ATRAUMATIC ENDOSCOPIC SAPHENOUS VEIN HARVESTING WITH A RADIOFREQUENCY SEALER

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INTRODUCTION

- Vein grafts are still the most common 2nd and 3rd grafts for CABG
- Endoscopic vein harvesting is adopted widely
- (Open) no-touch vein harvesting has been proven to improve long-term patency of vein grafts
- While endoscopic no-touch vein harvesting has been described previously, it is still not adopted widely

TOOLS

- Karl Storz Endoscopic Retractor
- Medtronic Covidien LigaSure Sealer/DIvider

TIPS

- Vein mapping is mandatory
- Upper leg is preferrable
- No hook dissector
- Checking for collaterals with open (V-shaped) branches of the sealer

CONCLUSIONS

Atraumatic endoscopic vein harvesting with a radiofrequency sealer is a reproducible technique and may be used routinely in CABG surgery

Endoscopic no-touch vein harvesting with a radiofrequency sealer is a **reproducible** technique and may be used **routinely** in CABG surgery





