

Hybrid revascularization effective for left main coronary blockages

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The left main coronary artery provides most of the blood to the heart, and current guidelines call for patients with blockages in this artery to undergo bypass surgery.

Hybrid [revascularization](#) is a combination of coronary artery bypass surgery and percutaneous [coronary intervention](#) (PCI). Emory physicians have been performing these procedures “off-pump” in a minimally invasive fashion, without breaking open the chest. This technique is also known as “endo-ACAB” (endoscopic atraumatic [coronary artery bypass](#)).

Syed Tanveer Rab, MD, assistant professor of medicine (cardiology), Emory University School of Medicine, will report on outcomes from 21 Emory patients with blockages in the left main coronary artery treated using hybrid revascularization.

The presentation takes place at the American College of Cardiology meeting in Atlanta on Monday, March 15.

Rab describes the Emory approach as a “best of both worlds strategy”: minimally invasive off-pump left internal mammary artery (LIMA) graft, plus a stent placed via ultrasound from the left main to the left circumflex artery.

For these patients, the average ICU stay was 1.1 +/- 0.4 days. Fifteen patients had hybrid surgery and PCI in the same hospitalization and the

rest had the two procedures a few days apart. All but one patient received a [drug eluting stent](#). Two had re-exploration with [blood transfusion](#). No major adverse cardiac or cerebrovascular events were reported in the hospital or after 30 days.

The authors conclude:

“Hybrid revascularization for left main coronary artery stenosis appears to be a safe and feasible procedure in selected patients and may preserve the survival advantage imparted by the left internal mammary artery graft to the left anterior descending artery. A multicenter trial to assess intermediate and long term outcomes of this form of hybrid revascularization is warranted.”

Emory, Columbia University and Albert Einstein College of Medicine recently received a \$1 million “Challenge” grant from the National Heart, Lung and Blood Institute to plan a large-scale clinical trial of hybrid revascularization.

Emory’s investigator on this grant is John Puskas, MD, professor of surgery and associate chief, division of cardiothoracic surgery at Emory University School of Medicine.

More information: T.A. Vassiliades et al. Clinical Outcomes After Hybrid Coronary Revascularization Versus Off-Pump Coronary Artery Bypass: A Prospective Evaluation *Innovations: Technology and Techniques in Cardiothoracic and Vascular Surgery*: 4, 299-306 (2009).

Provided by Emory University

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