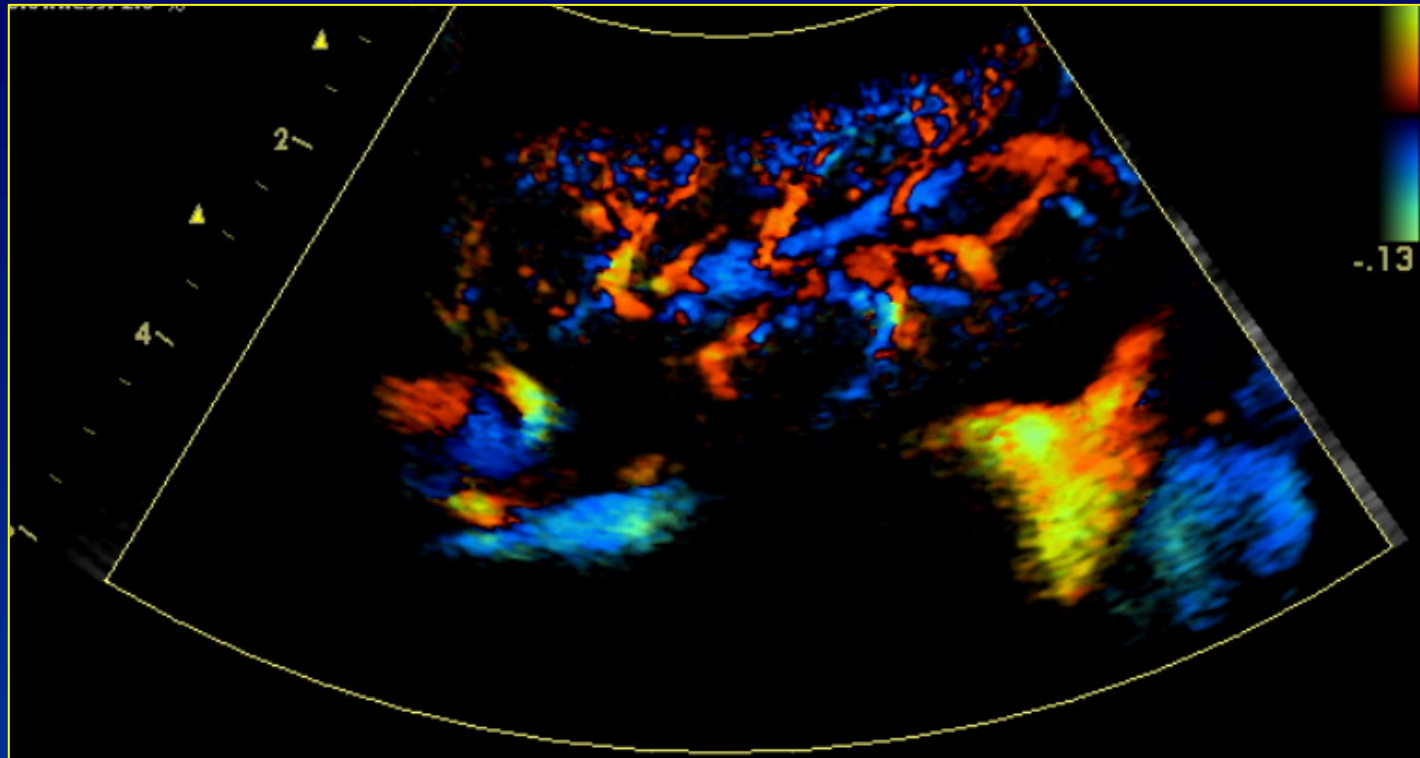
Artères Rénales



Michel Dauzat, Jean-Pierre Laroche, Thierry Puttemans,

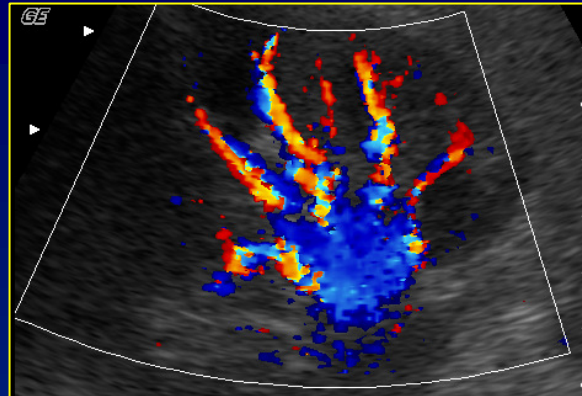
Artères Rénales

-A-



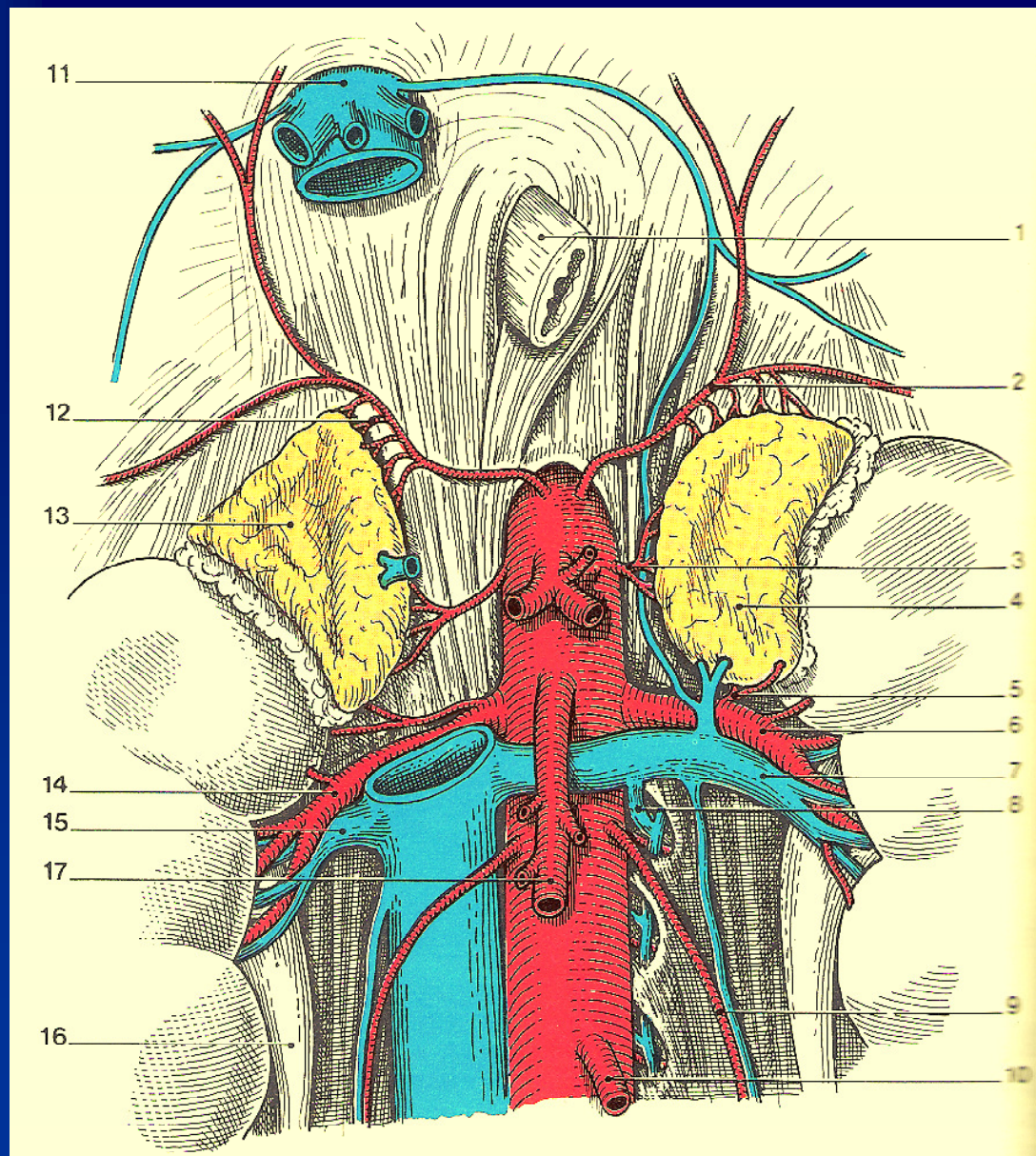
Michel Dauzat, Jean-Pierre Laroche, Thierry Puttemans,

Artères Rénales



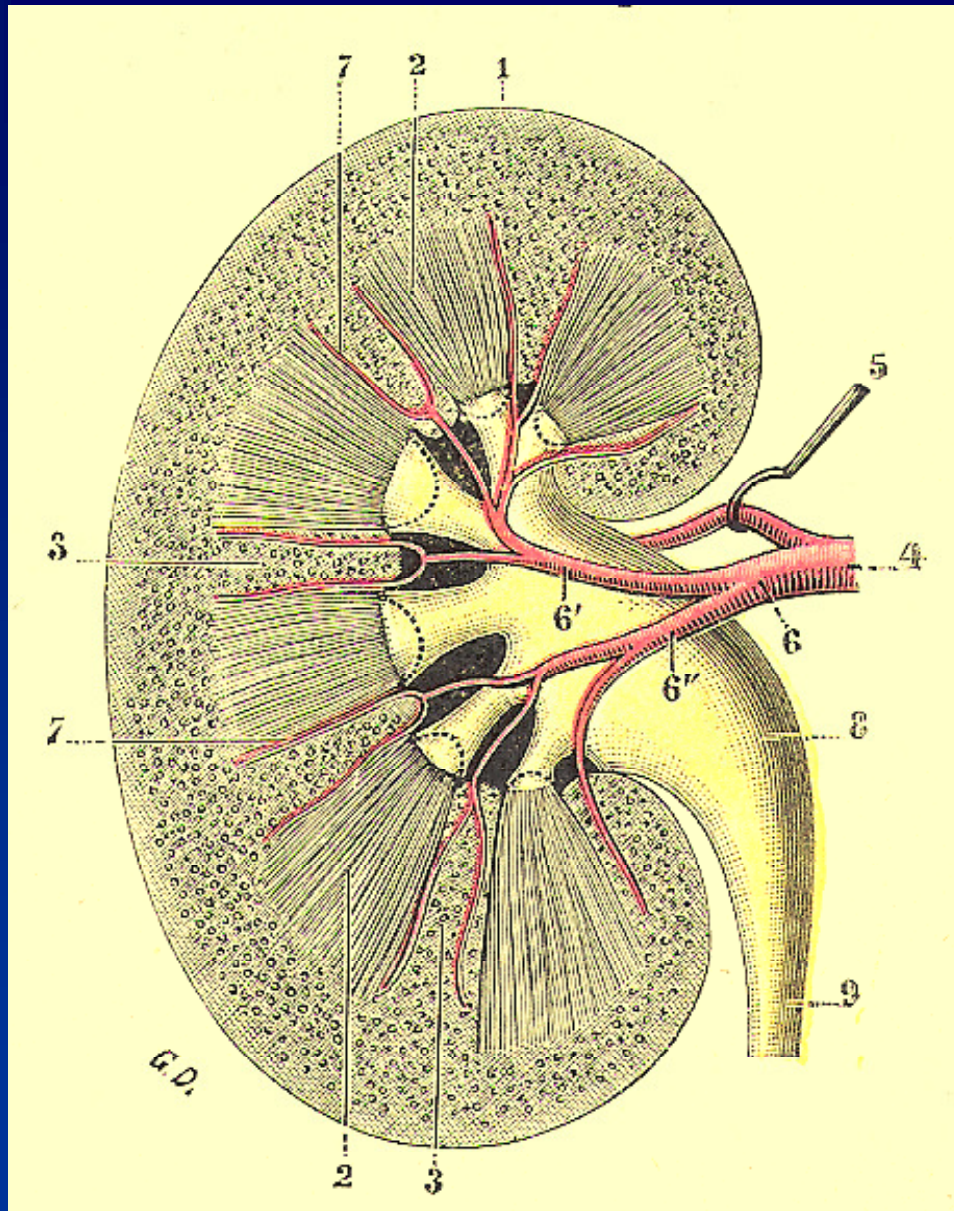
- Anatomie
- Méthodologie d'examen
- Interprétation
- Indications

