

Clinical outcomes after **totally endoscopic redo** coronary artery bypass grafting

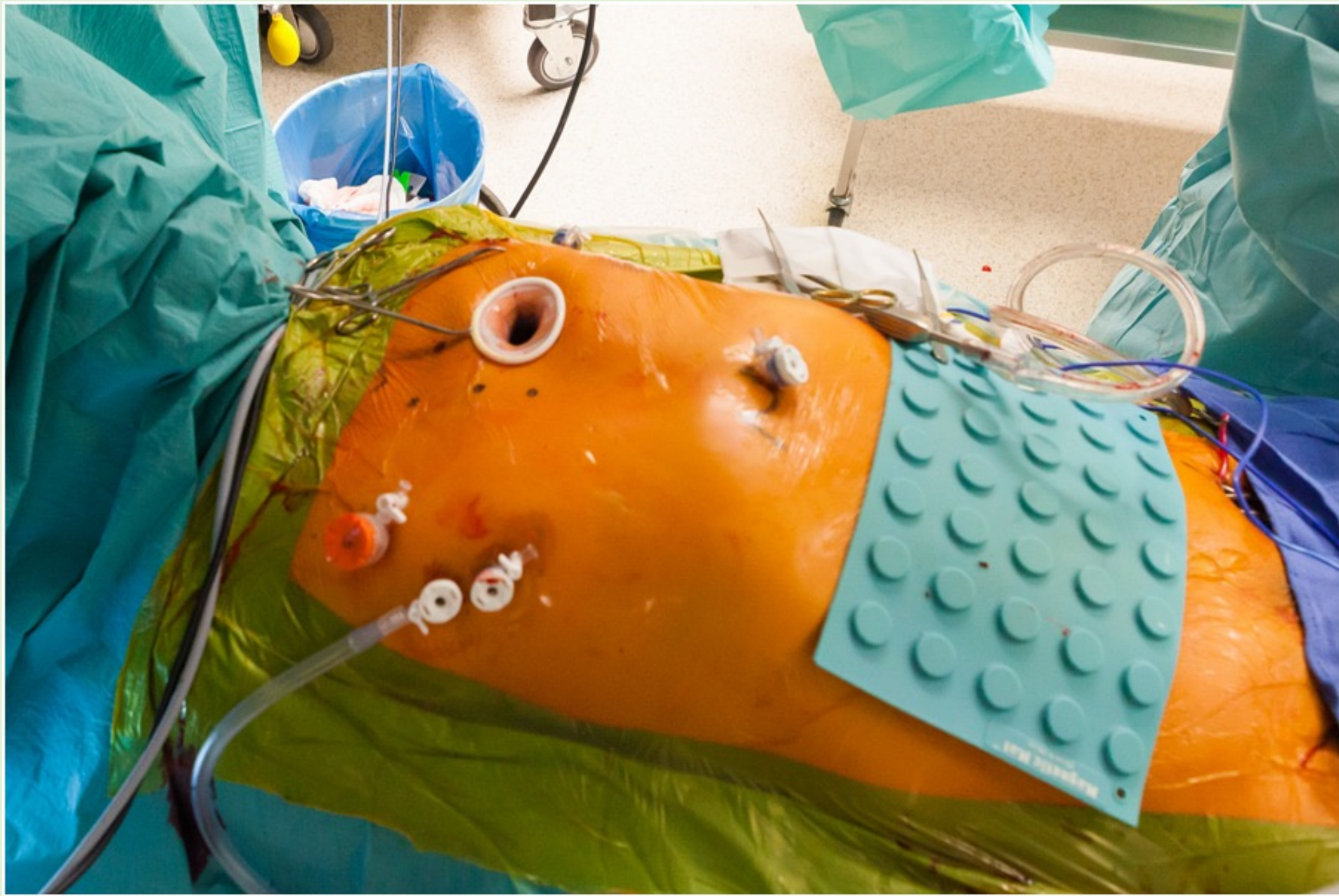
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Introduction

A sternum-sparing alternative for **reoperations** is **totally endoscopic coronary artery bypass grafting** (Endo-CABG), which already showed favorable results for initial surgery. However, little is known about the **clinical outcomes** after redo Endo-CABG.

