

A New Multi-Suction Heart Positioner for Minimally Invasive Coronary Artery Bypass Surgery

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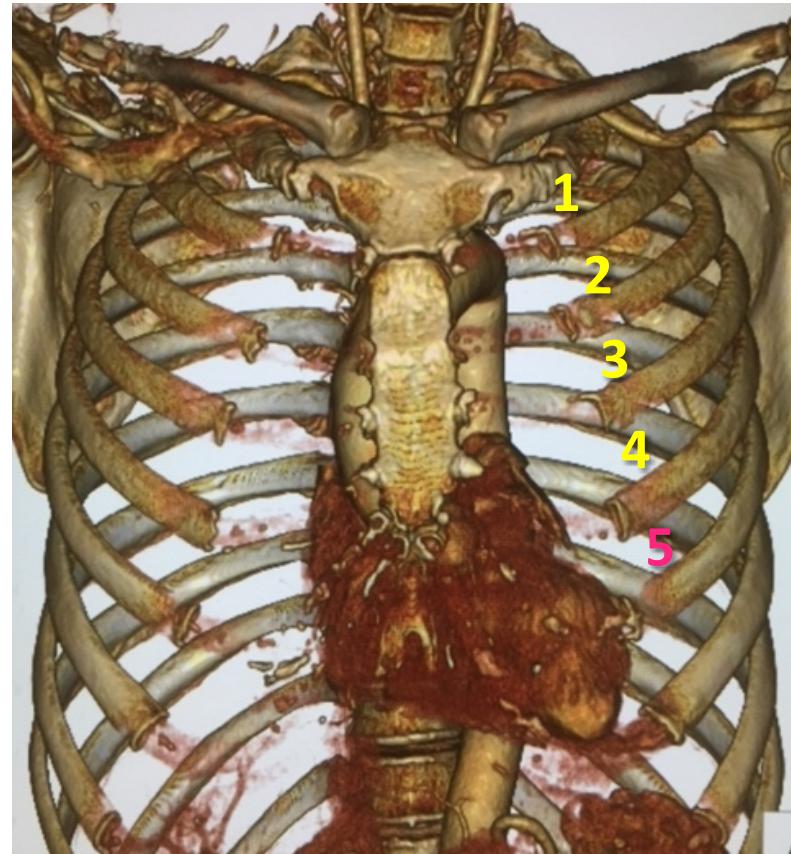
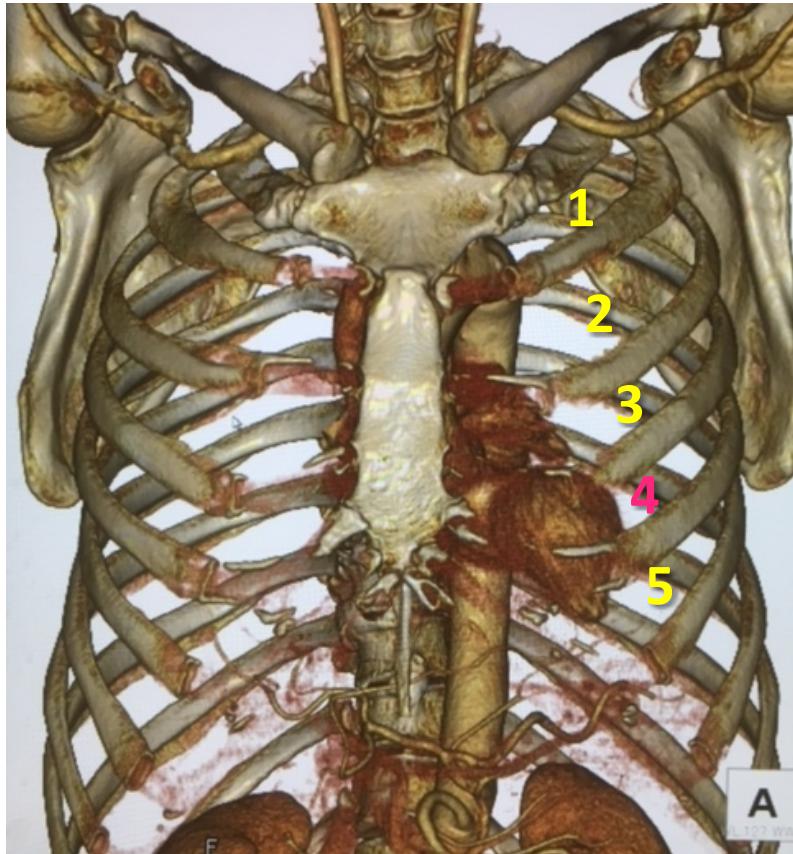
DISCLOSURE