Anatomie



Artères et Veines
Rénales

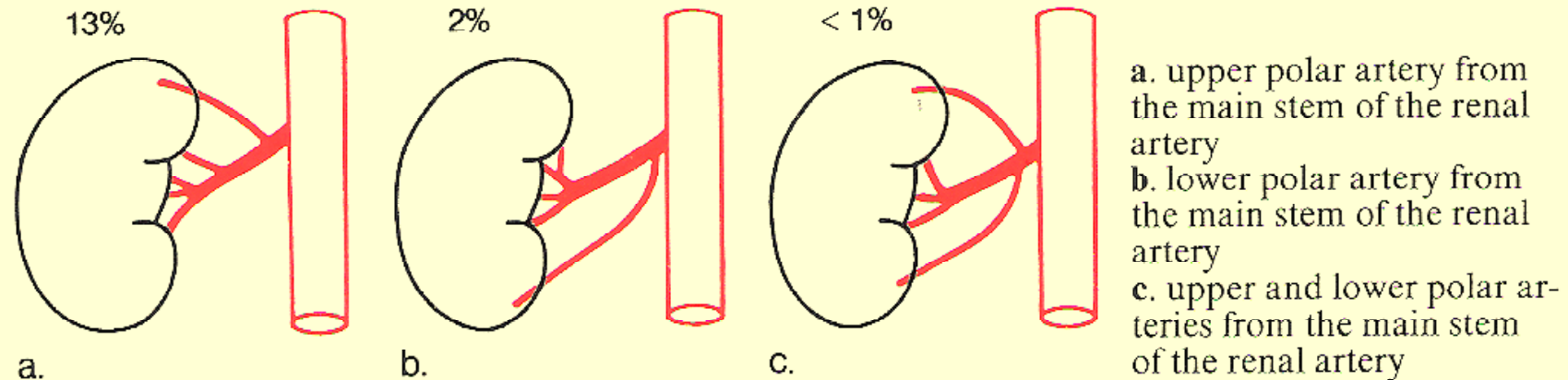
Anatomie



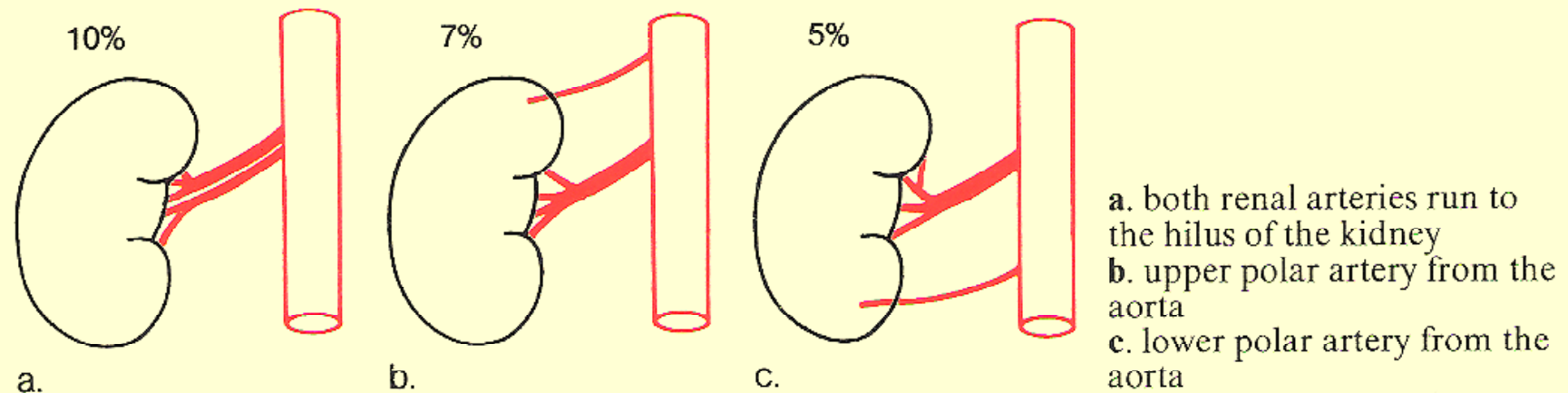
Artères rénales

Anatomie

2. Polar arteries from the renal artery 15%



3. Two renal arteries 22%

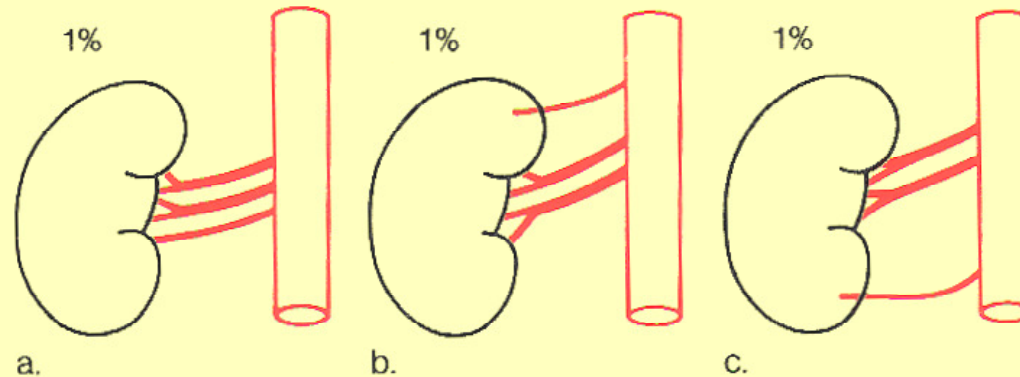


Variation fréquente : 2 artères rénales ou art. polaires

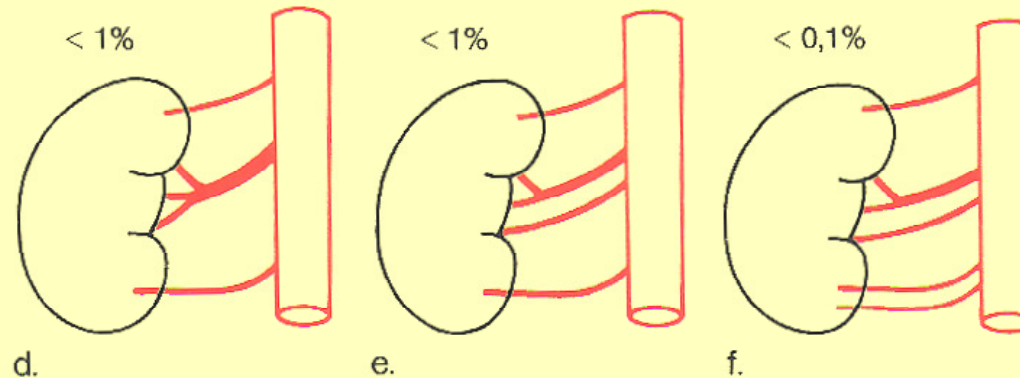
Anatomie

4. Three or more renal arteries 4%

- a. all three renal arteries run to the hilus
- b. upper polar and two hilar arteries from the aorta
- c. lower polar and two hilar arteries from the aorta

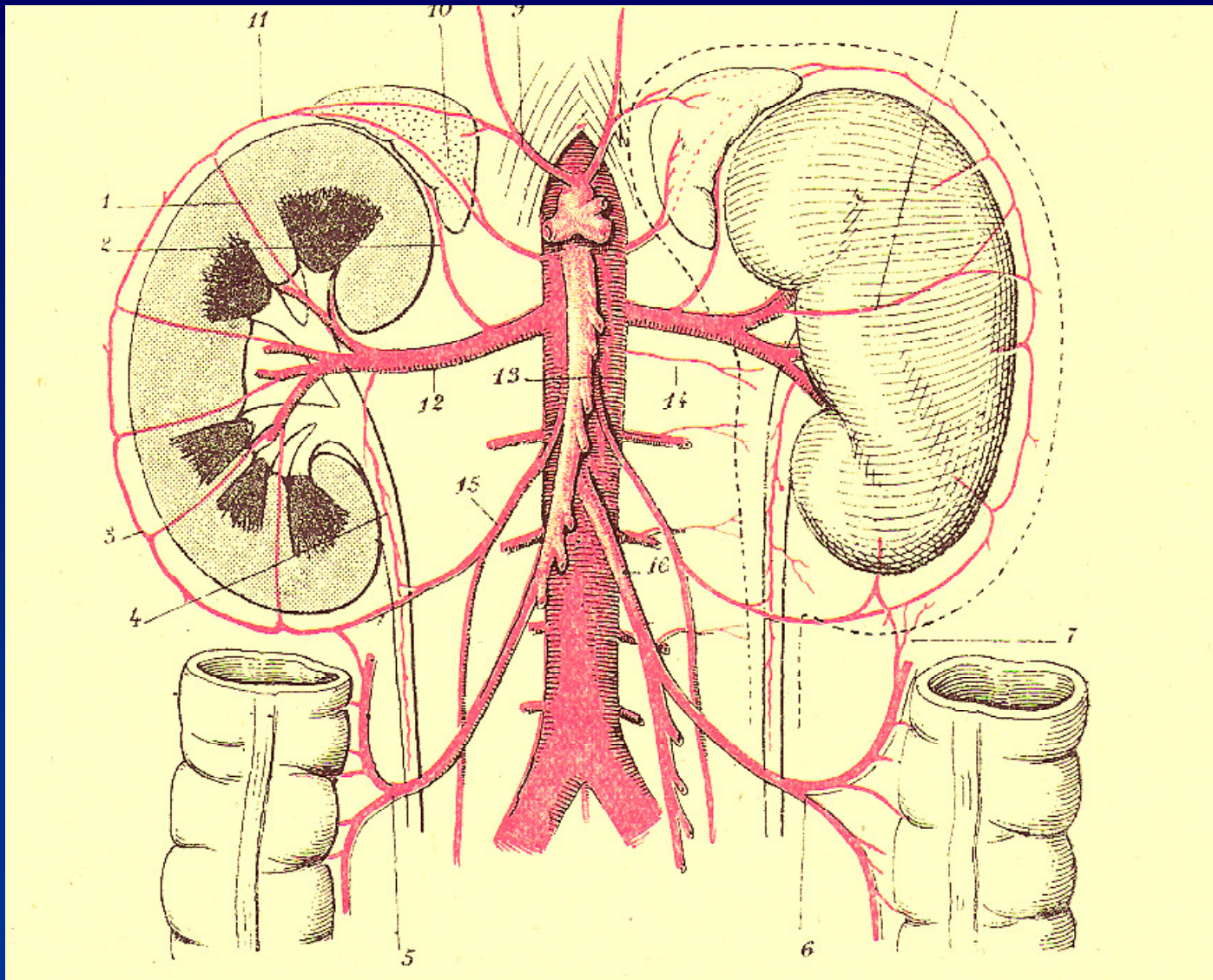


- d. upper and lower polar artery from the aorta
- e. four renal arteries (because of the rare incidence no further classification is given)
- f. five renal arteries (numerous combinations)



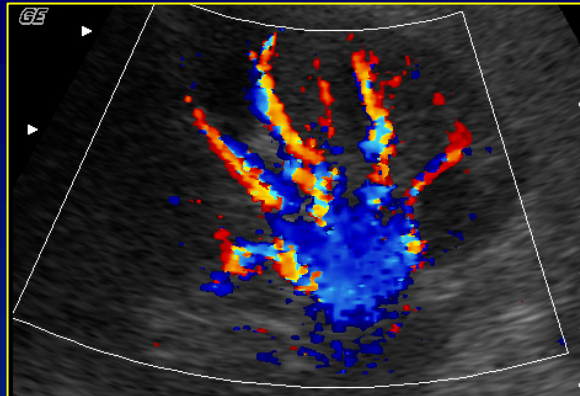
Variation rare : 3 artères rénales

Anatomie



Branches et Anastomoses

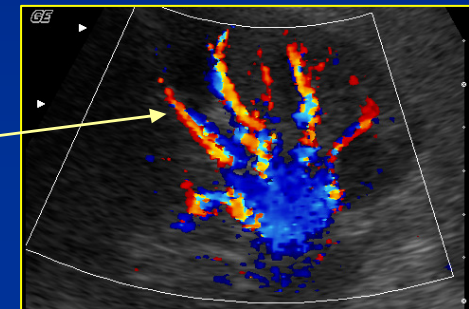
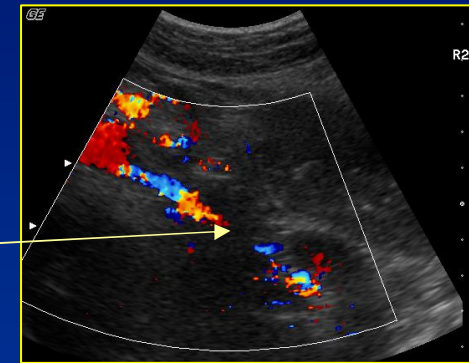
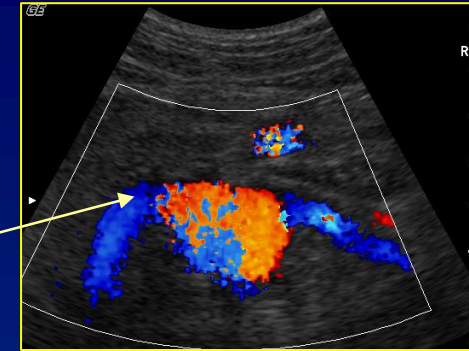
Artères Rénales



