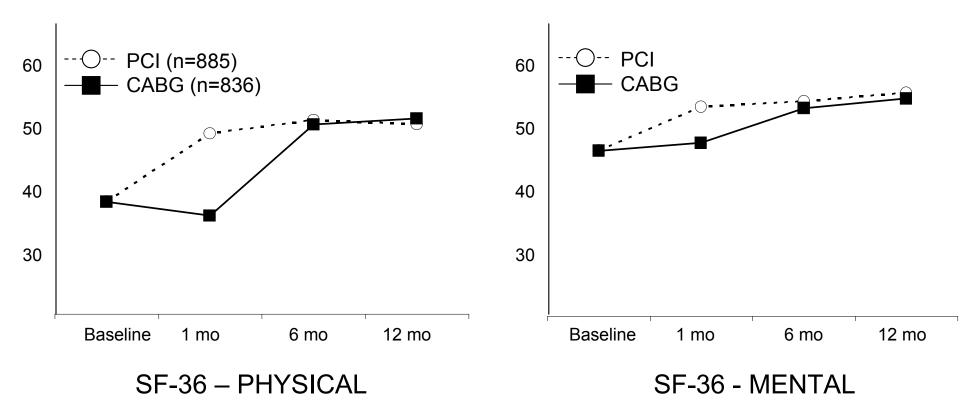
Hybrid Revascularization: Simultaneous vs. Staged

Robert Poston

Chief, Division of Cardiac Surgery Boston University School of Medicine

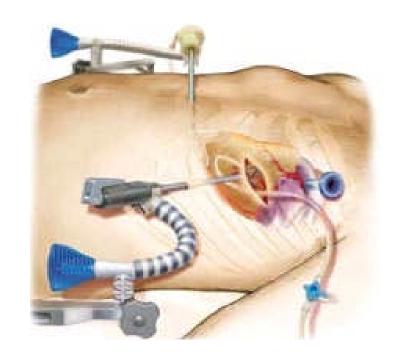


Quality of Life after CABG vs. PCI Results from the Syntax Trial



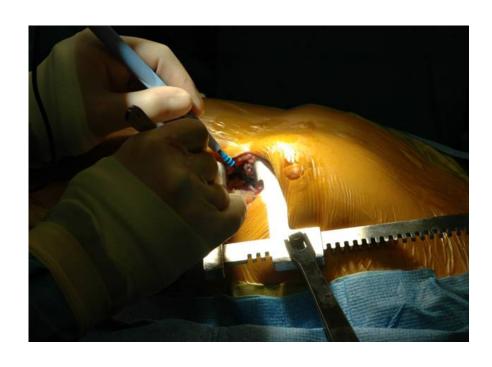
Minimally Invasive Surgical Revascularization