NONE

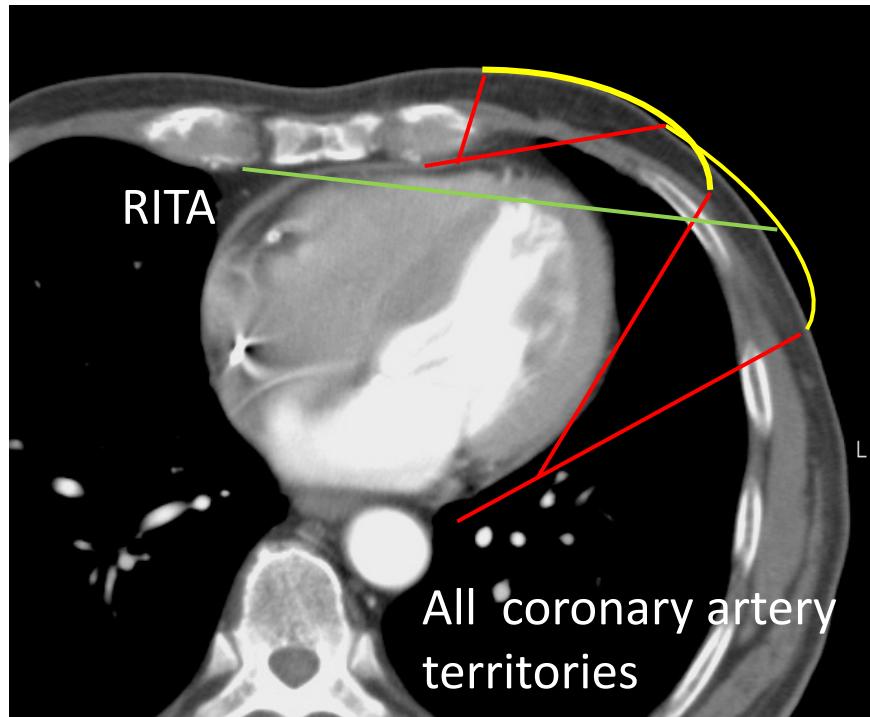
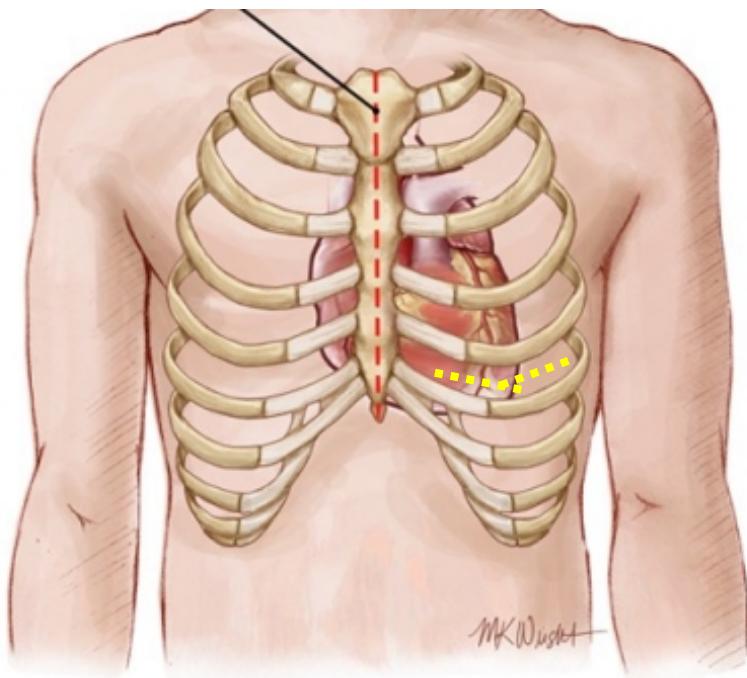
TIPS for distal anastomosis

1. Proper thoracotomy (5th ICS mostly)
2. Complete dissection between the sternum and the heart
3. Wide opening of the pericardium
4. Deep pericardial stitches
5. Proper use of suction devices
6. Use CPB in a difficult case (VA-ECMO)