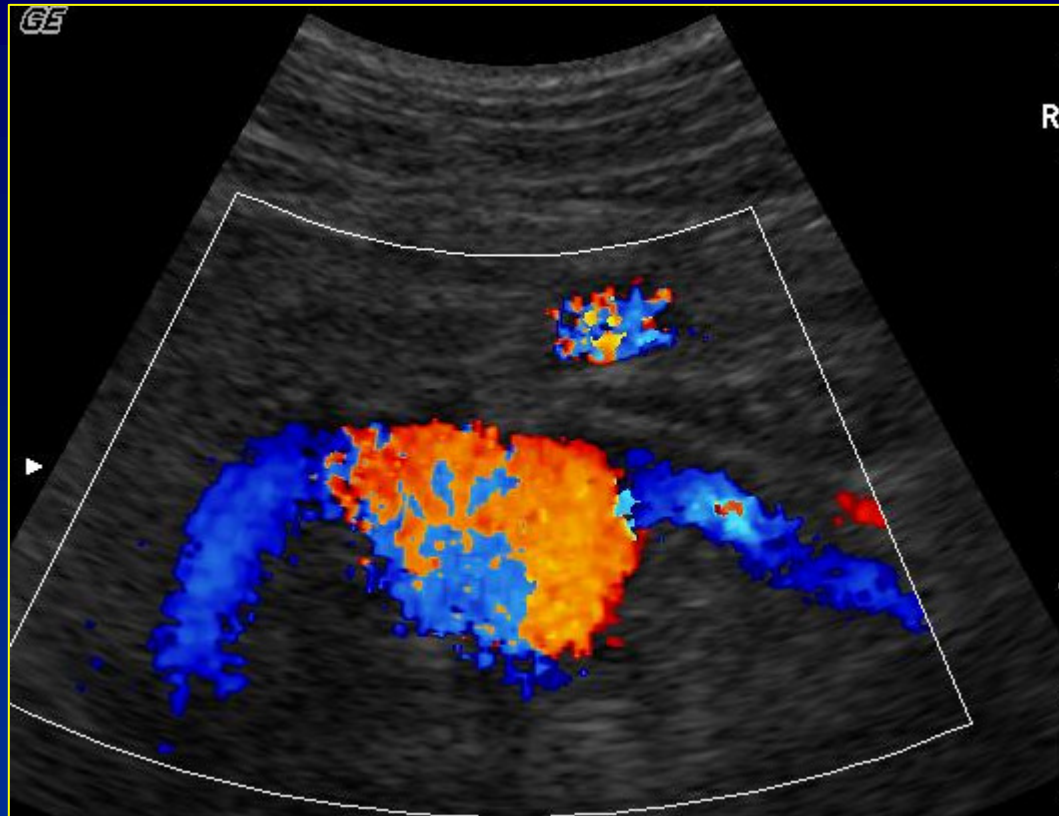
- Anatomie
- Méthodologie d'examen
- Interprétation
- Indications

Méthodologie d'examen

- Examen général (aorte et branches)
- Examen de la région ostiale
- Examen de la portion tronculaire
- Enregistrement au sein du parenchyme

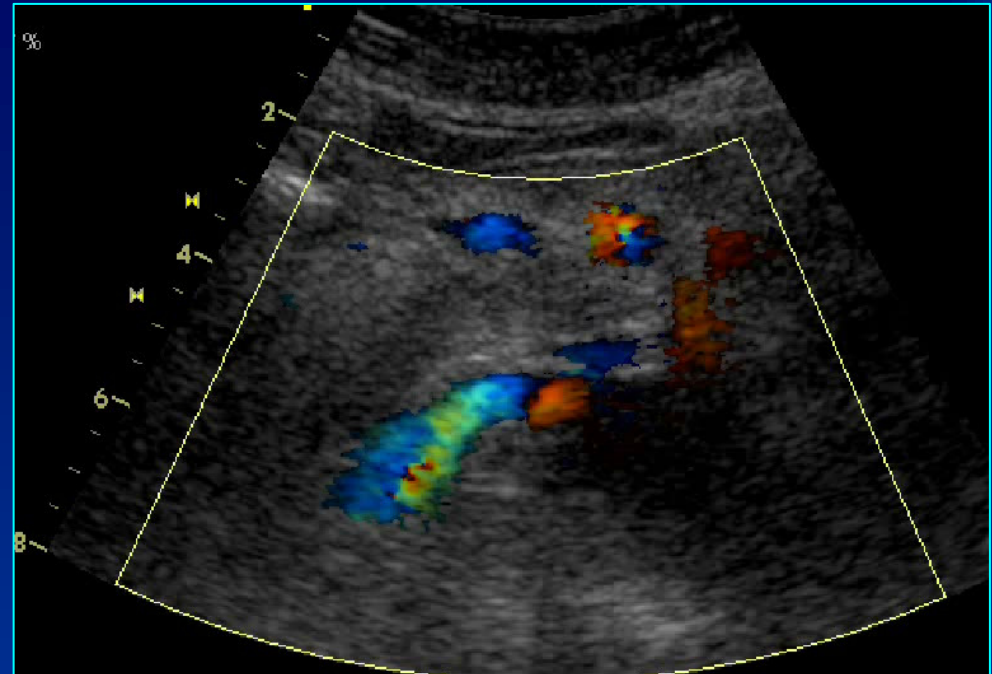
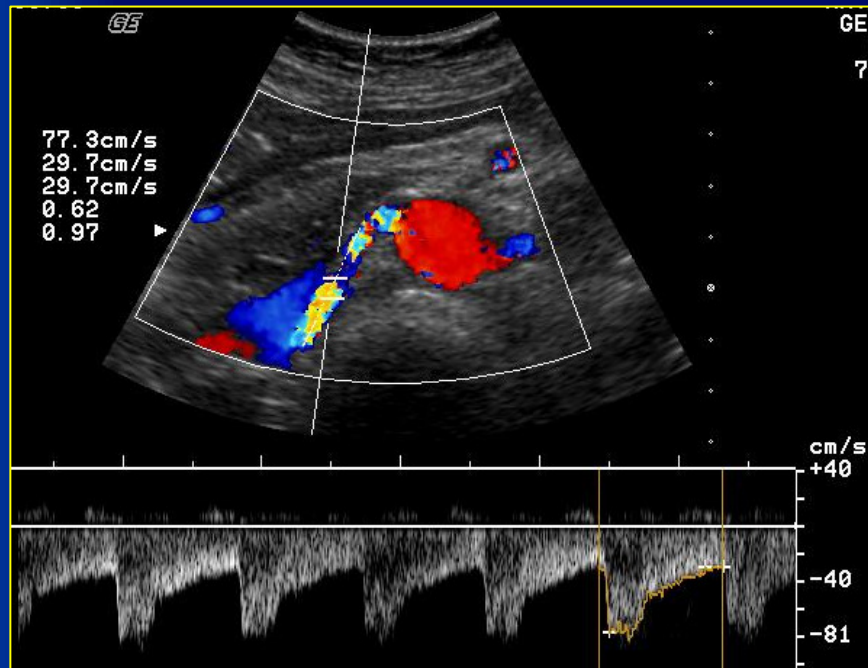


Examen Normal



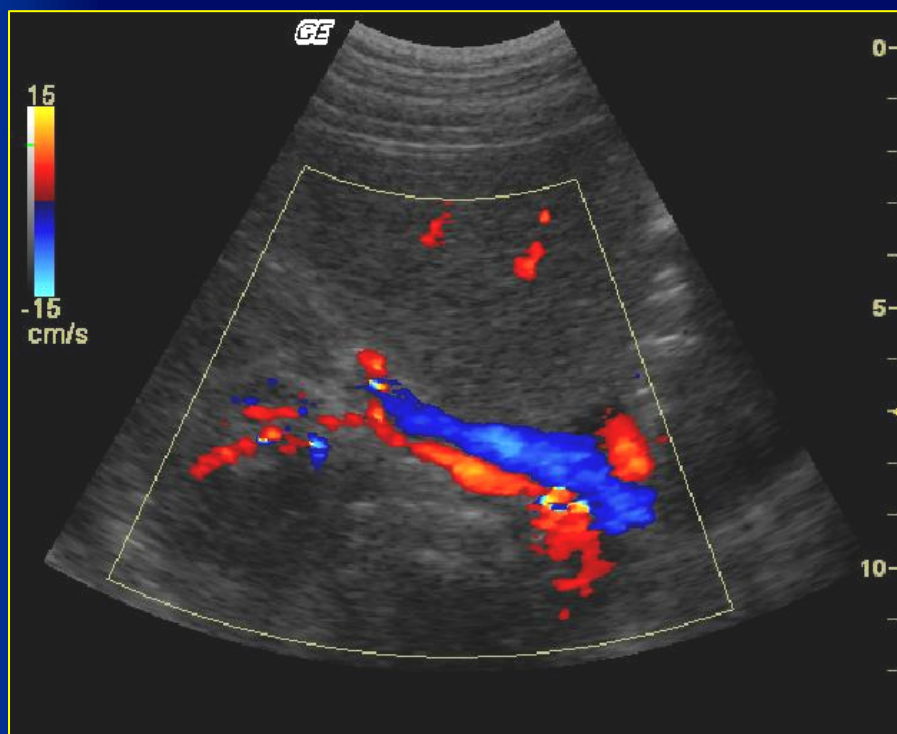
Portion Ostiale et Tronculaire - Voie antérieure

