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MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS
VIA MINI LEFT THORACOTOMY

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Abstract :

Background: Minimally invasive direct coronary artery bypass (MIDCAB) via a mini left thoracotomy incision has been performed for revascularization of the left anterior descending artery with the left internal mammary artery. In this study, we analyzed the patient's outcomes in those who underwent MIDCAB.

Methods: Between June 1997 and July 2002, a total of 125 patients (96males and 26 females, mean age of 65.1 ± 9.6) underwent MIDCAB. Perioperative and follow-up data were entered into a structured database.

Results: The coronary anastomosis time was 17.0 ± 5.0 minutes. The mean intubation period, ICU stay, and postoperative hospital stay were 4.0 ± 2.8 hours, 1.3 ± 0.8 days, and 9.7 ± 4.6 days, respectively. There were no hospital deaths, postoperative heart failure, myocardial infarction, renal failure, prolonged ventilation (>2days) or stroke. During the follow-up of 3.3 ± 1.5 years, 12 patients developed angina and there were 10 deaths. The actuarial 3-year survival rate was 92.6% and the event-free rate was 87.1%.

Conclusion: MIDCAB provide early recovery with minimum mortality and morbidity. The long-term results after MIDCAB are acceptable.

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