Methods

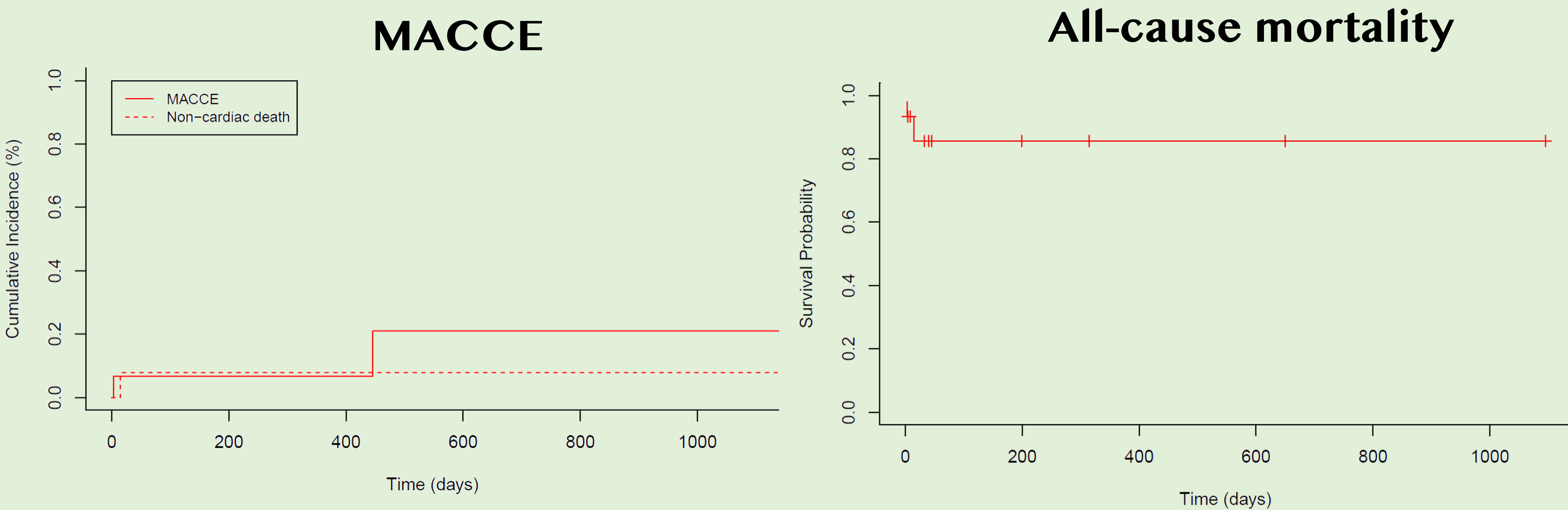
In this single-center retrospective study, 15 patients underwent totally endoscopic redo coronary artery bypass grafting between November 2016 and September 2021. The primary outcomes were major adverse cardiac and cerebrovascular events (MACCE) and mortality.



Three 5 mm trocars and a 30 mm working port

Results

	MACCE	Mortality
30-day	93.3%	85.6%
3-year freedom/survival	77.8%	85.6%



Y-graft	4 (26.67%)
Number of grafts	1.40 ± 0.51
Cross-clamping time (min)	46.15 ± 43.19
Cardiopulmonary bypass time (min)	97.67 ± 51.58
Perioperative blood loss (ml)	944.70 ± 706.26
Hospital length of stay (days)	7.79 ± 3.49

Conclusion: Redo Endo-CABG is a feasible alternative to perform re-operative CABG without sternal re-entry. Thirty-day, and three-year mortality and MACCE show acceptable results. To further enhance the outcomes, future research should concentrate on prospective trials.