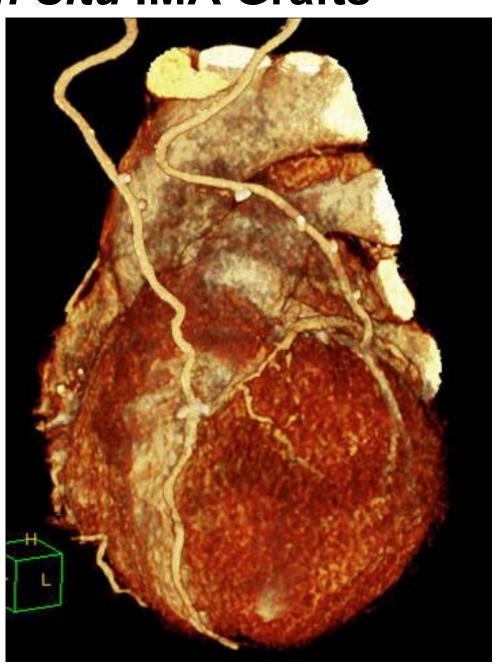


Bilateral IMA grafting without a sternotomy

MVST: Bilateral *In Situ* IMA Grafts

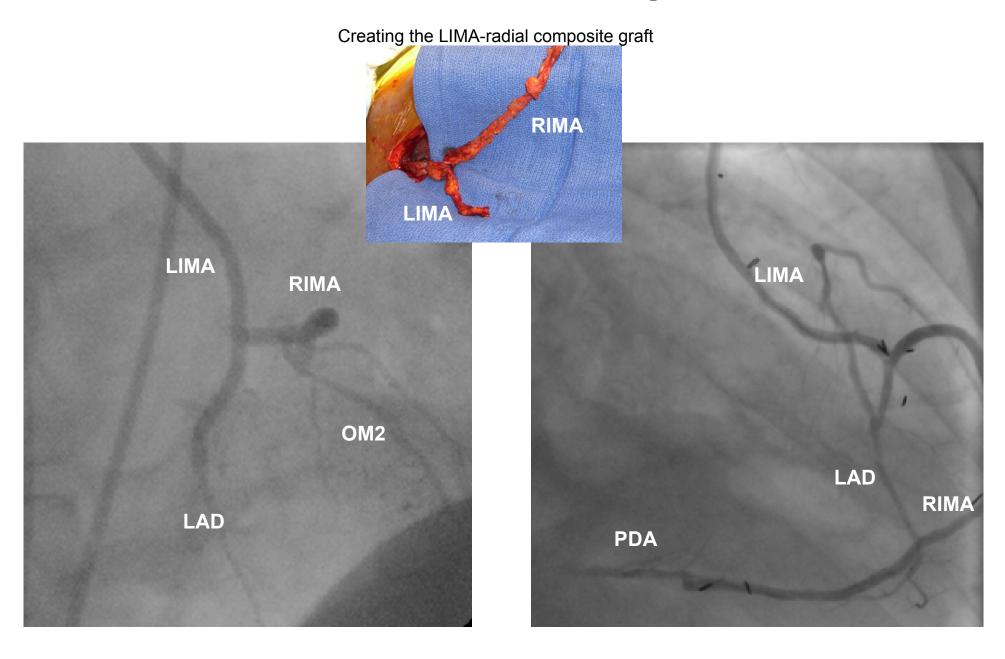


Small thoracotomy



Postoperative angiography

MVST: LIMA-RIMA Composite Graft

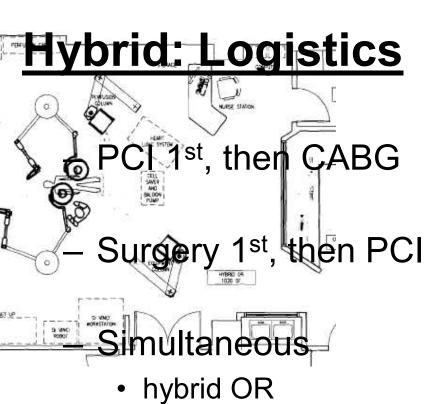


 "Best of both worlds": IMA + benefits of minimally invasive

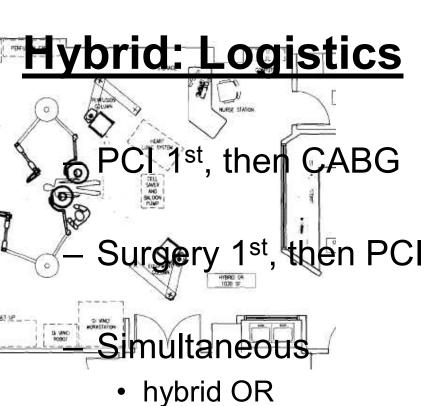
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- Expands PCI (e.g. protected LM)
- Angiographic confirmation of grafts



