Right mini-thoracotomy for Mitral valve surgery: Early outcome of a single center

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Background:

Mitral valve surgery through a right mini-thoracotomy (RMT) is gaining widespread acceptance and has become routine in many centers. Its potential benefits include a decreased postoperative bleeding and pain, and a faster recovery.

Herein, we report on our early experience of mitral valve surgery through a right mini-thoracotomy.

Methods:

From October 2018 to December 2021, a total of 111 patients underwent a mitral valve surgery through RMT in our center. There was one conversion to sternotomy because of poor surgical exposure

Results	
Male/Female (n)	64/47
Age (years)	63.8 (32-89)
Replacement/ Plasty (n)	46/65
Tricuspid valve plasty (n)	5
PFO closure (n)	5
Cross-clamp (min) mean (range) *	93 (36-157)
CPB (min) mean (range)	140 (98-239)
Revision for bleeding (n)	8
ICU lenght of stay (days) mean (range)	3(1-28)
Hospital lenght of stay(days) mean (range)	10(4-45)
30-day survival (%)	95.5%

Conclusion:

Minimal invasive mitral valve surgery through RMT is a safe and reproducible approach in our center.