Hybrid OR Design Helps In Some CAD Procedures

A one-stop "hybrid" operating room that allows surgeons and cardiologists to repair blocked arteries in the same setting improves outcomes in certain patients, a large, single-center study found.

There were significantly lower adverse events in patients treated in the hybrid suite compared with those who received isolated percutaneous coronary intervention (PCI) at 3 years (6.4% versus 22.7%, P<0.001), reported Shengshou Hu, MD, of Fuwai Hospital in Beijing, and colleagues.

However, the hybrid approach offered no significant advantage when compared with isolated coronary artery bypass graft (CABG) surgery (6.4% versus 13.5%, P=0.140), researchers wrote in a study published online in the Journal of the American College of Cardiology.

Also, the EuroSCOREs and SYNTAX scores were good barometers of success or failure with the hybrid approach.

High EuroSCOREs were significantly associated with lower major adverse cardiac or cerebrovascular events (MACCE) rates compared with both isolated groups: PCI (P=0.006) and CABG (P=0.030).

A higher SYNTAX score, however, only affected the PCI group's MACCE rates (P=0.002).

Patients in the low and medium EuroSCORE and SYNTAX score tertiles saw no significant benefit in terms of MACCE from the hybrid approach.

The researchers emphasized that a multidisciplinary heart team reviewed each patient's medical record and coronary anatomy to "determine whether both LIMA-LAD [left anterior descending artery] graft and PCI for non-LAD lesions could be feasible and reasonable."

"Patient selection based on the heart team approach is the key point whether [a hybrid revascularization] strategy could offer favorable outcomes for patients with multivessel disease," they added.

The hybrid approach offers fewer logistic concerns regarding procedure timing or sequencing of separate procedures compared with staged procedures, and if interventionalists encounter trouble during PCI, they can switch to CABG immediately, researchers said.

Furthermore, the "one-stop hybrid coronary revascularization" operating room requires no patient transfer and limits the patient's exposure to anesthesia.

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