

Figure Legends:

Figure1 : Transcoronary infusion of cardiosphere-derived cells in a 3-year-old hypoplastic left heart syndrome, post-Fontan patient. (a) Anteroposterior view of native aorta angiography using a 5F guiding catheter. Stop flow technique was carried out using a 2.8F temporary occlusion balloon at the (b) left anterior descending artery (LAD), (c) right coronary artery (RCA) and (d) left circumflex artery (LCX).

Figure2 : Coronary artery spasm in a 2-year-old, polysplenia/single right ventricle, post-Fontan patient. After balloon deflation, routine coronary angiography indicated (a) right coronary artery (RCA) spasm; (b) i.c. infusion of 0.5 lg/kg nitroglycerin released the RCA spasm.

Figure 3 : (a) Hypoplastic left heart syndrome; and (b) single coronary artery with corrected transposition of the great arteries, mitral stenosis and pulmonary atresia, treated with the same technique. It is not necessary to change the shape of guiding catheter, to deliver Kudos balloon (Fuji Systems, Tokyo, Japan) for the right and left coronary arteries.

Figure 4 : Large aorta in a 4-year-old, post-Fontan, single right ventricle, pulmonary atresia patient. Anteroposterior view. (a) Aortography showing the right coronary artery (RCA) far from the left coronary artery (LCA). (b) After infusion at the RCA, the shape of guiding catheter was changed to (c) engage the LCA.

Figure 5 : Four-year-old polysplenia/dextrocardia/hypoplastic right ventricle, post-Fontan, post-Damus-Kaye-Stansel patient. Lateral view. (a) Left ventriculography showing anterior pulmonary trunk and posterior native aorta. The coronary artery runs across the great arteries. (b,c) The shape of the guiding catheter was changed to a hook.

Table1:Baseline characteristics at CDC therapy

HLHS:hypoplastic left heart syndrome, SV:single ventricle,CAVV:common atrio ventricular valve,TA(II c):tricuspid atresia and transposition of the great artery and VSD without pulmonary stenosis, DORV:double outlet right ventricle,SLV:single left ventricle,BNP:brain natriuretic peptide,

Table 2: Adverse events

ST elevation or depression $>1-2$ mm at horizontal line. AMI, acute myocardial infarction; BP, blood pressure; NTG, nitroglycerin; VF, ventricular fibrillation.