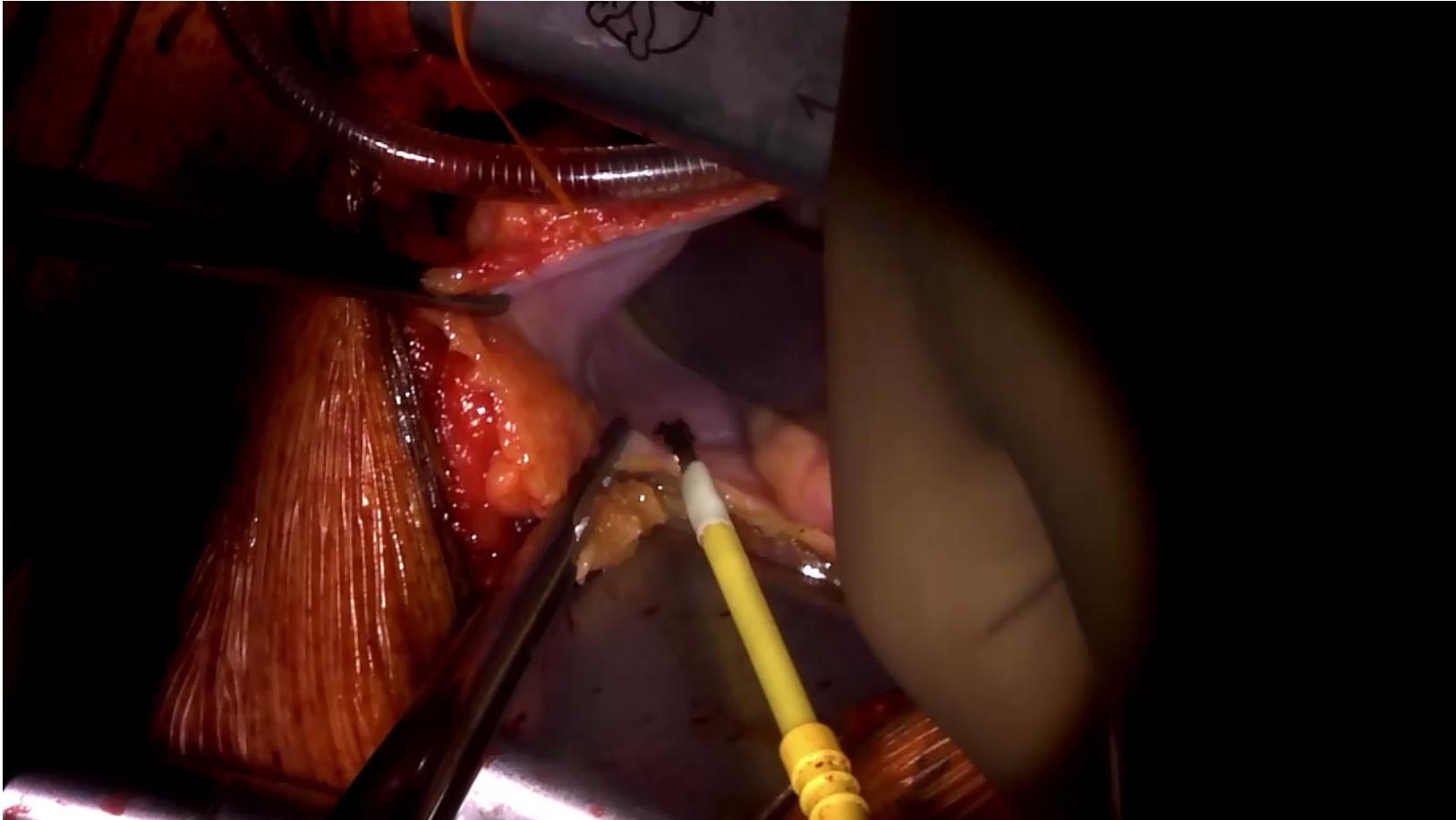
Preop. CT evaluation



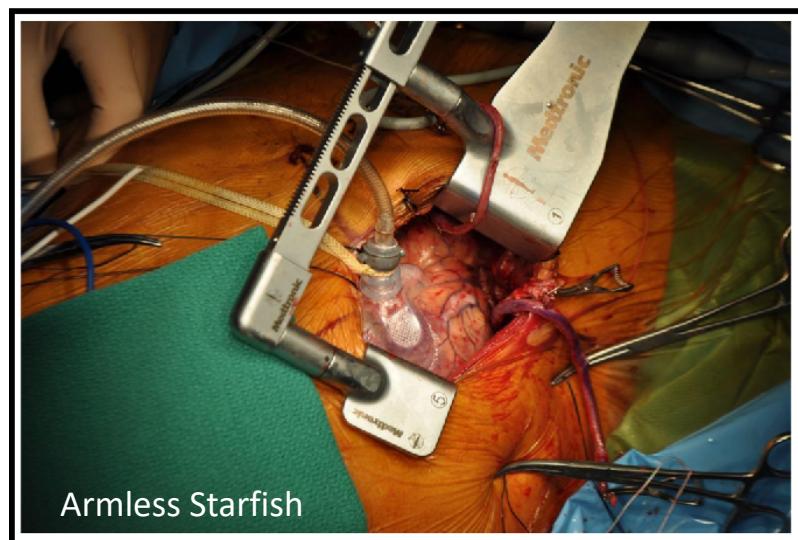
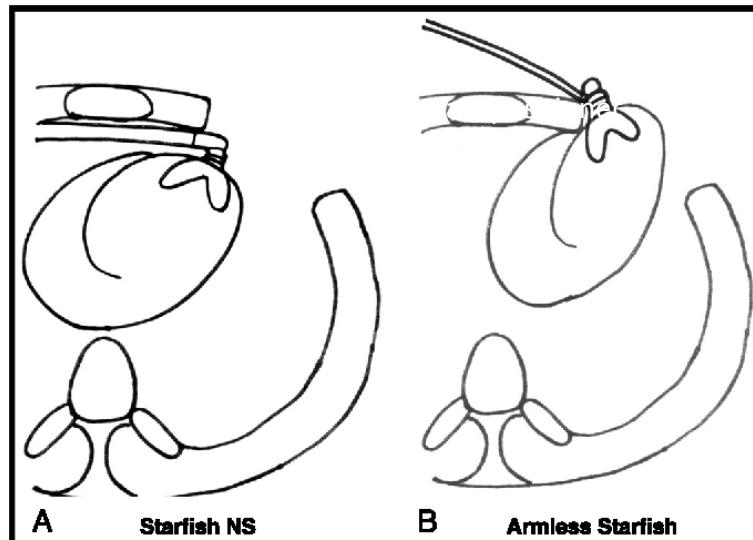
More lateral thoracotomy provides easy access
to the lateral coronary arteries and the RITA



Wide pericardiotomy

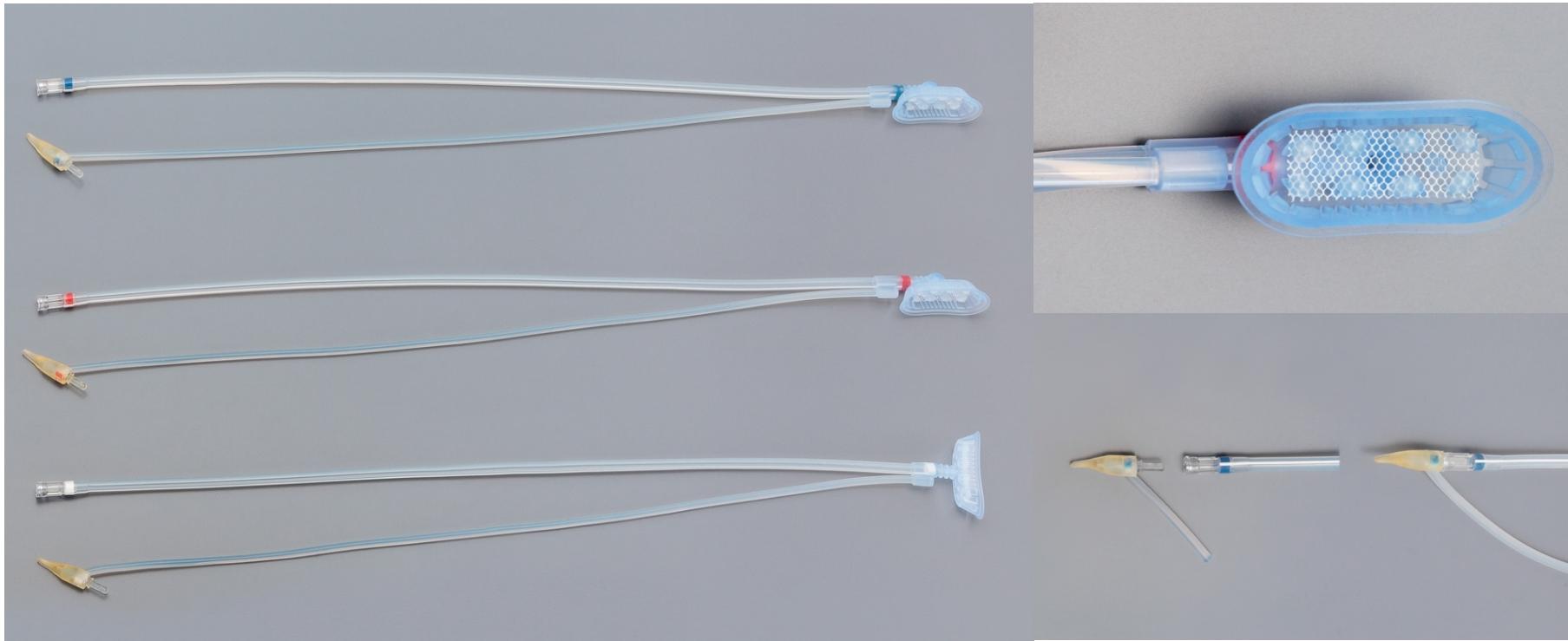


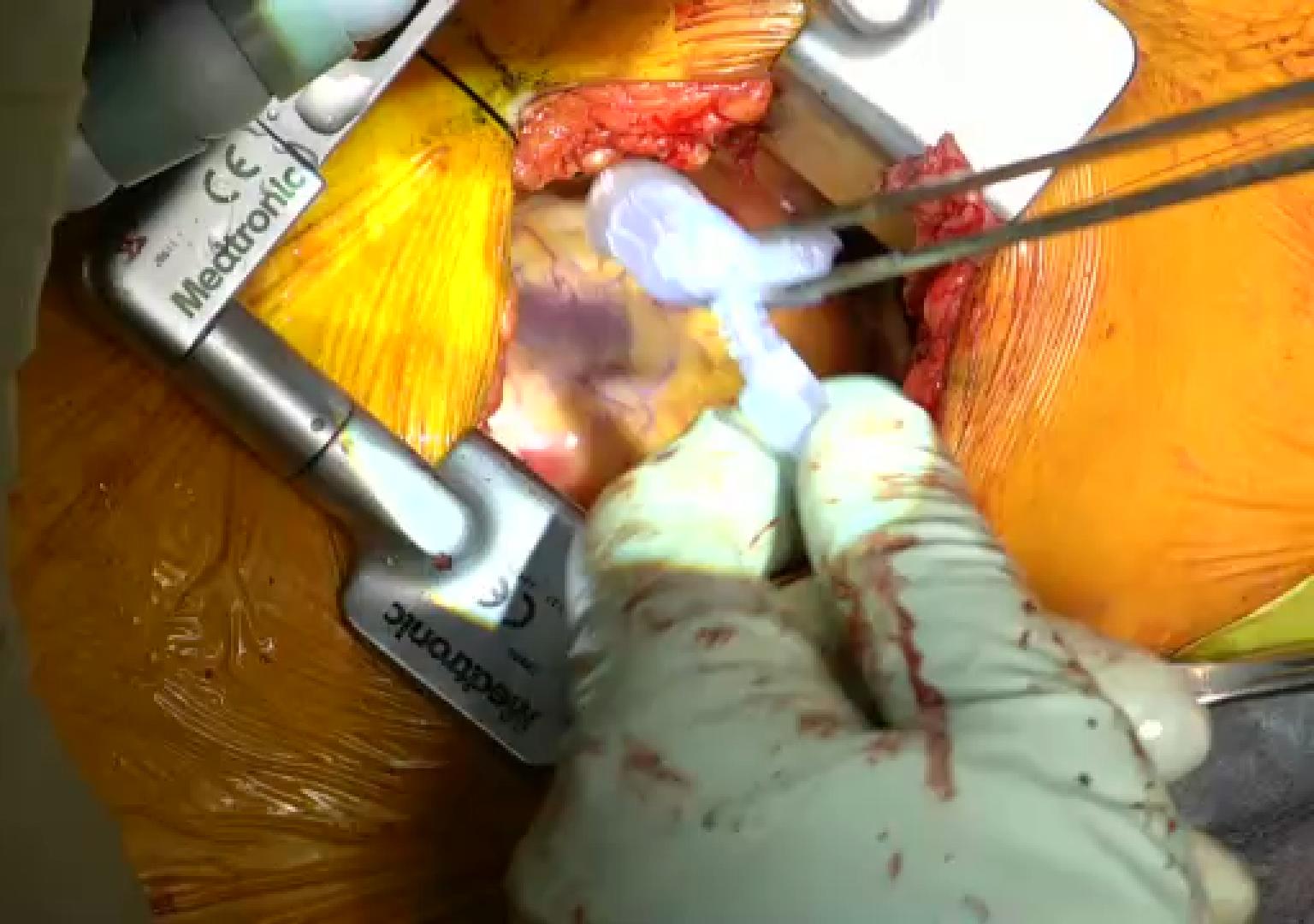
Displacement of the heart is challenging in MICS CABG



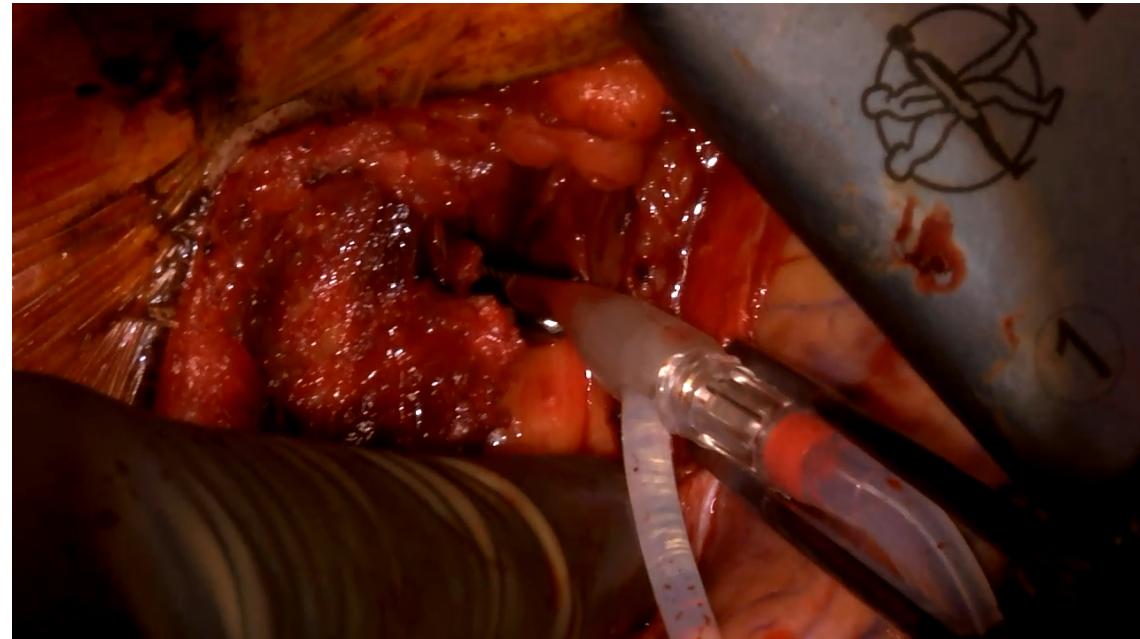
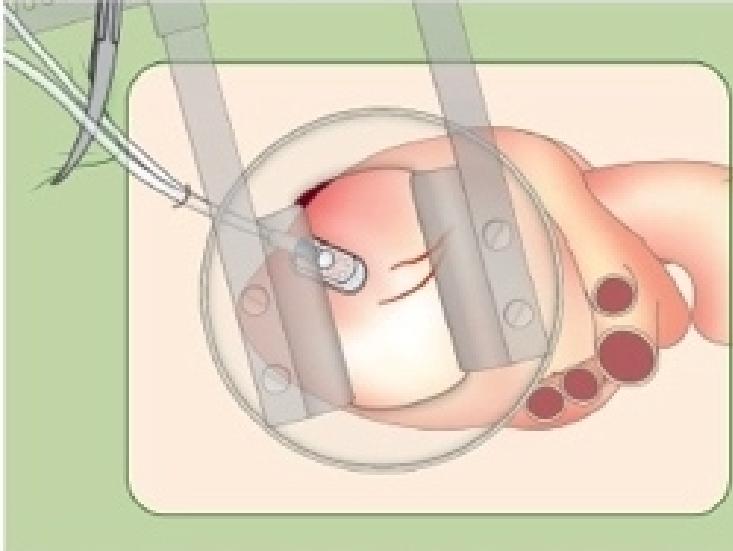
Kikuchi et al. Innovations 2015;10:183-7.

Tentacles NEO (SB-KAWASUMI LABORATORIES, INC, JAPAN)





