**HYPEREMIC INSTANTANEOUS WAVE-FREE RATIO PROVIDES THE HEMODYNAMIC OUTCOME FOR MODERATE TO SEVERE CORONARY ARTERY STENOSES**

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*Objective*: To evaluate the utility of hyperemic-iFR

*Background*: iFR has been established as a physiological tool for the assessment of coronary ischemia from diastolic wave-free period in stable condition without the need for hyperemic agents. It remains unclear that hyperemic-iFR (h-iFR) is available for evaluation of the ischemia. Thus, we aimed to assess the diagnostic performance of the h-iFR compared with the conventional whole-cycle Fractional Flow Reserve (FFR).

*Methods*: Fifty consecutive lesions, which were diagnosed to be moderate to severe stenosis by coronary angiography, were analyzed regarding the h-iFR and FFR during intravenous the intravenous administration of adenosine using a pressure wire. The h-iFR and FFR were calculated via automated algorithms.

*Results*: Twenty-two stenoses were positive and twenty-eight stenoses were negative. The slope of regression line in the positive group was lower than that of the negative group. The h-iFR shows a larger range in the severe stenosis group compared to the FFR group.

*Conclusions*: The hyperemic iFR may be a better physiological tool than the conventional cardiac full-cycle FFR in the evaluation of coronary artery ischemia.