



EARLY OUTCOMES OF OPCAB FOR LMCA

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KEYWORDS :**Background:**

Left main coronary artery (LMCA) stenosis is a risk factor for morbidity and mortality in patients undergoing coronary artery bypass grafting (CABG). Although improved outcomes of off-pump CABG have been well documented, LMCA stenosis is often perceived as a contraindication for off-pump CABG. In this study, we compared off-pump techniques in high-risk patients with LMCA disease with patients without LMCA disease.

Methods and materials:

Study included 819 patients who underwent off-pump CABG at Chettinad hospital from August 2014 to 2018. Group A included 100 with LMCA disease and Group B included 719 with non LMCA-CAD. Variables like percentage of male vs female, age >60 & <60 years, good LV versus Poor LV, emergency Vs elective, use of IABP peri op and post op period, number of days in ICU and hospital, inotropic support and transfusion rate, total blood loss and mortality rate were studied.

Results:

On analysis, both the Groups were similar in terms of preoperative and intraoperative variables such as age, sex, nature of disease, conversion to on pump and usage of IABP, except for LMCA patients who received significantly more grafts than non LMCA patients. Despite a higher risk profile of LMCA patients there was no significance mortality. Both groups had a lower requirement for postoperative inotropes, ventilation hours, blood product transfusion, and reduced postoperative stay. Except for patients severe LV dysfunction and LMCA group, ICU stay was high. Mean ICU stay for both groups was 2.5 days.

Conclusions:

Off-pump coronary artery bypass grafting is safe and effective in patients with critical LMCA stenosis.