# Inter-rater reliability of contractility when measured with MR dP/dt

Presenter, Co-Author: Sebastian Ayala, MD (PGY-4) Co-Author: Neal Fleming, MD, PhD (Mentor)
Department of Anesthesiology and Pain Medicine, UC Davis School of Medicine

#### **BACKGROUND**

- Assessment of contractility is of clinical significance given its load
  and length independent properties that are responsible for the
  development of force (inotropy), and velocity (clinotropy).(1)
   Contractility when surveyed with TEE or calculated from an
  arterial waveform often impacts clinical decision making.
   Contractility is not a static consideration. Hemodynamic factors
  including ejection fraction, afterload, preload, and heart rate all
  contribute dynamic variables when assessing overall cardiac
  performance.(2,3)
- Major Aim: The purpose of this study was to assess the interrater reliability among three different groups of users (medica students, anesthesiology residents, and TEEcertified/experienced anesthesiologists measuring already captured TEE mitral requiration to donolar images

#### METHODS

20 images were selected from data collected under the UC Davis IRB approved protocol: Comparison of Arterial Pressure Waveform Derived dp/dt Versus Transesophageal Echocardiogram Derived Left Ventricular dp/dt Max in the intra-operative setting (ClinicalTrials.gov: Identifier: NCT04726852) to include a diverse sample of flow patterns.

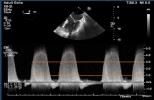
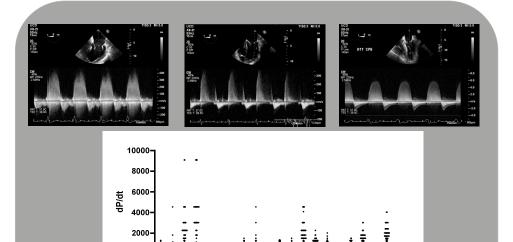


Figure 1: Measurements were performed utilizing two points (100 and 300 cm/s) from the continuous-wave Doppler spectrum of the MR jet.



The measurements of dP/dt across various training levels were closely in agreement with one another per Krippendorf's alpha



gure 2: Scatterplot showing dP/dt (y-axis) across each respective TEE image ( x-axis)

#### RESULTS

Across a total of 20 selected TEE acquired images, kappa across medical students, residents, and attendings.

Group	Карра		
All		.586	
Medical Students		.697	
Anesthesiology Residents	.476		
Anesthesiologists/ TEE/ All	.568	.633	.584

### **CONCLUSION**

- Measurements of dP/dt were highly agreeable to one another, highlighting the reproducibility of contractility measurements with TEE acquired images.
- Technical expertise did not result in higher agreement.
   Future studies could explore utilizing Al for static image
- measurements to compare accuracy and reproducibility.

  Comparing various modalities to measure contractility could also be explored.

## REFERENCES

1. HiPippard L., Rhotes, A., Cecconi, M., DO2). Cardas Connectility, in: Vincent, R., Hall, J.B. (ed) Encyclopeda of Intensive Craw Medicine. Syntages, Ber Heidelberg. 2.13 as I Newfort; The Intensive of contractility in the Insent, Comparative Biochemistry and Physiology Part A. Physiology Vision. 1919. Trust Service Office. 2.15 as I Newfort; The Intensive Craw Conference of April 2.15 in Relaxation of community and postbading in the Intensive Craw unit. Medicine Intensive Technology Conf. 1921;59(1):2475–2476. In 1921 of the Intensive Craw Unit. Service Conference on the Intensive Craw Unit. Service Conference on Conferen

> Download poster & Abstract:



