A case of robotic left internal mammary harvest in a patient undergoing maxillo-facial surgery

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Introduction:

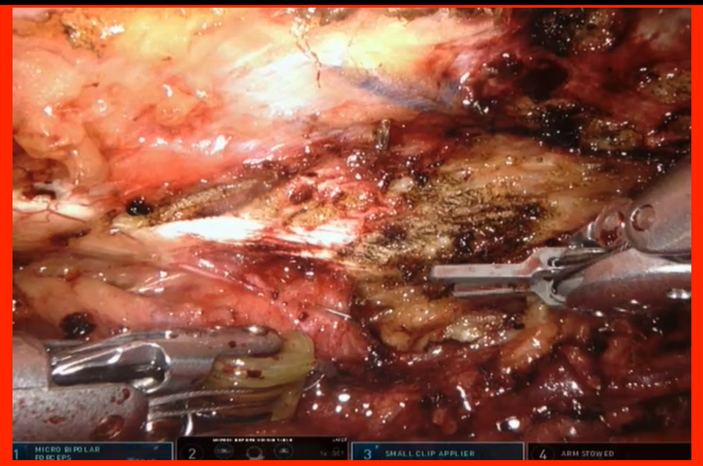
- Robotic devices offer an attractive option for reducing the burden of morbidity associated with maximal access incisions such as median sternotomy.
- In comparison to coronary artery bypass grafting by sternotomy, robotic coronary artery bypass grafting has shown lower rates of; post-operative pneumonia, ventilation time, pain and post-operative stay.
- The skills learnt in minimal access cardiac surgery may be used to benefit patients undergoing surgery by other specialties.

Case Report:

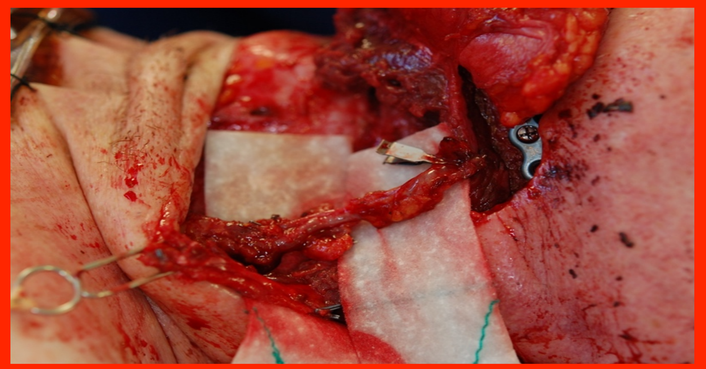
- 44yo male with osteoradionecrosis of a previously revised free flap reconstruction of the neck and floor of the mouth.
- The maxillo-facial surgeons planned to use the left internal mammary artery for the microvascular reconstruction of the jaw.
- The Cardiac surgeon used the Da Vinci® Surgical System (Intuitive Surgical, Sunnyvale, CA, USA) to harvest the left internal mammary artery; this was then tunneled into the neck.

Conclusions:

- Due to the complexity of the redo-facial surgery, the addition of sternotomy would have added further burden to the patient.
- Robotic assistance provides the advantages of harvesting a long internal mammary pedicle, safely and quickly, with lower morbidity than that associated with a median sternotomy.



Left internal mammary being harvested using Da Vinci



Completed anastomosis of the left internal mammary artery