Examen Normal

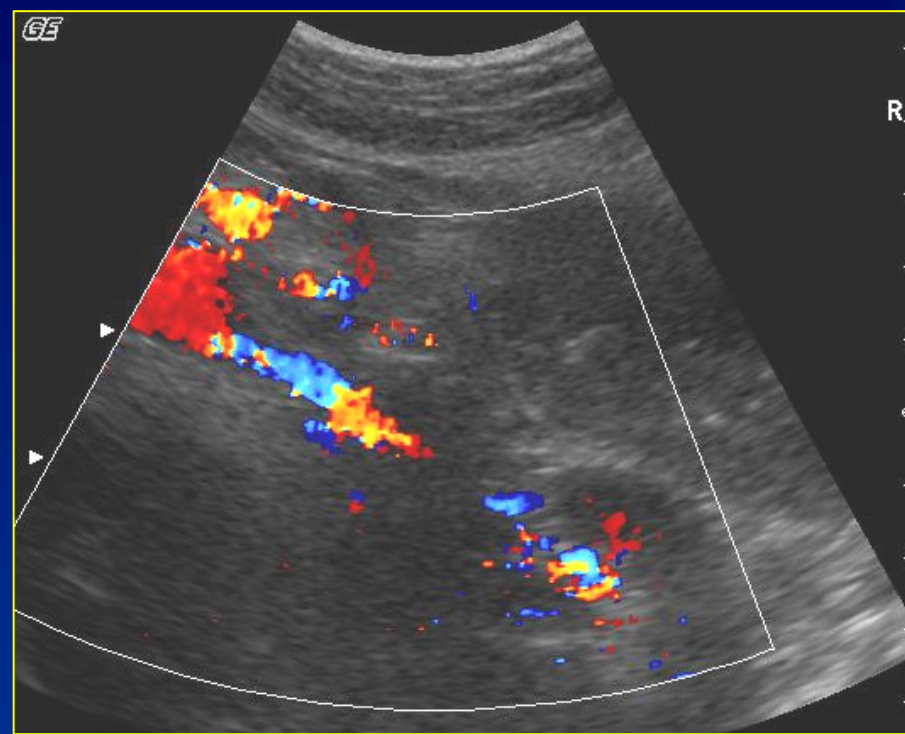


Artère Rénale Droite : abord antéro-latéral

Examen Normal



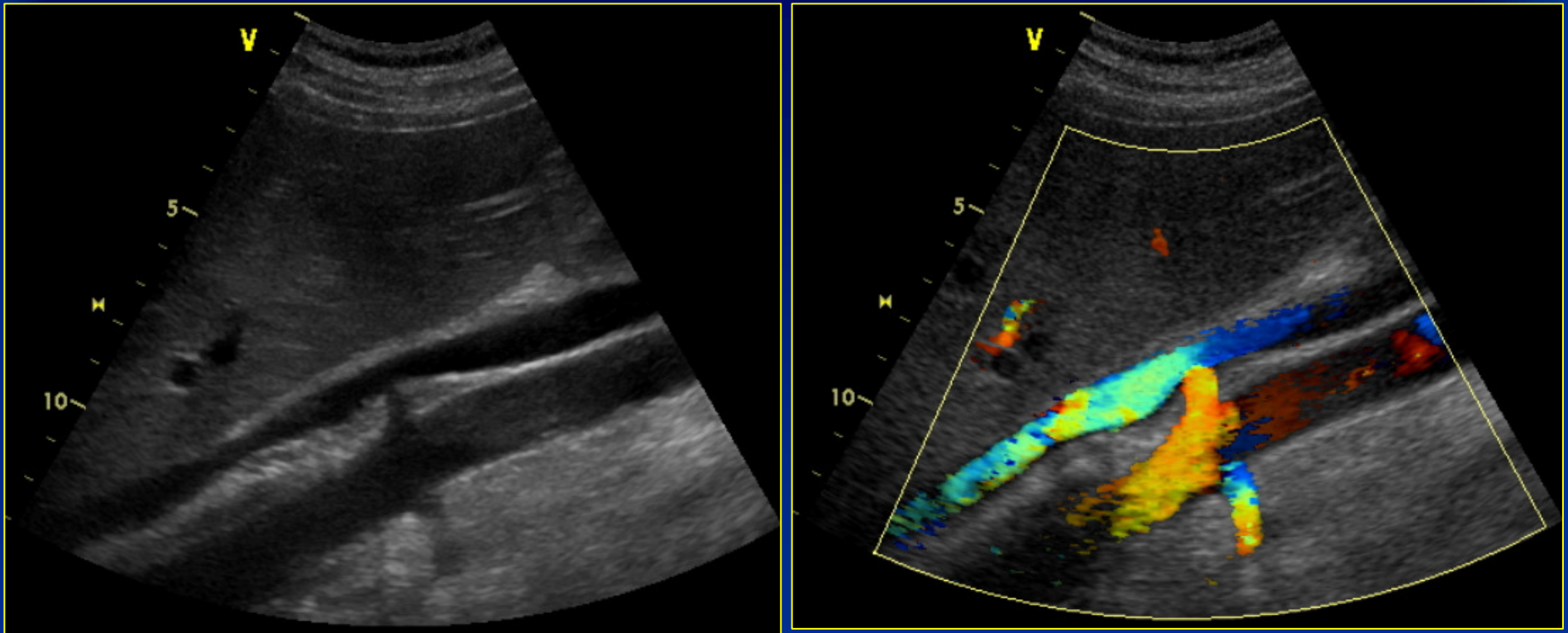
Rein droit



Rein gauche

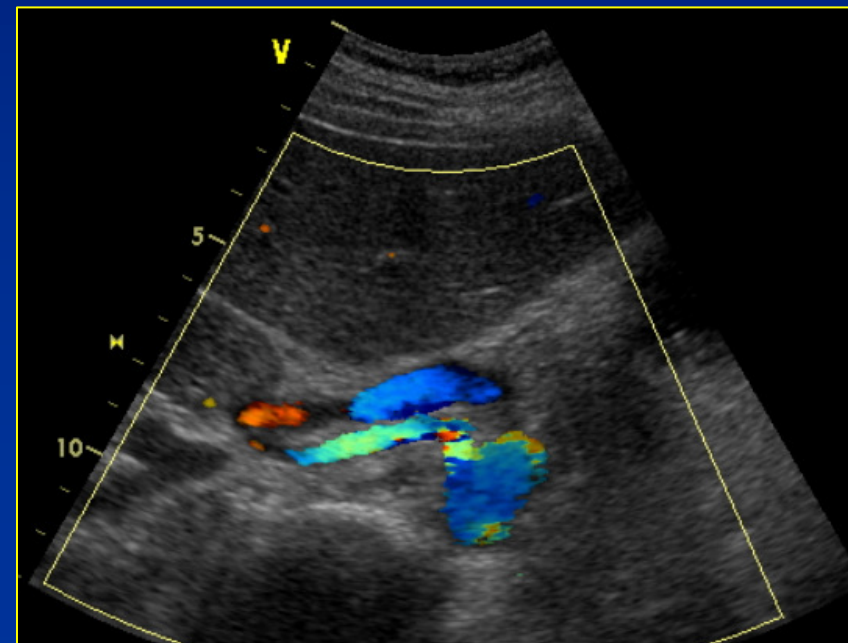
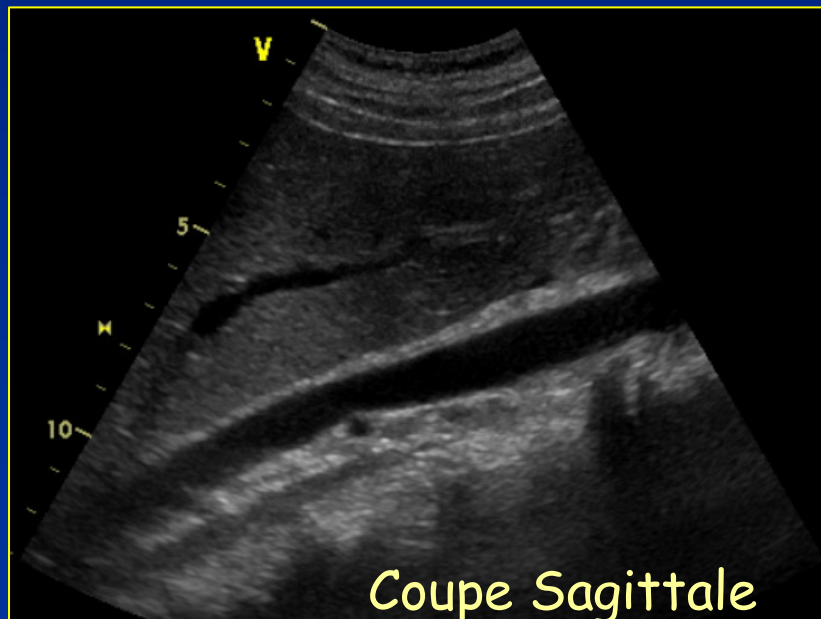
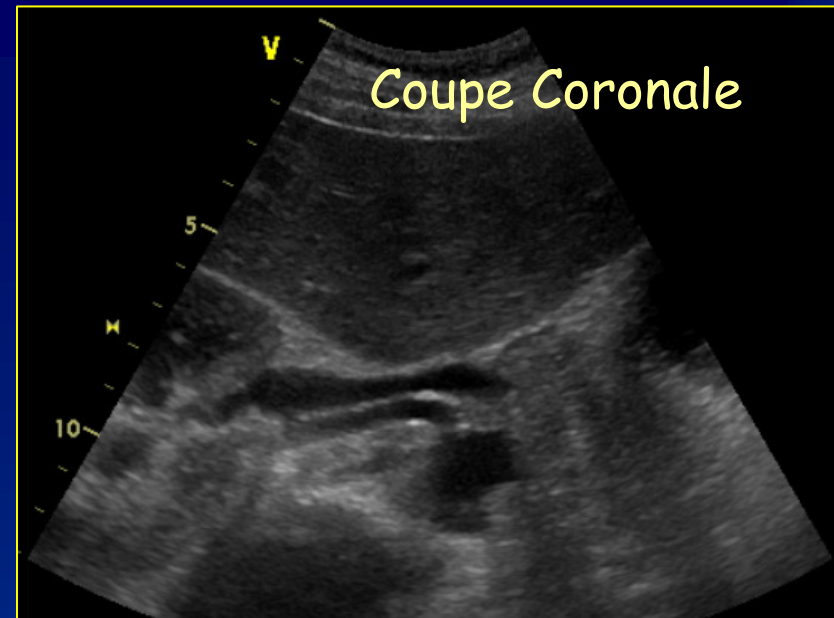
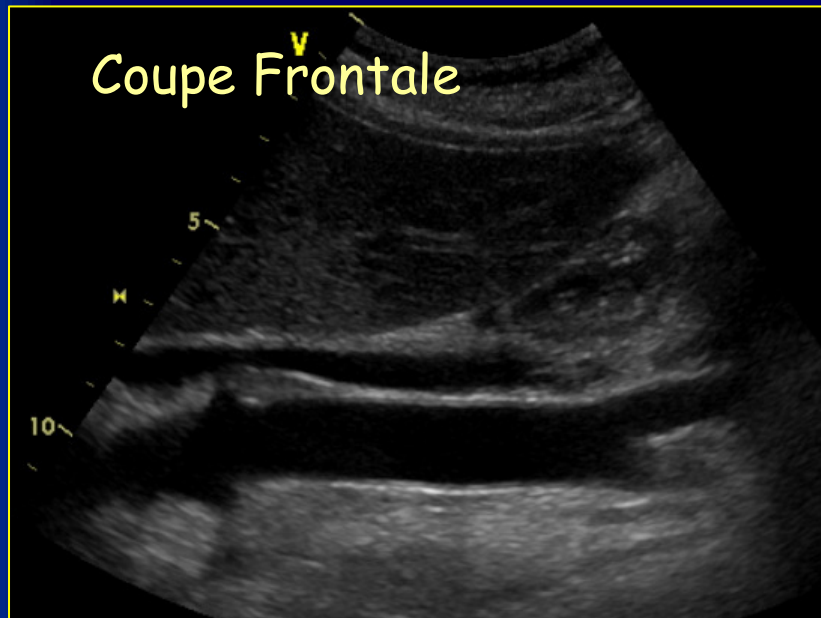
Artère et Veine Rénale : abord antéro-latéral