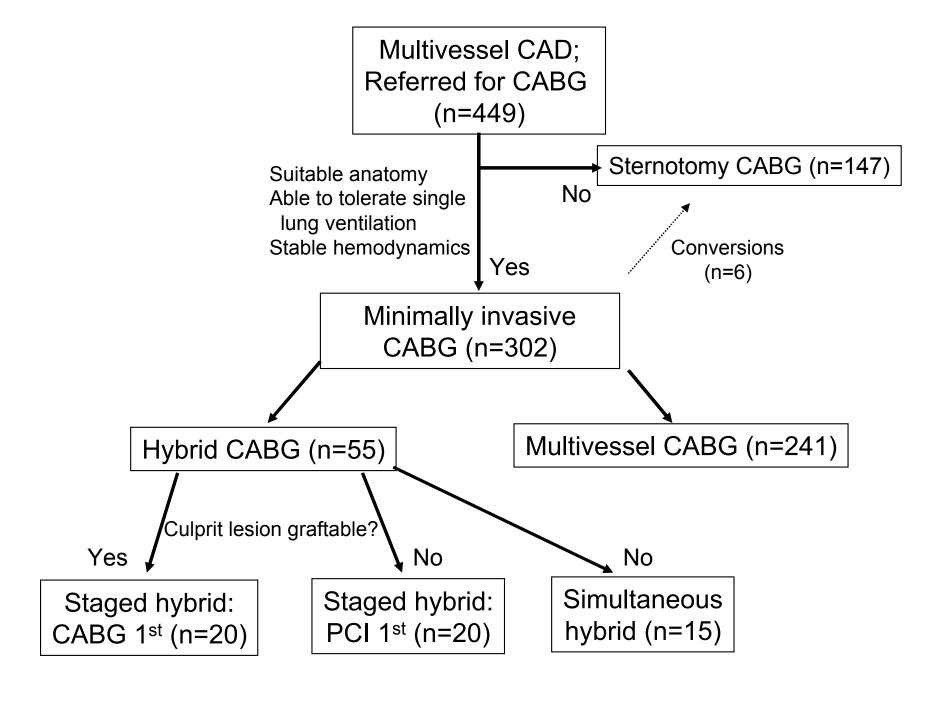




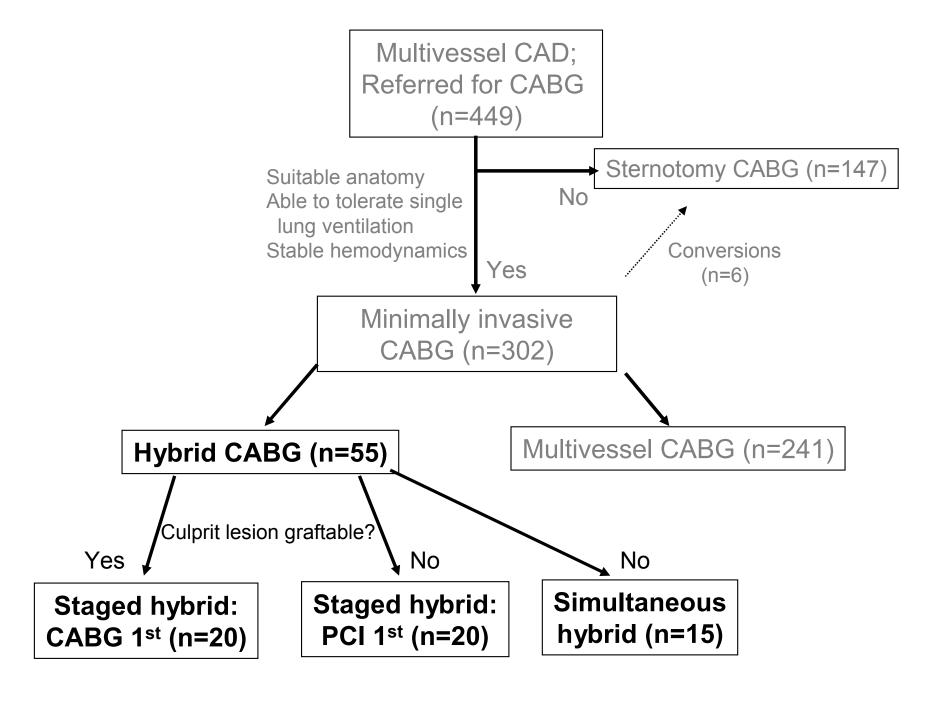


Feasibility, efficacy and safety of these three approaches

Hybrid Patient Enrollment: 3/1/06 to present



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PATIENT POPULATION

| | CABG 1st | PCI 1st | Simultaneous |
|-------------------------------|----------------|-----------------|-----------------|
| Age (yr) | 62.8 ± 9.1 | 64.4 ± 10.3 | 63.9 ± 10.1 |
| Chronic Lung Disease | 11% | 10% | 13% |
| Diabetes PVD | 48% 28% | 45% 26% | 51% 25% |
| Mean LVEF (%) | | | |
| Good (>50%) | 62% | 62% | 55% |
| Moderate (35-50%) | 20% | 23% | 27% |
| Poor (<35%) | 18% | 15% | 18% |
| Number of Diseased Vessels | 2.8 ± 0.5 | 2.7 ± 0.4 | 2.9 ± 0.8 |
| Left Main Disease | 39% | 33% | 43% |
| Congestive Heart Failure | 13% | 16% | 19% |
| Logistic EuroSCORE: (%) | 7.1 ± 5.2 | 7.7 ± 5.4 | 7.2 ± 6.5 |

