Direct Cannulation in Right Axillary ASD Closure

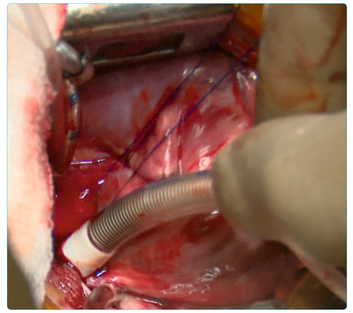
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Introduction

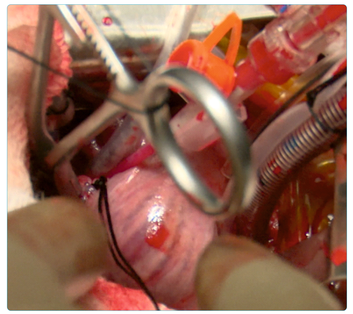
- Increasing patient interest in minimally invasive procedures, demands surgeons to be current on the most common minimally invasive techniques in cardiac surgery
- Peripheral cannulation -convenient but carries a risk of retrograde dissection, embolization, stroke and ipsilateral limb ischemia
- Central aortic cannulation has the advantage of antegrade flow
- Femoral cannulation is difficult in smaller children as vessels are small in calibre

Methods

- January 2018 to October 2021
- 100 cases
- Age range 10 mths-12 years
- Right axillary approach
- Direct arterial and venous cannulation



Aortic and SVC Cannulation



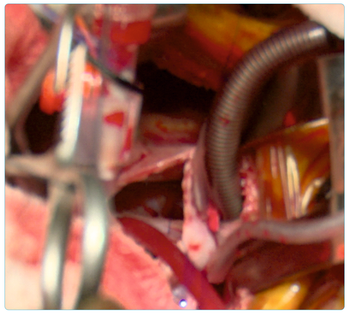
Direct Cannulation with Aortic X Clamp

Results

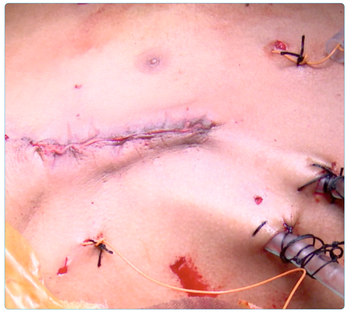
- No conversion
- No rexploration for bleeding
- None had stroke, renal failure
- There were no aortic dissections

Conclusion

- This approach is a reliable ASD MICS procedure
- Low complication rates
- Incision doesnot hamper breast development especially in girls.
- It is very cost effective as regular instruments and cannulas are used



ASD



Incision