Méthode

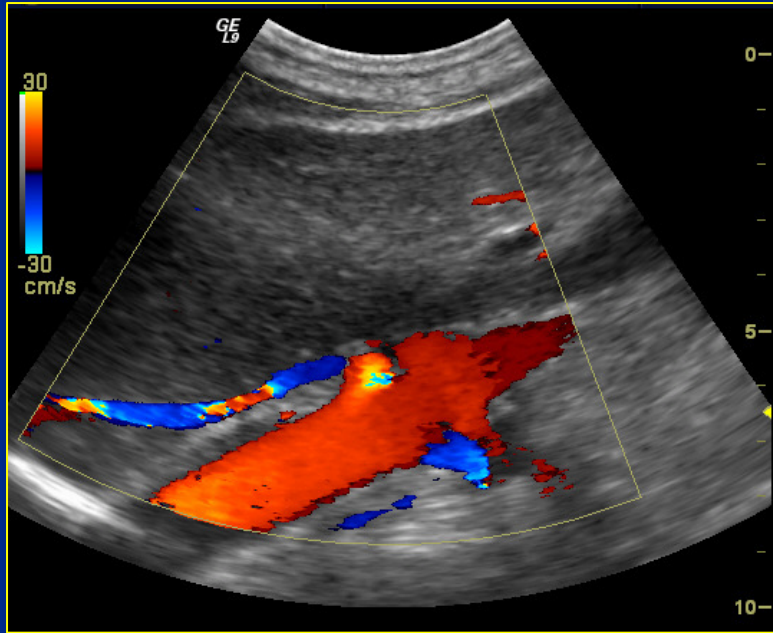


Coupe Frontale

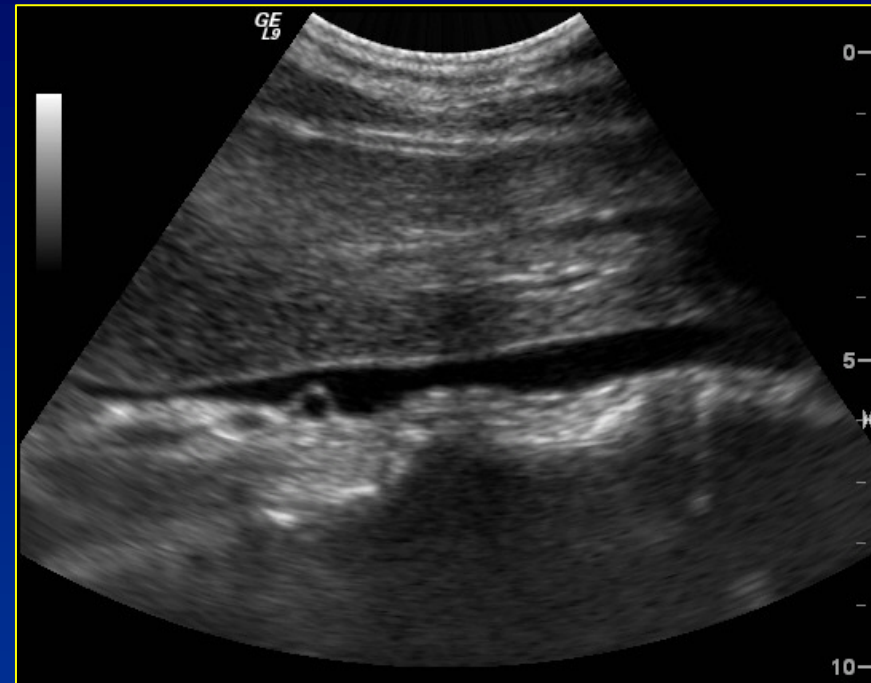
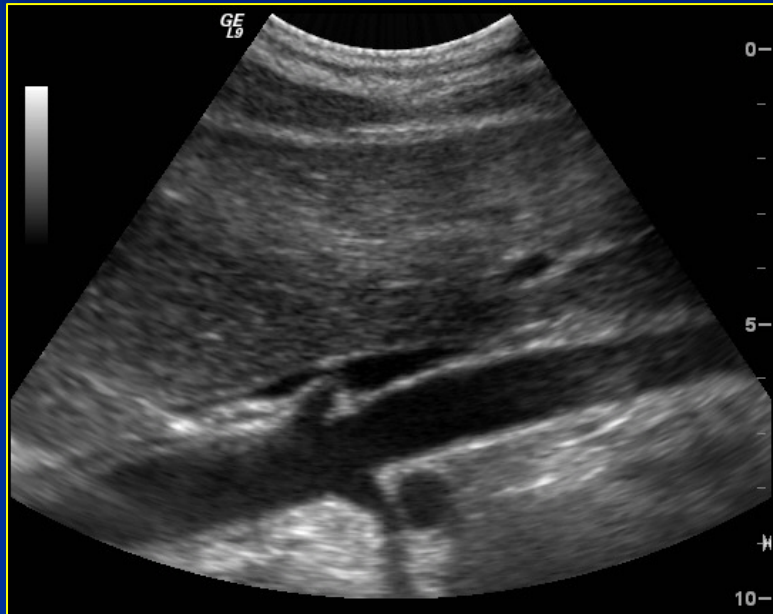
Méthode



Examen Normal

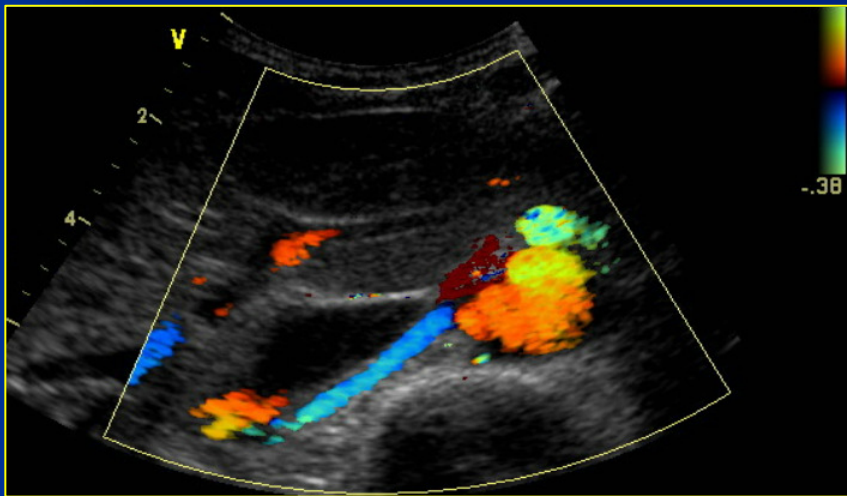
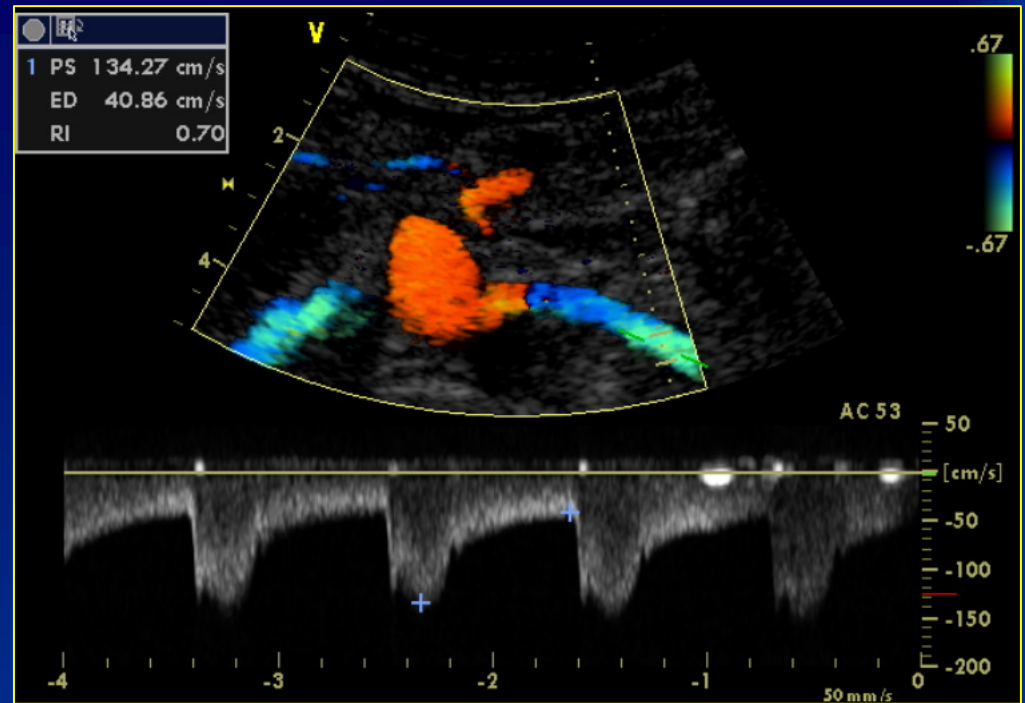
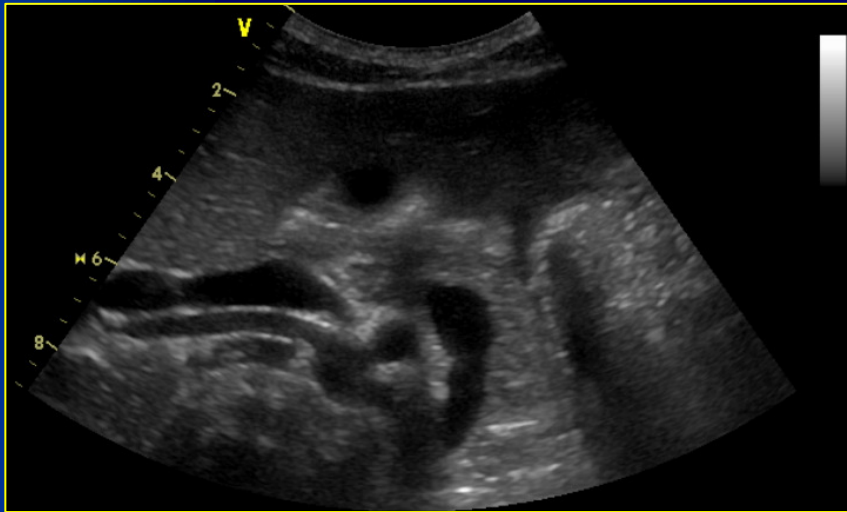


Coupe Frontale :
A. rénale droite et gauche



Coupe Sagittale :
A. rénale droite

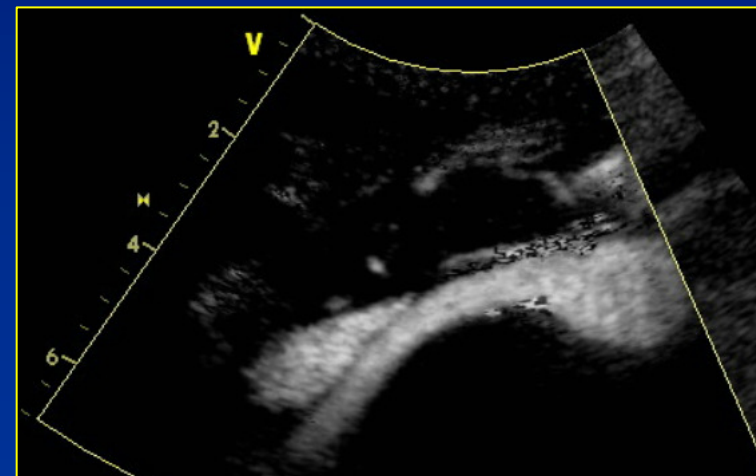
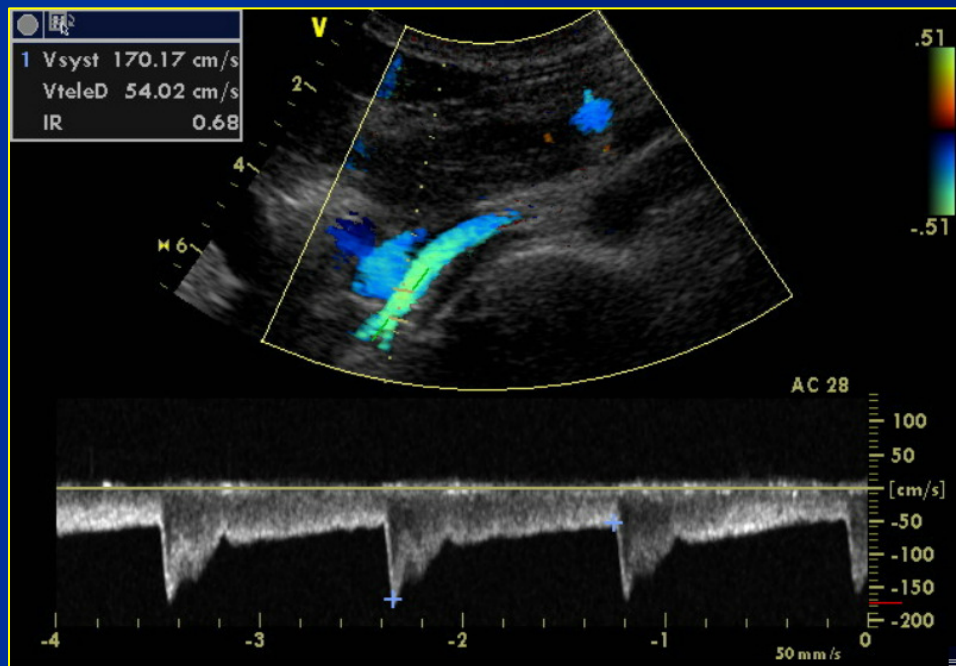
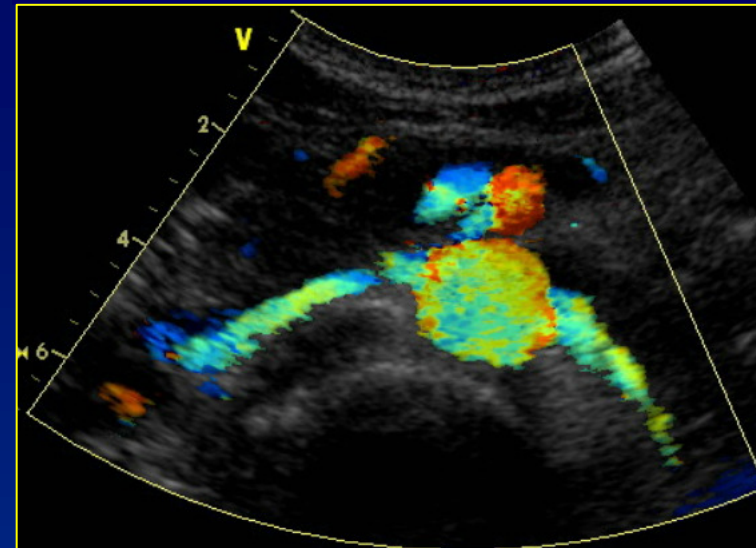
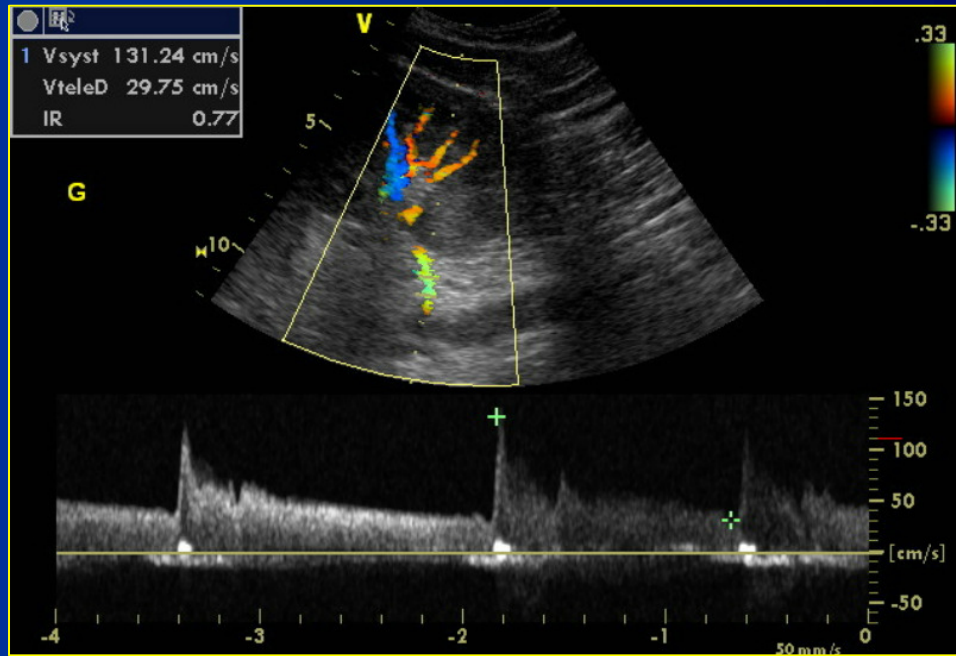
Examen Normal



