Contemporary Surgical Management of Ischemic Heart Disease

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None



Ischemic Heart Disease in 2023

ISCHEMIA Trial

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Initial Invasive or Conservative Strategy for Stable Coronary Disease

D.J. Maron, J.S. Hochman, H.R. Reynolds, S. Bangalore, S.M. O'Brien, W.E. Boden, B.R. Chaitman, R. Senior, J. López-Sendón, K.P. Alexander, R.D. Lopes, L.J. Shaw, J.S. Berger, J.D. Newman, M.S. Sidhu, S.G. Goodman, W. Ruzyllo, G. Gosselin, A.P. Maggioni, H.D. White, B. Bhargava, J.K. Min, G.B.J. Mancini, D.S. Berman, M.H. Picard, R.Y. Kwong, Z.A. Ali, D.B. Mark, J.A. Spertus, M.N. Krishnan, A. Elghamaz, N. Moorthy, W.A. Hueb, M. Demkow, K. Mavromatis, O. Bockeria, J. Peteiro, T.D. Miller, H. Szwed, R. Doerr, M. Keltai, J.B. Selvanayagam, P.G. Steg, C. Held, S. Kohsaka, S. Mavromichalis, R. Kirby, N.O. Jeffries, F.E. Harrell, Jr., F.W. Rockhold, S. Broderick, T.B. Ferguson, Jr., D.O. Williams, R.A. Harrington, G.W. Stone, and Y. Rosenberg, for the ISCHEMIA Research Group*



Ischemic Heart Disease in 2023

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CLINICAL PRACTICE GUIDELINE: FULL TEXT

2021 ACC/AHA/SCAI Guideline for Coronary Artery Revascularization

A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines

CLINICAL PRACTICE GUIDELINE

2023 AHA/ACC/ACCP/ASPC/NLA/PCNA Guideline for the Management of Patients With Chronic Coronary Disease: A Report of the American Heart Association/American College of Cardiology Joint Committee on Clinical Practice Guidelines

What is the latest and greatest in Coronary Artery Bypass Grafting (CABG) in 2024?

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Multi-Arterial Grafting

Coronary Artery Bypass Grafting (CABG)



Coronary artery bypass grafting (CABG)





1986 NEJM - Established Left Internal Mammary Artery as conduit of choice



Loop FD, Lytle BW, Cosgrove DM, et al. Influence of the internal-mammary-artery graft on 10-year survival and other cardiac events. N Engl J Med 1986; 314: 1–6.



Saphenous vein grafts to other targets



Coronary artery bypass grafting (CABG)

If one artery is good, are two arteries better?





Single Arterial Grafting (SAG)







Single Arterial Grafting (SAG) Multi-Arterial Grafting (MAG)





Single Arterial Grafting (SAG) Multi-Arterial Grafting (MAG)

If one artery is good, are two arteries better?



The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Bilateral versus Single Internal-Thoracic-Artery Grafts at 10 Years

David P. Taggart, M.D., Ph.D., Umberto Benedetto, M.D., Ph.D.,
Stephen Gerry, M.Sc., Douglas G. Altman, D.Sc.,* Alastair M. Gray, Ph.D.,
Belinda Lees, Ph.D., Mario Gaudino, M.D., Vipin Zamvar, M.S., F.R.C.S.,
Andrzej Bochenek, M.D., Brian Buxton, M.D., Cliff Choong, M.D.,
Stephen Clark, M.D., Marek Deja, M.D., Jatin Desai, M.D., Ragheb Hasan, M.D.,
Marek Jasinski, M.D., Peter O'Keefe, M.D., Fernando Moraes, M.D.,
John Pepper, M.D., Siven Seevanayagam, M.D., Catherine Sudarshan, M.D.,
Uday Trivedi, M.D., Stanislaw Wos, M.D., John Puskas, M.D., and
Marcus Flather, M.B., B.S., for the Arterial Revascularization Trial Investigators⁺







As treated analysis:





As treated analysis:

Intent to treat:



RAPCO - Radial Artery Patency and Clinical Outcomes program



Real World MAG

Coronary: Research

Multiarterial vs Single-Arterial Coronary Surgery: 10-Year Follow-up of 1 Million Patients



Joseph F. Sabik III, MD,¹ J. Hunter Mehaffey, MD,² Vinay Badhwar, MD,² Marc Ruel, MD,³ Patrick O. Myers, MD,⁴ Sigrid Sandner, MD,⁵ Faisal Bakaeen, MD,⁶ John Puskas, MD,⁷ David Taggart, MD,⁸ Thomas Schwann, MD,⁹ Joanna Chikwe, MD,¹⁰ Thomas E. MacGillivray, MD,¹¹ Abel Kho, MD,¹² and Robert H. Habib, PhD¹³

Multi-arterial grafting (MAG) vs. N Single-arterial grafting (SAG)

- Society of Thoracic Surgeons (STS) Adult Cardiac Surgery Database (ACSD) was linked to the Centers for Disease Control and Prevention National Death Index (NDI)
- The STS ACSD captures in-hospital and 30-day outcomes for 97% of CABG operations performed in the United States
- 1,021,632 patients from 1108 programs, including 100,419 patients who underwent multiarterial CABG (9.83%) and 920,943 patients who underwent singlearterial CABG (90.17%)



Multi-arterial grafting in the US



MAG vs. SAG



Patient Variables	All Cases			Propensity Matched		
	Single-Arterial (N = 920,943)	Multiarterial (N = 100,419)	Std Diff, %	Single-Arterial (N = 100,404)	Multiarterial (N = 100,404)	Std Diff, %
Radial	0 [0-0]	1 [0-1]	412	0.0 ± 0.0	0.7 ± 0.8	1221
SITA/SVG	920,943 (100)	0 (0.0)	***	100,404 (100)	0 ± 0.0	1444
SITA/RA	0 (0.0)	45,662 (45.5)		0 (0.0)	45,654 (45.5)	
BITA/SV	0 (0.0)	47,222 (47.0)		0 (0.0)	47,216 (47.0)	
BITA/RA/SV	0 (0.0)	7535 (7.5)		0 (0.0)	7534 (7.5)	



MAG vs. SAG







IPW Adjusted Hazard Ratio (95% C.)







IPW Adjusted Hazard Ratio (95% C.I.)

Cardioputmonary Bypass Off-pump

Surgical Priority

CHF - NYHA IV CHF - Not NYHA IV

Chronic Lung Disease

Peipheral Vascular Disease PVD - Yes PVD - No

Cerebrovascular Disease CVD - Yes CVD - No

Kidney Function eGFR <30 eGFR 30-44.9 #GFR 45-59.9 eGFR 60-88.9

Coronary Artery Disease Three-Veesei Die

Left Ventricular Function

Diabetes Mellitus





IPW Adjusted Hazard Ratio (95% C.I.)

Cardioputmonary Bypass Off-pump

CHF - NYHA IV CHF - Not NYHA IV

Chronic Lung Disease

Peipheral Vascular Disease PVD - Yes PVD - No

Cerebrovascular Disease CVD - Yes CVD - No

Kidney Function eGFR <30 eGFR 30-44.9 #GFR 45-59.9 eGFR 60-88.9

Coronary Artery Disease Three-Veesei Die

Left Ventricular Function

BMI >40





Single Arterial Grafting (SAG) Multi-Arterial Grafting (MAG)





Single Arterial Grafting (SAG) Multi-Arterial Grafting (MAG)





Single Arterial Grafting (SAG) Multi-Arterial Grafting (MAG)



Multi-Arterial Grafting at UNMC



Multi-Arterial Grafting at UNMC UNMC STS data





Multi-Arterial Grafting at UNMC Clinical Trials



Multi-Arterial Grafting at UNMC Clinical Trials

The ROMA Trial

Randomized Comparison Of The Clinical Outcome Of Single Vs Multiple Arterial Grafts



Multi-Arterial Grafting at UNMC Clinical Trials

The ROMA Trial

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