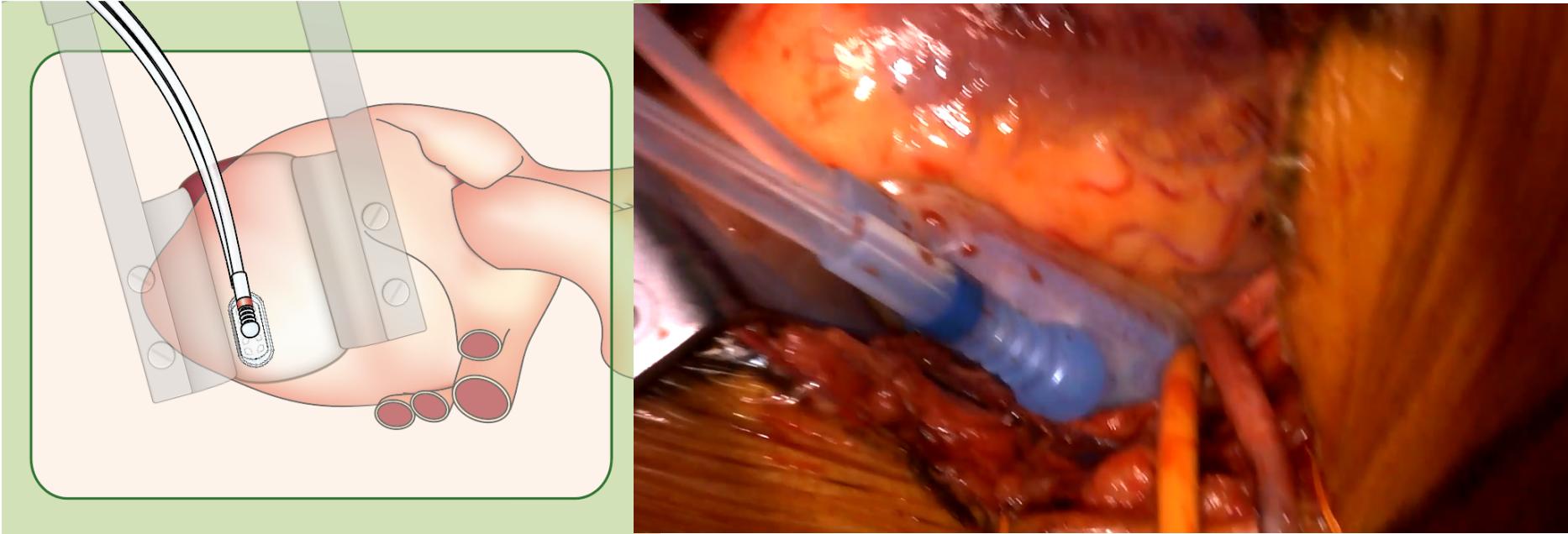
Exposure of Diagonal / Ramus



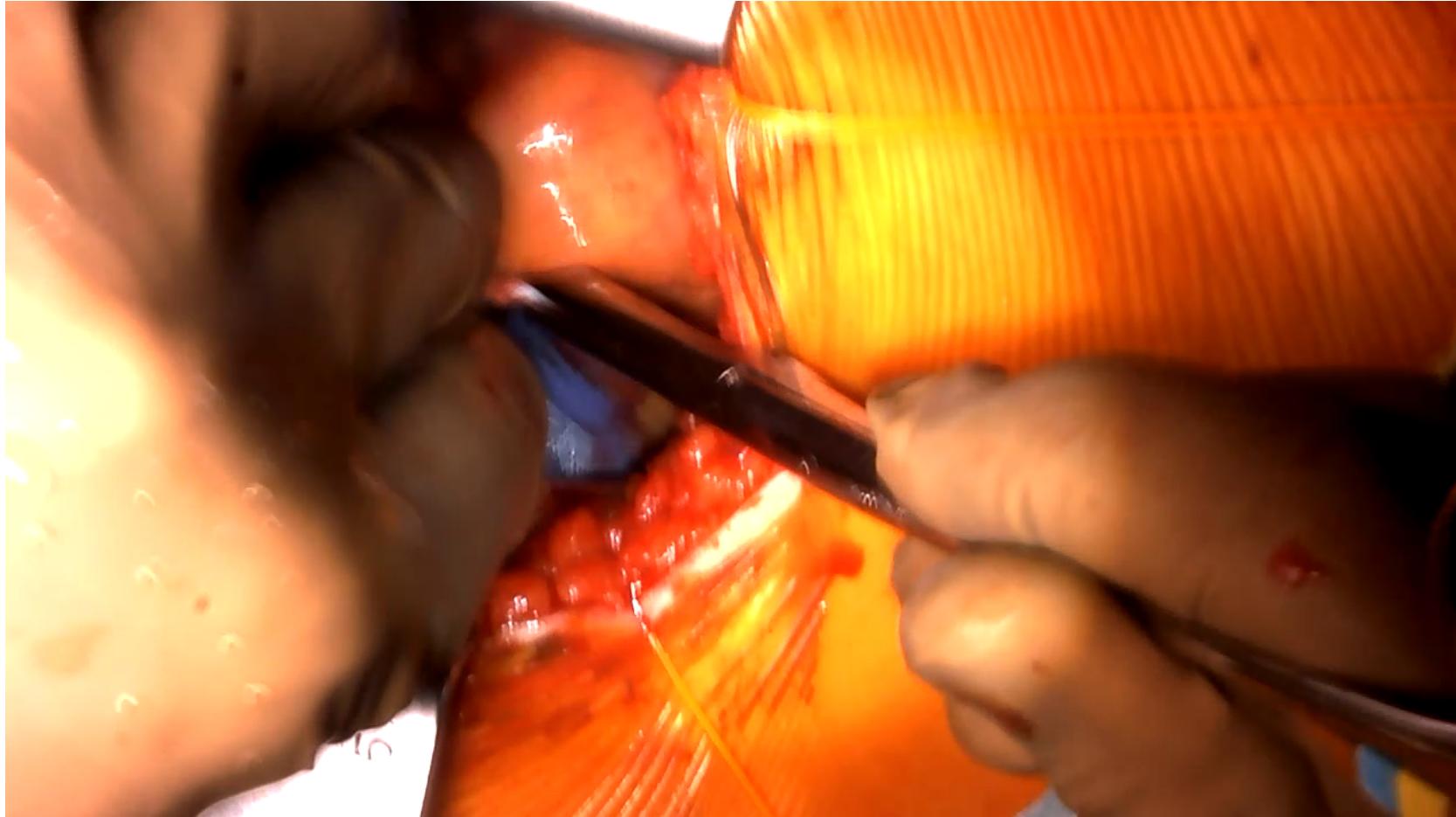
Exposure of OM



Stepwise exposure (PL)



Stepwise Exposure (PDA)



MICS CABG strategy for multivessel CAD

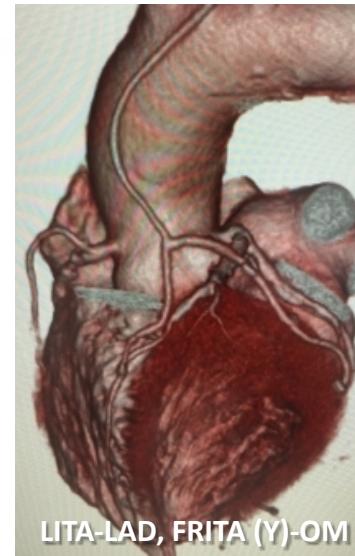
Aortic no-touch MICS CABG with BITA

LITA-LAD

+ RITA (in-situ)

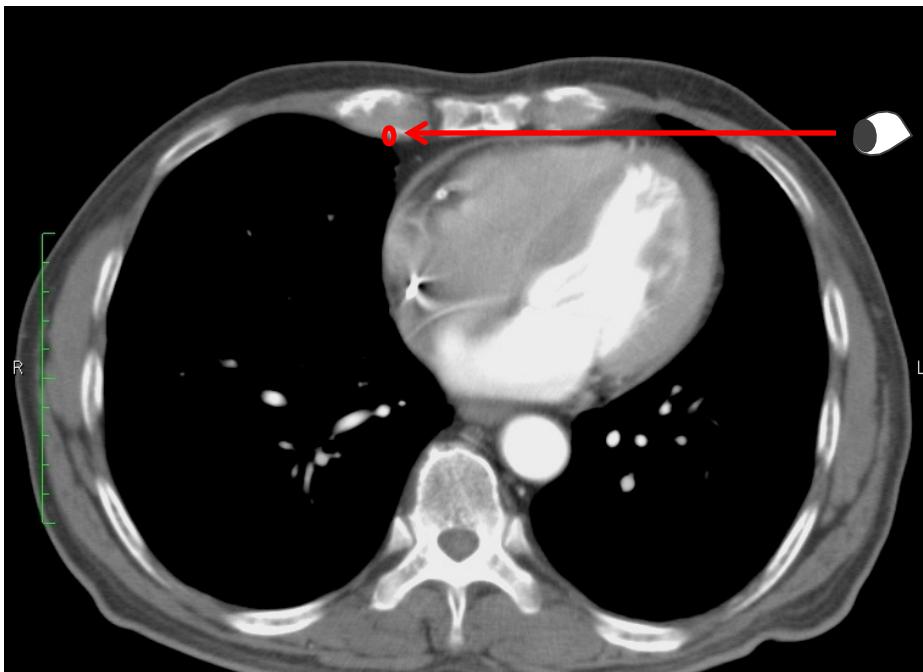
+ LITA-free RITA Y composite

+ RITA-RA (or SVG) I composite

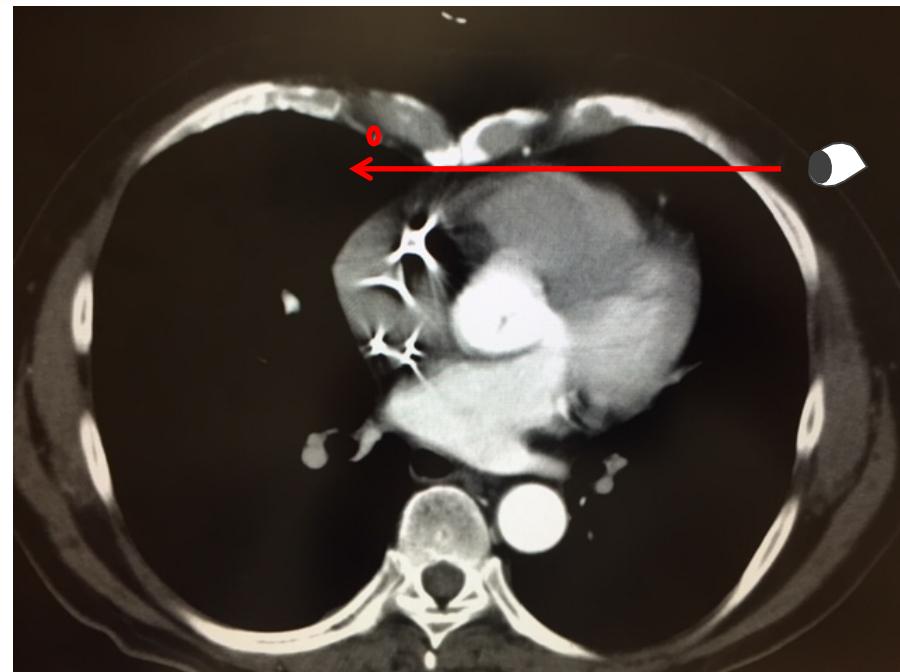


Consider Hybrid approach for frail or elderly patients.

Preop. CT evaluation for access to the RITA



Good exposure



Poor exposure

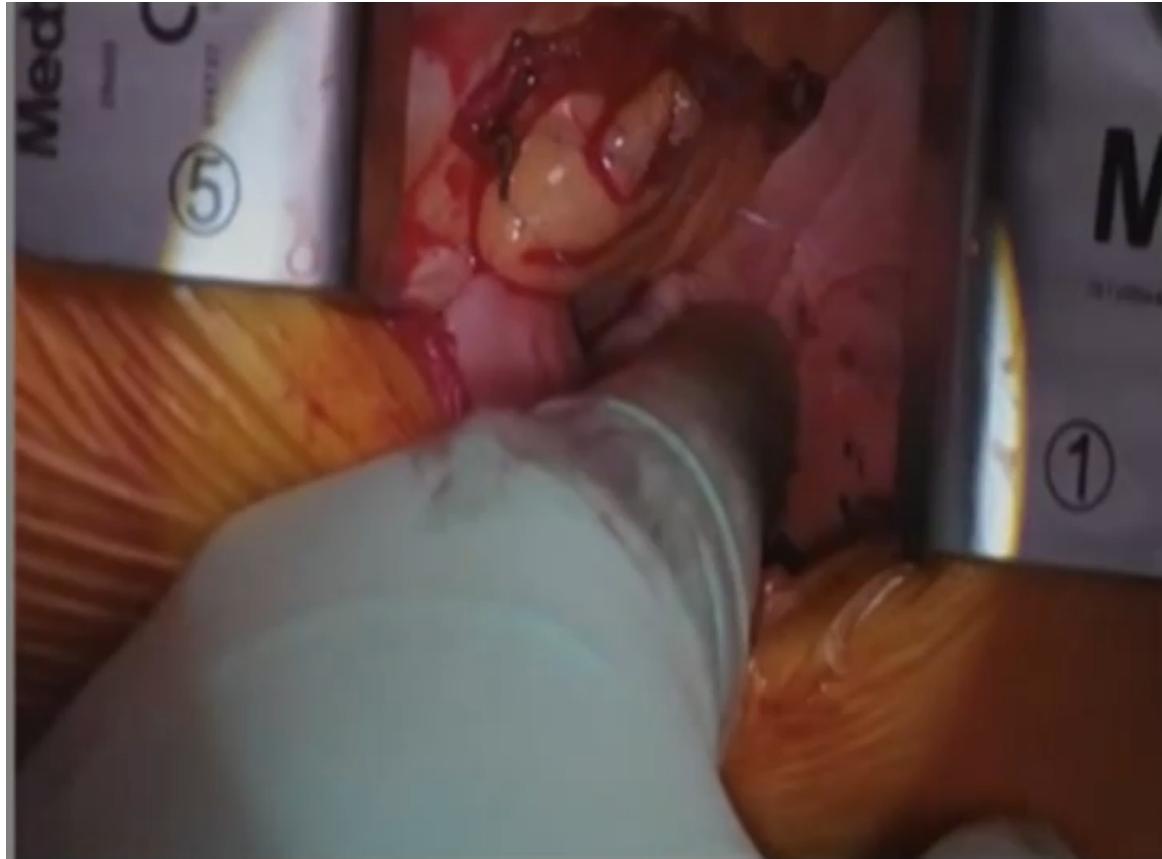
RITA

R. lung

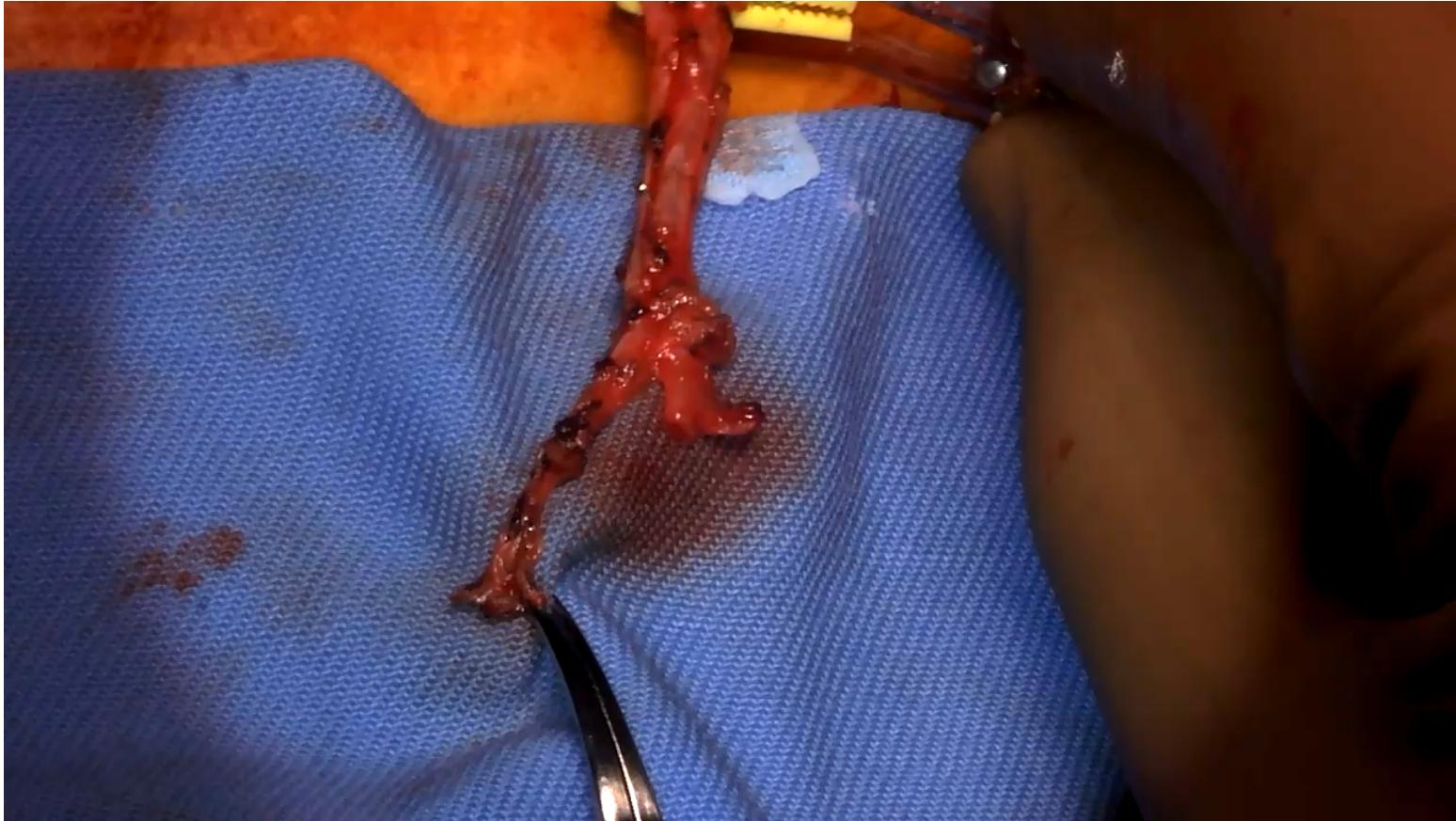


Octopus Nuvo Stabilizer

LITA-free RITA Y-composite graft



RITA-RA I-composite graft

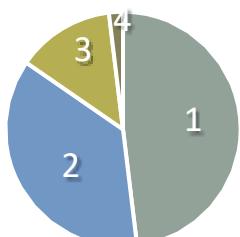


Clinical outcomes (N=210)

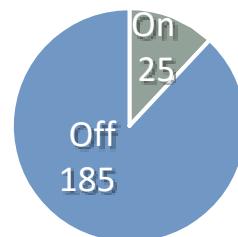
Age 73±11

Concomitant procedures

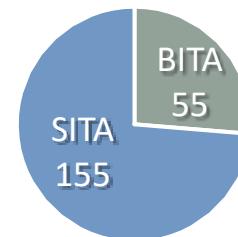
- TAVR 7
 - LV aneurysm resection 2
 - LAA resection 2
- Hybrid coronary revascularization 33



Graft number



CPB use



ITA

Clinical Outcomes (N=210)

• Operative mortality	3 : cancer (1) NOMI (2)
• Chest re-exploration	0
• Stroke	1 (concomitant TA-TAVR)
• MI	1 (Hybrid case)
• Chest wound infection	0
• Prolonged ventilation	4 (1.1 %)
• Early graft patency	97.8% (351/359)

Thank you
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