

Service Priorities and Programmes Electronic Presentations

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Clinical benefits on endoscopic harvesting versus open vessel harvesting for coronary artery bypass grafting patients

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Introduction

The study compared the clinical outcomes and patients satisfaction after Coronary Artery Bypass Grafting (CABG) surgery under open vein harvesting or endoscopic vein harvesting technique.

Objectives

The study aimed at finding a way to improve patient's clinical outcome after surgery in order to reduce their length of stay and complications.

Methodology

The target was patient who had CABG from 1st July, 2012 to 30th August, 2012. The target group would be all first time undergo CABG in QEH. Exclusion criteria would be who undergo second CABG surgery, use of radial artery or internal mammary artery for grafting, use of both endoscopic and open method for vein harvesting, off pump CABG surgery and incompleted questionnaire. The targets were interviewed via phone with a structured questionnaire which including ten close ended questions after they have discharged from the hospital. This study compared the clinical outcomes on pain, wound healing process, hospital length of stay, mobilization and cosmetic influences between grafting by endoscopic and traditional open vein harvesting

Result

Open vein harvesting seems associated with more wound complications, incision pain, prolonged rehabilitation and poor cosmetic result. On the other hand, endoscopic vein harvesting seems having better clinical outcomes. Nevertheless, a large and extensive research should be done on long term clinical outcomes before introducing endoscopic vein harvesting as the best method and gold standard in CABG. But, in our point of view, the endoscopic technique is still beneficial to our patients as it reduce both physical and psychological burden to our patients.