Coupe Transversale : A. rénale droite

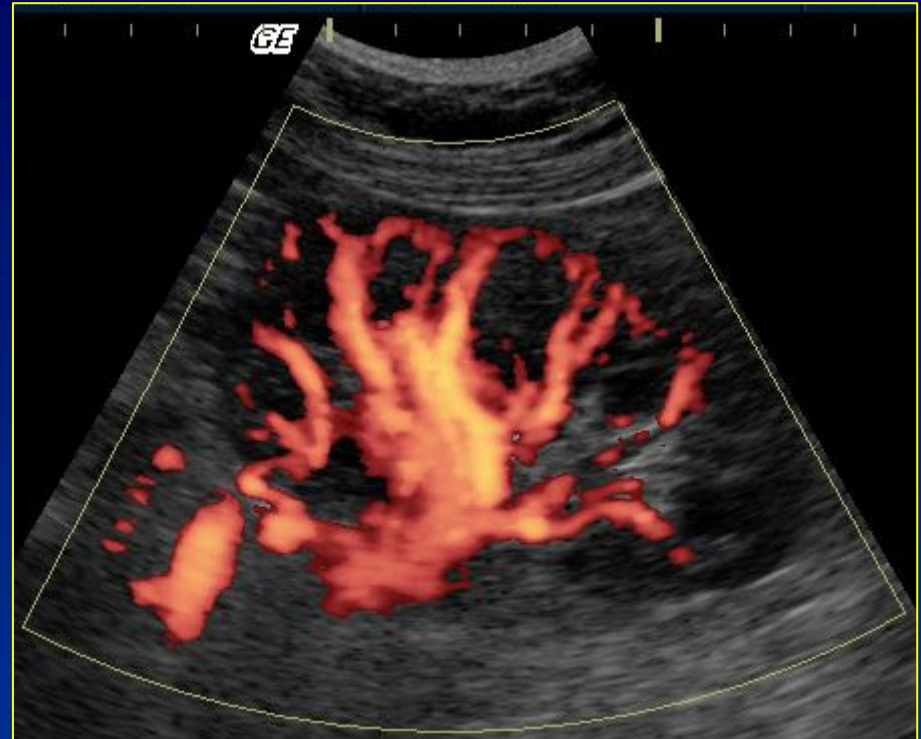
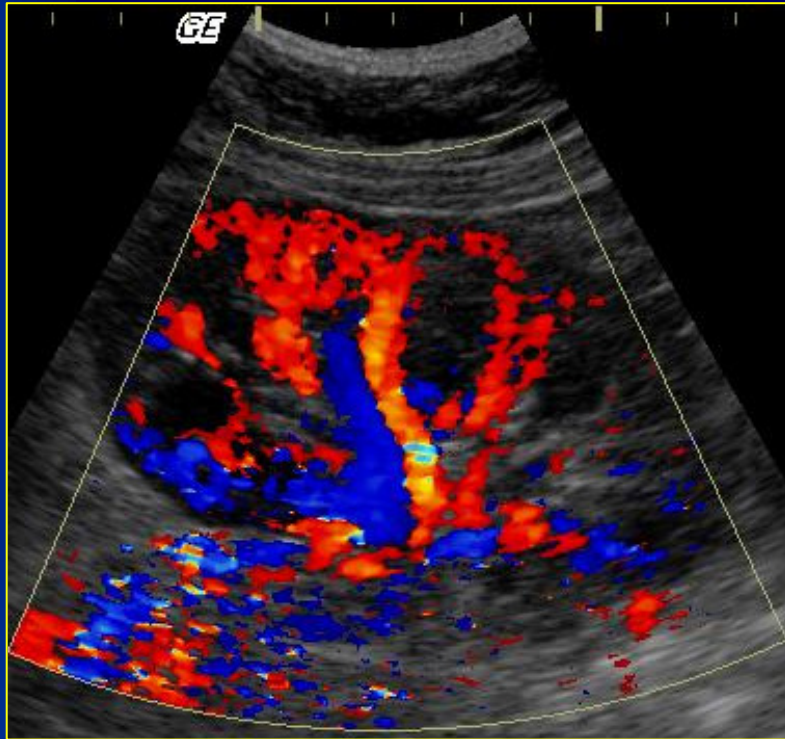
Coupe Transversale :
A. rénale droite et gauche

