

# Early and long term Clinical outcome after Minimally Invasive Direct Coronary Bypass Grafting versus off pump Coronary Surgery via Sternotomy Benetti, Federico 1 (Corresponding Author) Lima, Ricardo 2 federicobenetti@hotmail.com 1. Benetti Foundation Cardiac Surgery Alem 1846 Rosario, santa Fe, AR 2000 00543414855827 2Faculdade de Ciências Médicas / UPE, Cardiothoracic Surgery

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## Abstract

Early and long term Clinical outcome after Minimally Invasive Direct Coronary Bypass Grafting versus off pump Coronary Surgery via Sternotomy In this retrospective study by Cichon Romuald et al (1), 194-patients met the inclusion criteria and were divided into the MIDCAB group (n=111) and OPCAB via median sternotomy group (n=83). The conclusion was that short as well as long-term outcomes of MIDCAB in terms of mortality, myocardial infarction, stroke, and target vessel revascularization were satisfactory, and as safe and effective as OPCAB via sternotomy This retrospective study by Cichon Romuald et al (1), undoubtedly will generate interest for surgeons who want to perform minimally invasive coronary surgery. It is clear that, in order to attract patients to undergo surgery, surgeons must learn to perform minimally invasive coronary surgery. Advantages of minimally invasive coronary surgery include less post-operative discomfort, faster healing times, less risk of infection and avoidance of trauma associated with OPCAB Surgeons must also take the initiative and play an active role in the Hybrid Revascularization Procedures Current surgeons, and those in residency training programs, should learn wire skills and participate in placement of stents. There is a lot to learn from our interventional cardiologists who embrace new technology and procedures. Surgeons will have to adapt to the new reality, and move some of his/her practice outside the operating room.

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