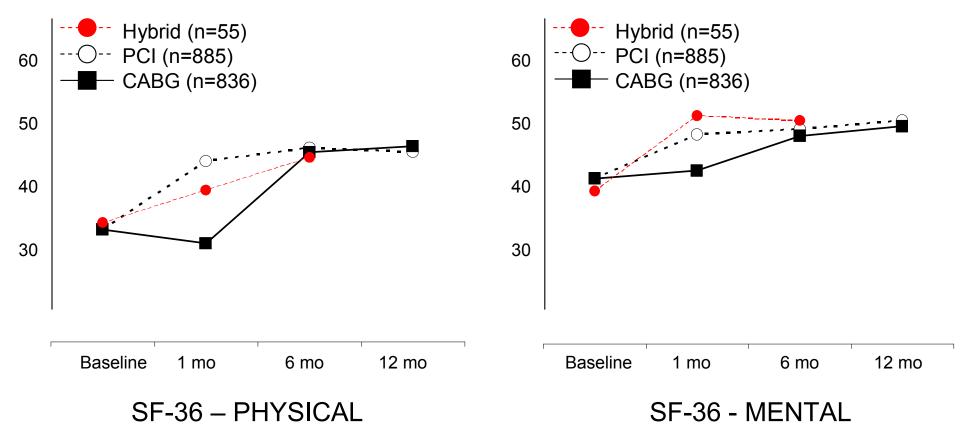
REVASCULARIZATION TECHNIQUE

| | CABG 1st | PCI 1st | Simultaneous |
|------------------------|----------|----------|--------------|
| IMA to LAD (%) | 20 (100) | 20 (100) | 15 (100) |
| RIMA graft (%) | 12 (60) | 11 (55) | 7 (47) |
| Coronary stents (#/pt) | 1.9 | 1.7 | 1.8 |
| SVG | 0 | 0 | 0 |

Results – Perioperative Outcomes

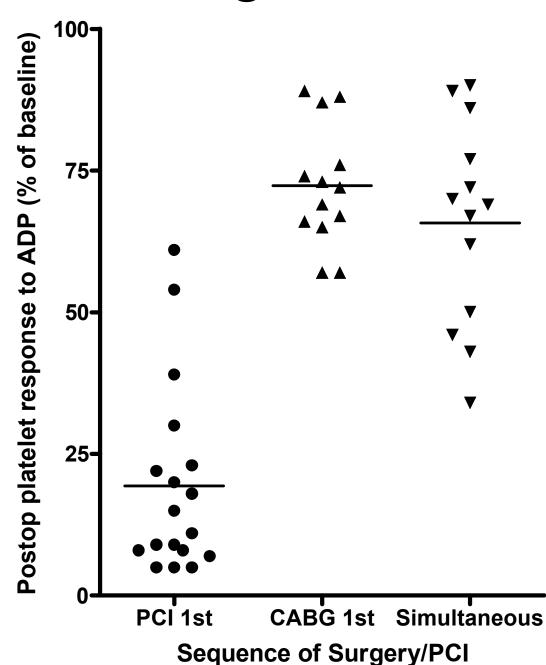
| | CABG 1st | PCI 1st | Simultaneous |
|-----------------------------------|-----------------|-----------------|-----------------|
| | | | |
| Length of Surgery (hr) | 4.8 ± 1.2 | 4.7 ± 0.9 | 5.0 ± 1.2 |
| Hospital LOS (day) | 3.72 ± 1.5 | 3.55 ± 2.3 | 3.67 ± 2.2 |
| ICU LOS (hr) | 21.9 ± 7.3 | 20.6 ± 10.2 | 24.4 ± 17.3 |
| Intubation Time (hr) | 4.80 ± 6.4 | 5.52 ± 6.3 | 4.6 ± 8.3 |
| Intraoperative Blood Loss (ml) | 347 ± 166 | 330 ± 145 | 378 ± 225 |
| PRBC Transfusion (unit) | 0.46 ± 0.37 | 0.67 ± 0.35 | 0.53 ± 0.35 |