Examen Normal

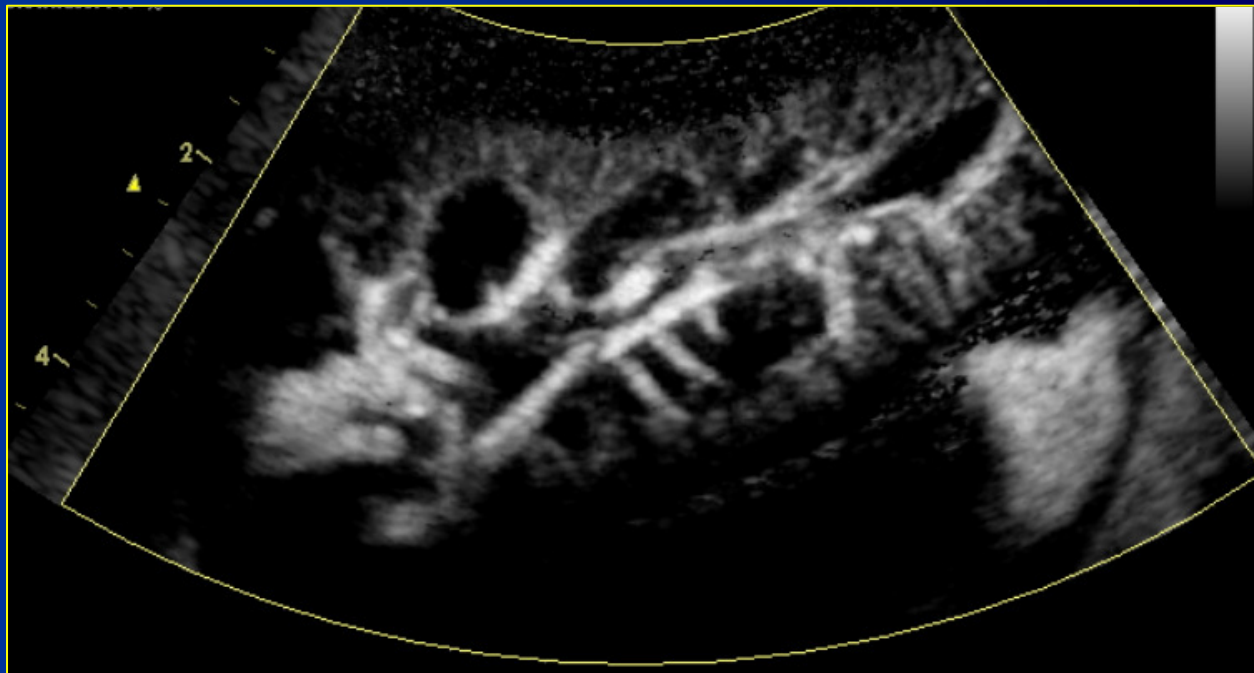


Coupe Transversale :
A. rénale droite

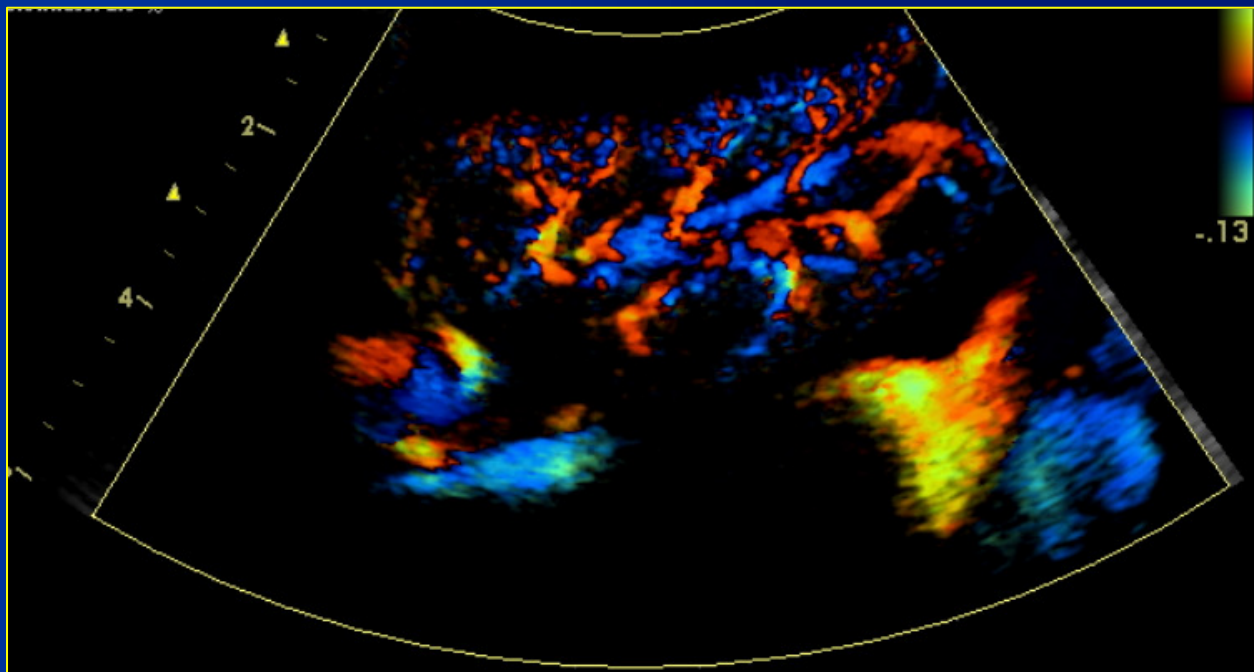
Examen Normal



Flux intra-parenchymateux - Artères inter-lobaires

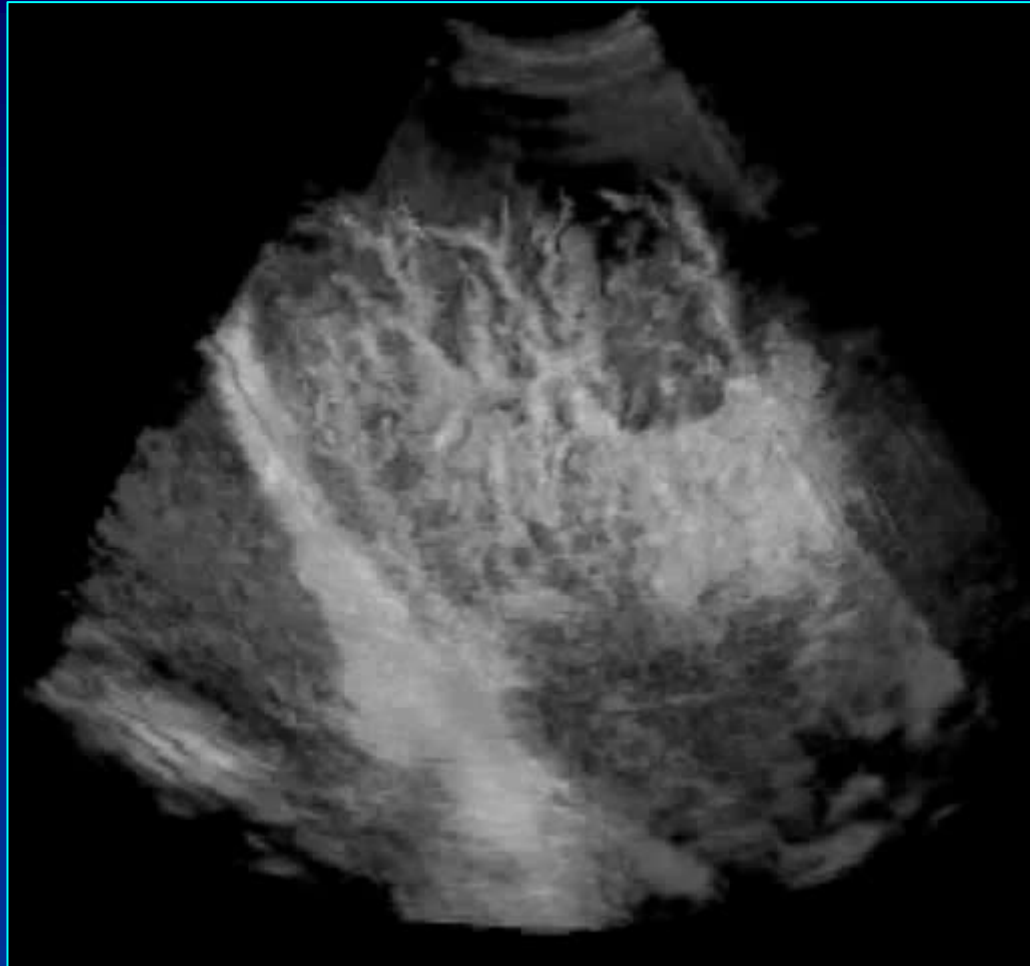


Examen
Normal



Flux intra-
parenchymateux

Examen Normal



Flux intra-parenchymateux - Artères inter-lobaires

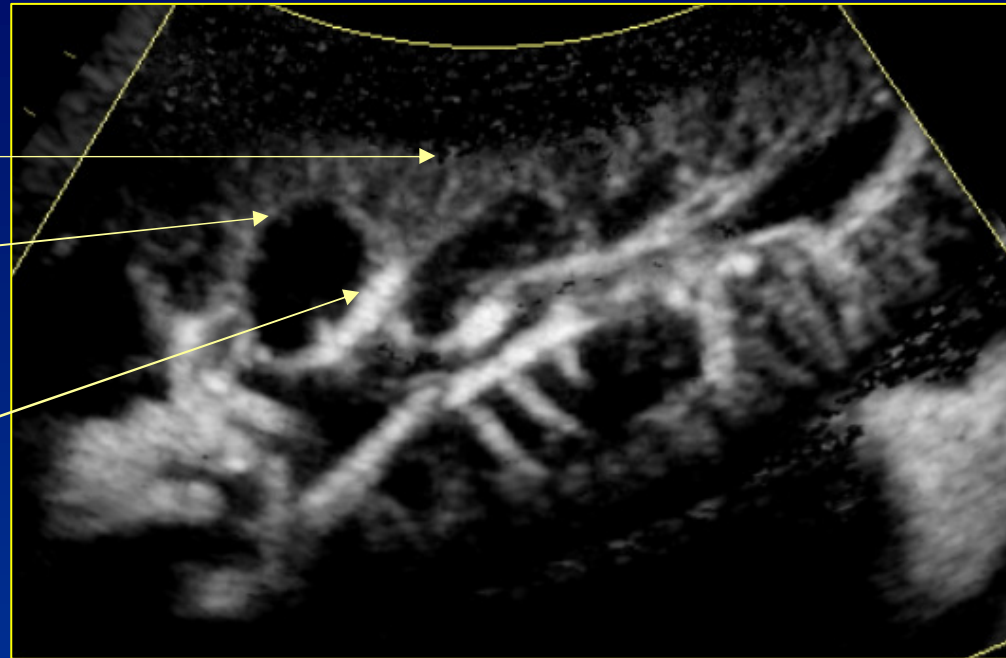
Examen Normal

Sites d'enregistrement Doppler dans le parenchyme :

- A. inter-lobulaires

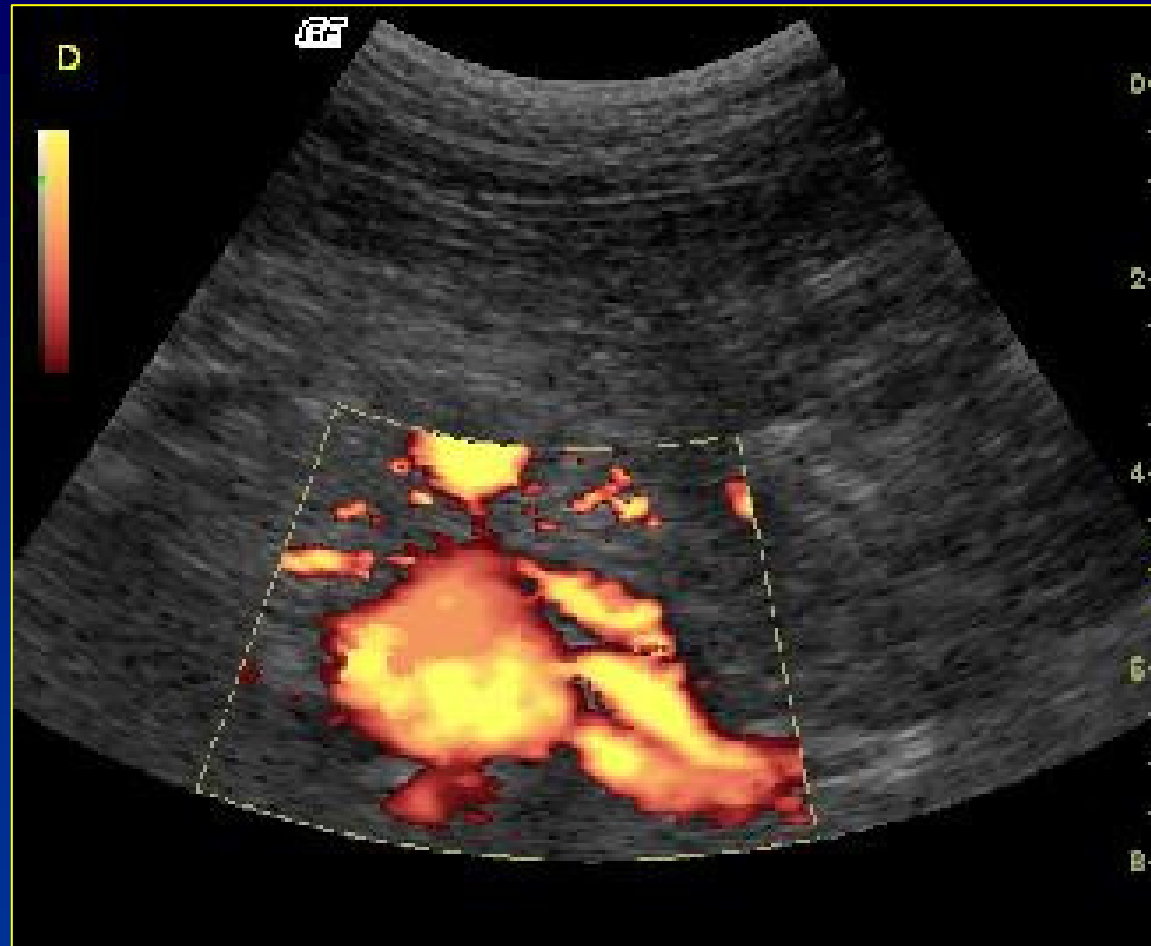
- A. arquées

- A. inter-lobaires



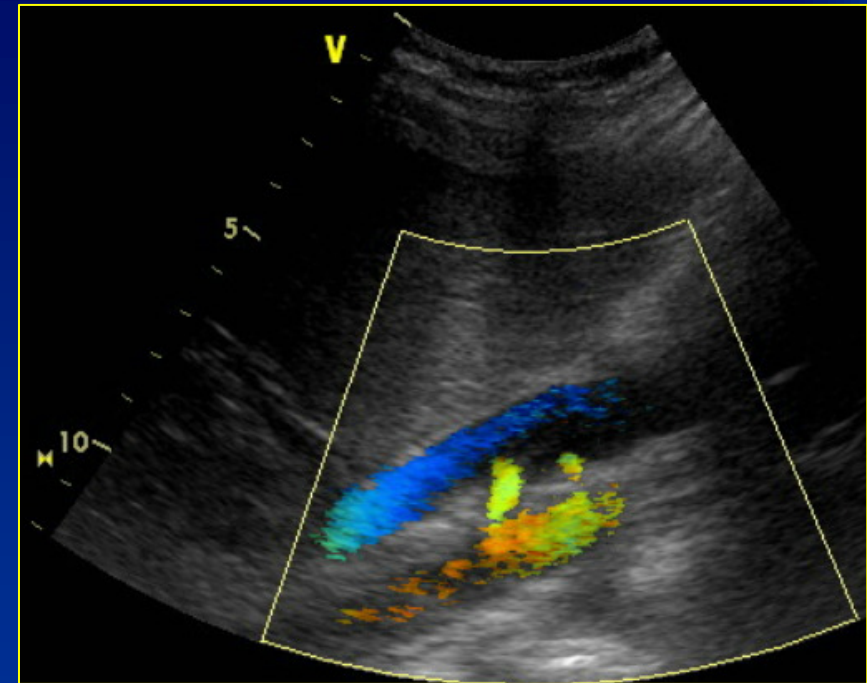
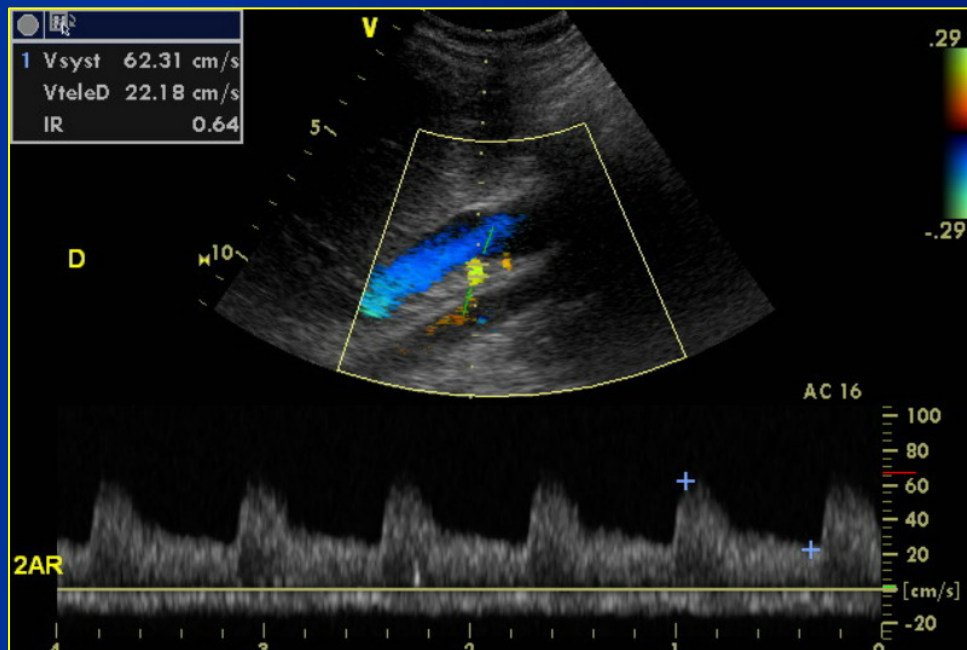
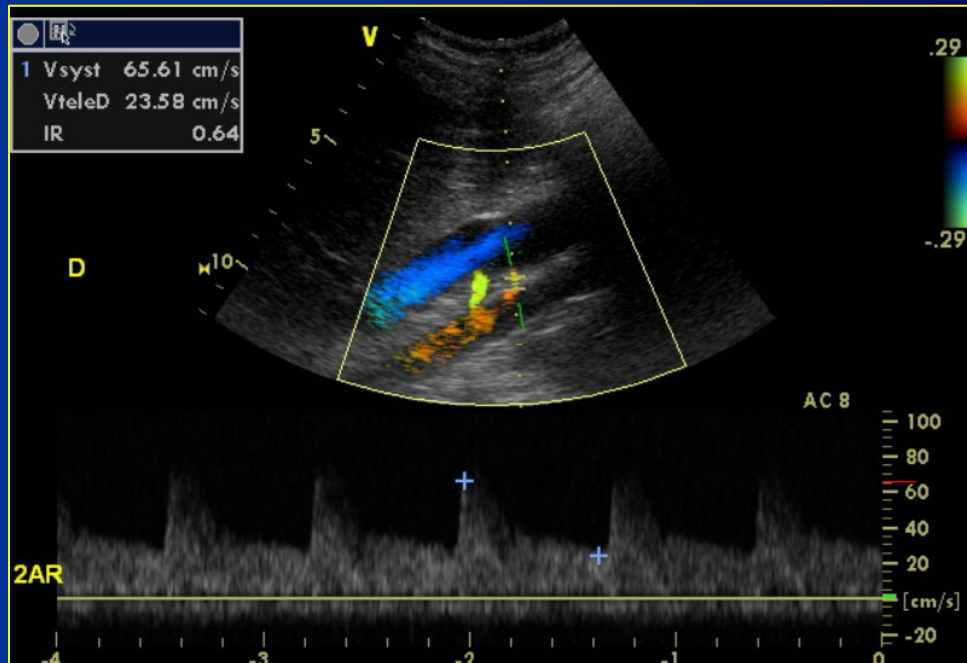
La qualité du signal et la faisabilité sont meilleures sur les artères inter-lobaires

