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Total arterial myocardial revascularization: A goal to pursue

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Coronary artery bypass graft is the most common surgical procedure in developed countries. Today, with the rapid advance of catheter intervention, the direction taken by cardiac Surgeons is not only to construct conventional coronary artery bypass less invasively but also to pursue better long-term results by using the best quality of grafts. Also, in treating patients with coronary artery disease, the goal should be to approach a coronary event-free survival similar to that of a matched population without coronary artery disease. Although long-term survival is of primary concern, other disabling consequences from coronary artery disease after myocardial revascularization, like angina or myocardial infarction, are also important. These factors are related to the preoperative status of the patient, progression of coronary artery atherosclerosis, and mainly to the patency of the conduits used. On the other hand failure of saphenous vein graft conduits is the most common indication for coronary artery reintervention after coronary artery bypass surgery. To estimate the feasibility and efficacy of total arterial myocardial revascularization in our patients, routine use of pedicled bilateral internal mammary arteries with or without a radial artery was applied in our department for the past 12 years from 2000 to 2013, in 2560 consecutive patients. Total arterial revascularization was achieved in 2541 of 2560 consecutive patients (99.25%), with 8131 coronary anastomoses using only bilateral mammary arteries with or without a radial artery. Combined procedures were performed in 559 (21, 99%) of the cases. Preoperative mean additive Euroscore was 7.1, and the early mortality rate was 2.8%. Regular use of both mammaries and radial artery in patients requiring myocardial revascularization is a feasible and efficient technique, and it is highly recommended as a gold standard.

Biography

Ioannis A Chlorogiannis is a Director, Chief Cardiac Surgeon, Euroclinic of Athens, Greece; he is a Contributor in scientific papers from 2000-up to the present. He had his Education in Aberdeen Royal Infirmary, Aberdeen Scotland 1985, MD, University of Patras Medical School, Greece, and in 1986 he is an Resident in Cardiology and Coronary Care Unit, Air Force Hospital, and in 1988-91 he done his Ph.D. and Resident in General Surgery, University of Athens Medical School, Greece. In 1995-96 he has done an ECFMG certified, Clinical Fellow in Cardiothoracic Surgery, Texas Heart Institute, Houston Texas, USA. Certified in Cardiothoracic Surgery, Ministry of Health, Athens, Greece, 1996,

Awards: Outstanding Fellow, Texas. Heart Institute. Houston Texas. USA, 1995, Grant, from Texas Heart Institute, Houston Texas. USA, to Cleveland Clinic Foundation, Cleveland Ohio, USA, 1995, Grant, from Texas Heart Institute. Houston Texas USA, to Massachusetts General Hospital, Boston Massachusetts, USA.

1995, Honorary Diploma, Fthiotidos Society., NY, NY, USA, 2003. Int. Member : Denton A. Cooley Cardiovascular Society, Cardiothoracic Surgery, CTS Network Achievements : New Research in Cardiac Bypass Surgery using only arterial grafts both pedicled mammary arteries and radial artery, Mitral valvuloplasty, Ventriculoplasty, Aortic Arch Surgery.

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