Quality of Life after CABG vs. PCI Hybrid Results vs. Syntax Trial

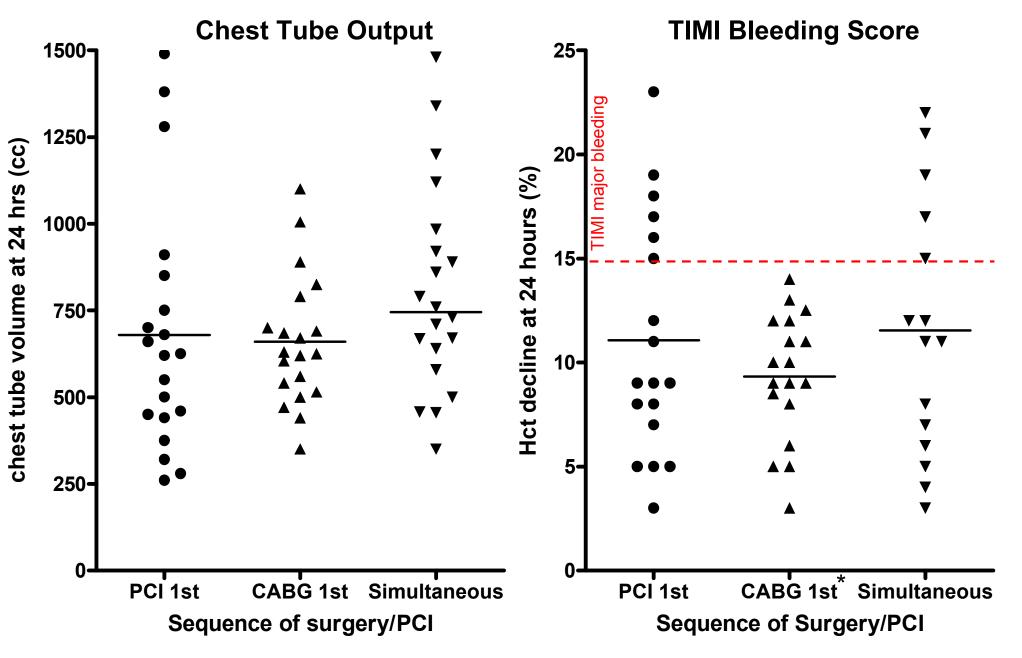


Antithrombotic Management

- PCI 1st
 - Plavix 600 mg load, 75 mg/d
 - Aspirin
- CABG 1st
 - Aspirin alone
- Simultaneous
 - Plavix 300 mg per NGT intraop, 75 mg/d
 - Aspirin

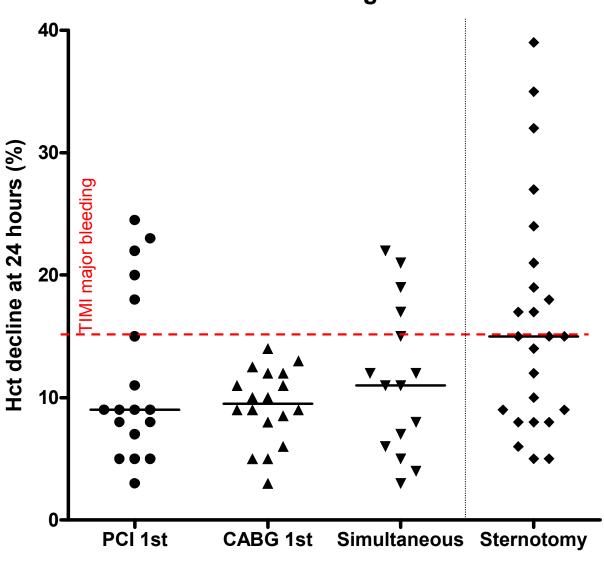


Bleeding After Hybrid



Plavix and Bleeding





Conclusions

- Feasible: Hybrid revascularization is suitable for typical CABG referrals
- Effective: Early recovery of QOL appears favorable
- Safe: Bleeding is not influenced by hybrid logistics
 - Surgery 1st, PCI 1st, simultaneous
 - Platelet ADP inhibition increases risk of "outliers"