

Workstyle Reform for Cardiovascular Surgeons through the Introduction of Minimally Invasive Cardiac Surgery via Endoscopy



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COI Disclosure

The author has no conflict of interest to disclose with respect to
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Background

Workstyle reform for cardiovascular surgeons is a critical issue in the medical field.

While the establishment of a Closed ICU and task shifting are considered effective solutions, various challenges and resistance exist in practice, making immediate implementation difficult.

We have successfully reduced the workload of surgeons by introducing minimally invasive cardiac surgery (MICS) via endoscopy, achieving improved surgical outcomes, reduced operation times, and decreased complications.

This report shares our findings.

Methods

Since 2021, we have introduced minimally invasive cardiac surgery (MICS) via endoscopy and gradually increased the number of cases as we overcame the learning curve.

By 2023, 56% of all surgeries were performed using MICS.

Surgical procedures

	MVP	AVR	CABG
N	112	49	59
Op mortality	0	0	0
Hospital stay, day	8	9	8
Results	MR2<99%		Patensy 93% (85/91)

Comparison in 2021 and 2024

	2021	2024
Number	100	177
MICS	24	111
Av. Income	\$100million	\$190million
Op Time	6:25	5:02
ICU stay, d	2.8	1.4
Overtime/m, h	102	74

Results

The team's strength has increased.

The number of MICS and total CVS has increased.

Our department's monthly revenue increased.

Operation time, ICU stay, and hospitalization period, all decreased.

As a result, overtime decreased, marking a successful workstyle reform for cardiovascular surgeons.

Conclusion

We will discuss how MICS contributes to workstyle reform based on real-world examples.

This initiative provides valuable insights for facilities considering the implementation of task shifting.