Li – 1994

* % change in SMA flow at 30 minutes was less for CMI
* Gradation of severity in SMA based on % change in flow
* Gastric steal
* Greater SMA fasting flow in 50% and 70% stenoses compared to controls
  + Possible occlusion of IMA? Leads to need for more blood in SMA
* Equal SMA fasting flow in 100% stenoses compared to controls
  + Diminished splanchnic reserve
  + Further stress from gastric steal lead to CMI
* Is SMA the only vessel that should be measured?

Burkart – 1995

* No established function measure of intestinal blood supply
* Significant disease in CA or SMA exists in 18% of elders
* Measuring arterial vessels is likely to be error prone (turbulence, collaterals)
* Previous studies show SMA ~ SMV flow
* increases in SMV flow = increases in PV flow
* Equal SMV and PV fasting flow in CMI compared to healthy
* % change in SMV flow at 20 minutes was less for CMI
* % change in SMV flow was also different between CMI and non-CMI

Li – 1995

* Gradation of severity in SMV based on SMA stenoses
* % change in SMV flow at 30 minutes was less than controls

Roberts – 2019

* SCAo, SMA, SMV, and PV see increases in blood flow after a meal
* CMI patients do not see this increase
* Measure temporal evolution of flow in CA, SMA, IMA, collaterals, and PV
  + Li proposed gastric steal