Variantes



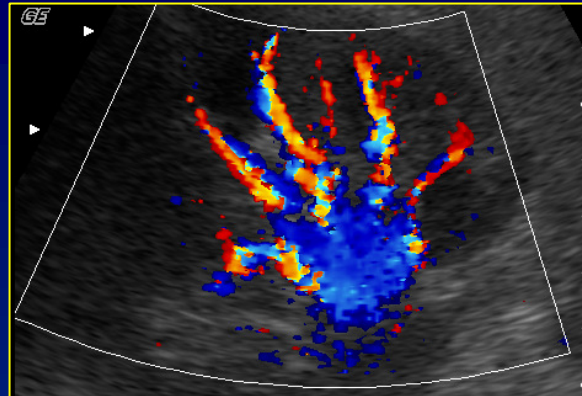
Double artère rénale gauche

Variantes



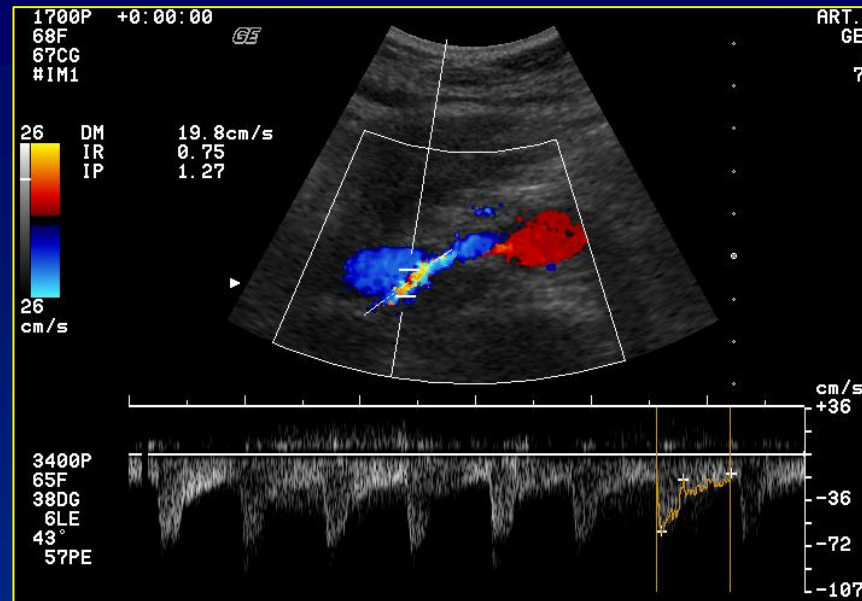
Double artère
rénale gauche

Artères Rénales



- Anatomie
- Méthodologie d'examen
- Interprétation
- Indications

Interprétation



- Vitesse systolique maximale : 80 - 120 cm/s
- Temps d'ascension systolique : ≤ 70 ms
- Accélération systolique
- Modulation
- Indice de Résistance (IR) : 0,5 - 0,7
- Rapport Réno-Aortique $< 3,5$

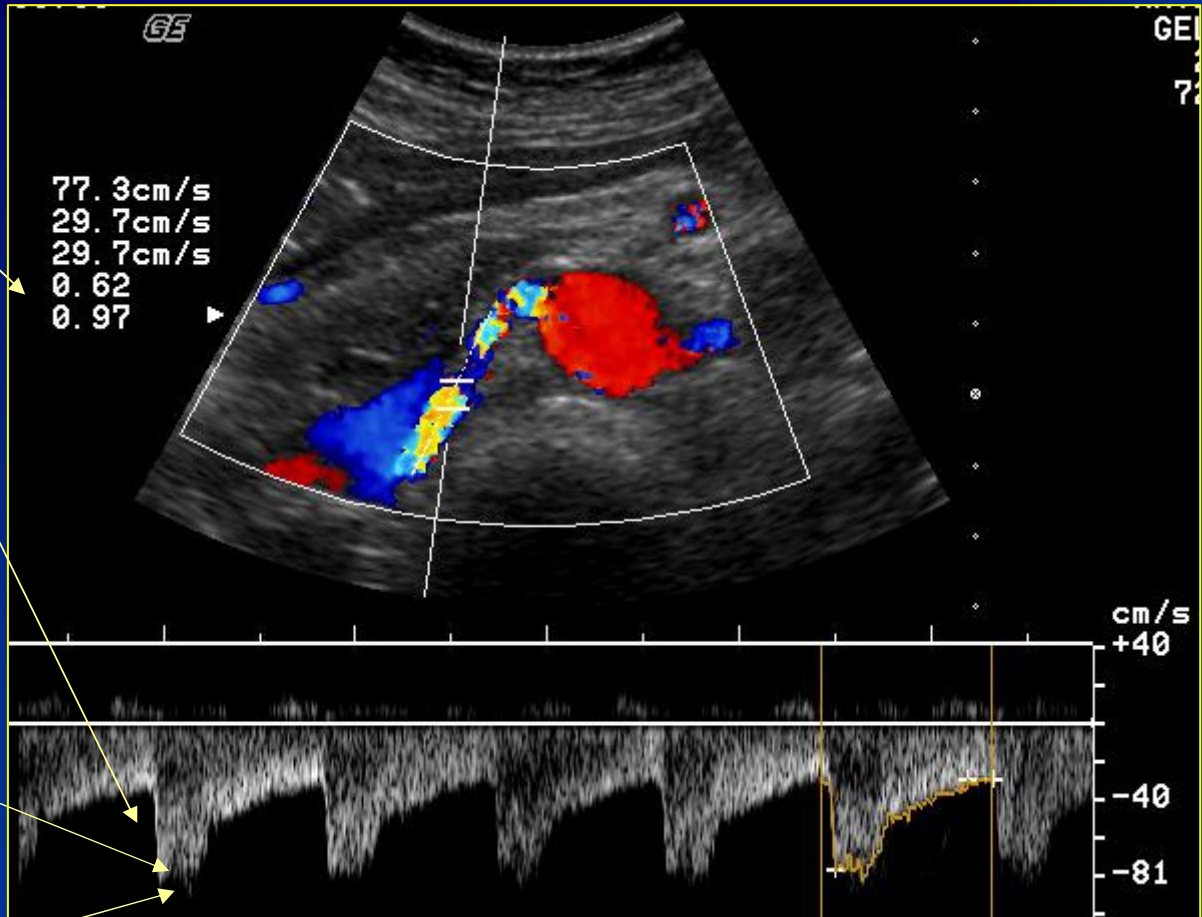
Résultats normaux

- IR bas
(0,5 - 0,75)

- Front de montée
systolique raide

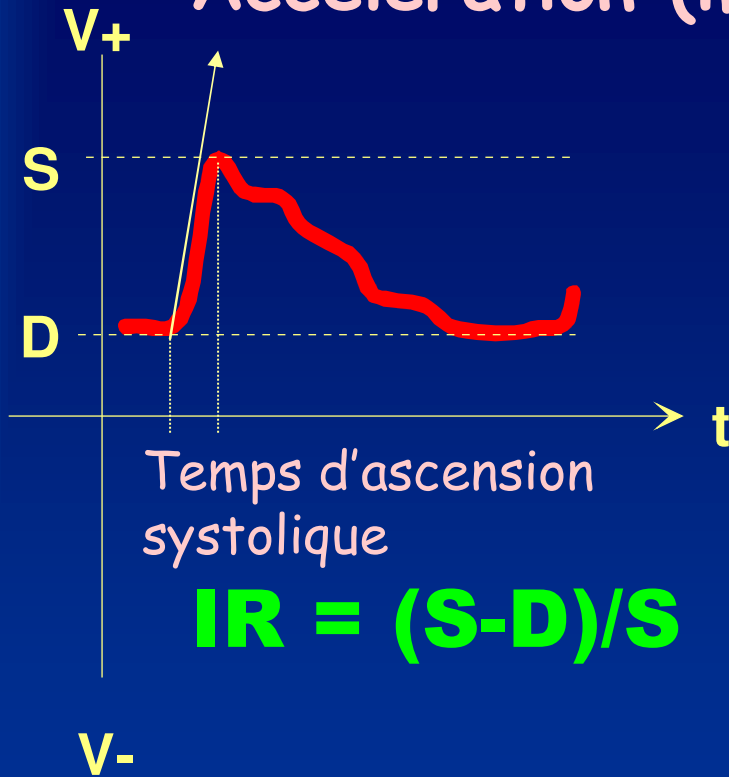
- Encoche
systolique

- Vitesse maximale
Systolique

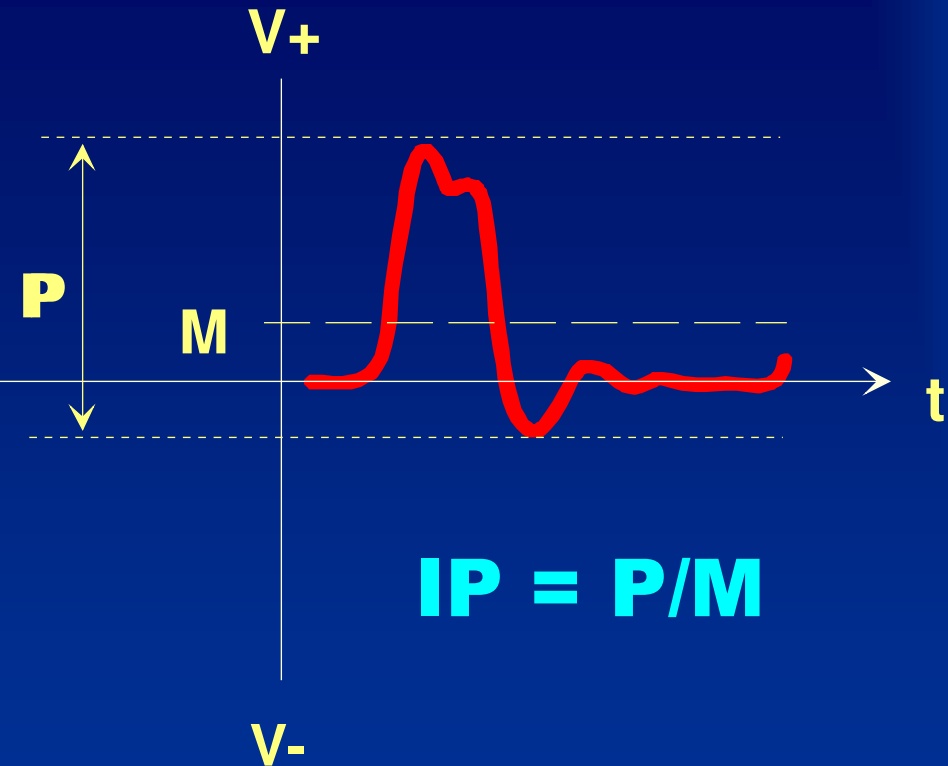


Résistance Circulatoire

Accélération ($m.s^{-2}$)



Indice de Résistance
(T. Planiol & L. Pourcelot)



Indice de Pulsatilité
(R. Gosling)

Modulation Systolique

