

Robotic Assisted Cryo Maze With Left Atrial Appendage Occlusion Via The Transverse Sinus

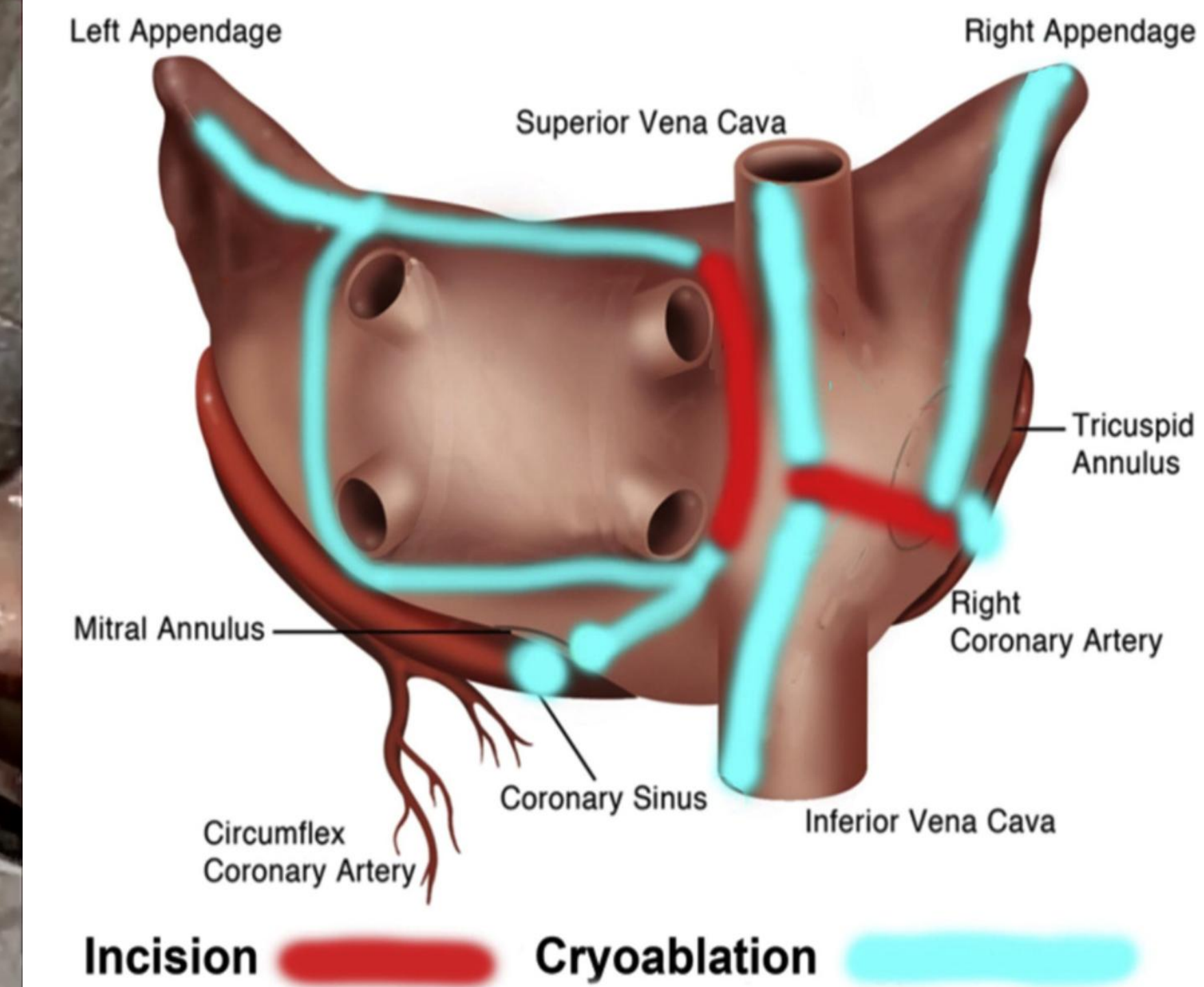
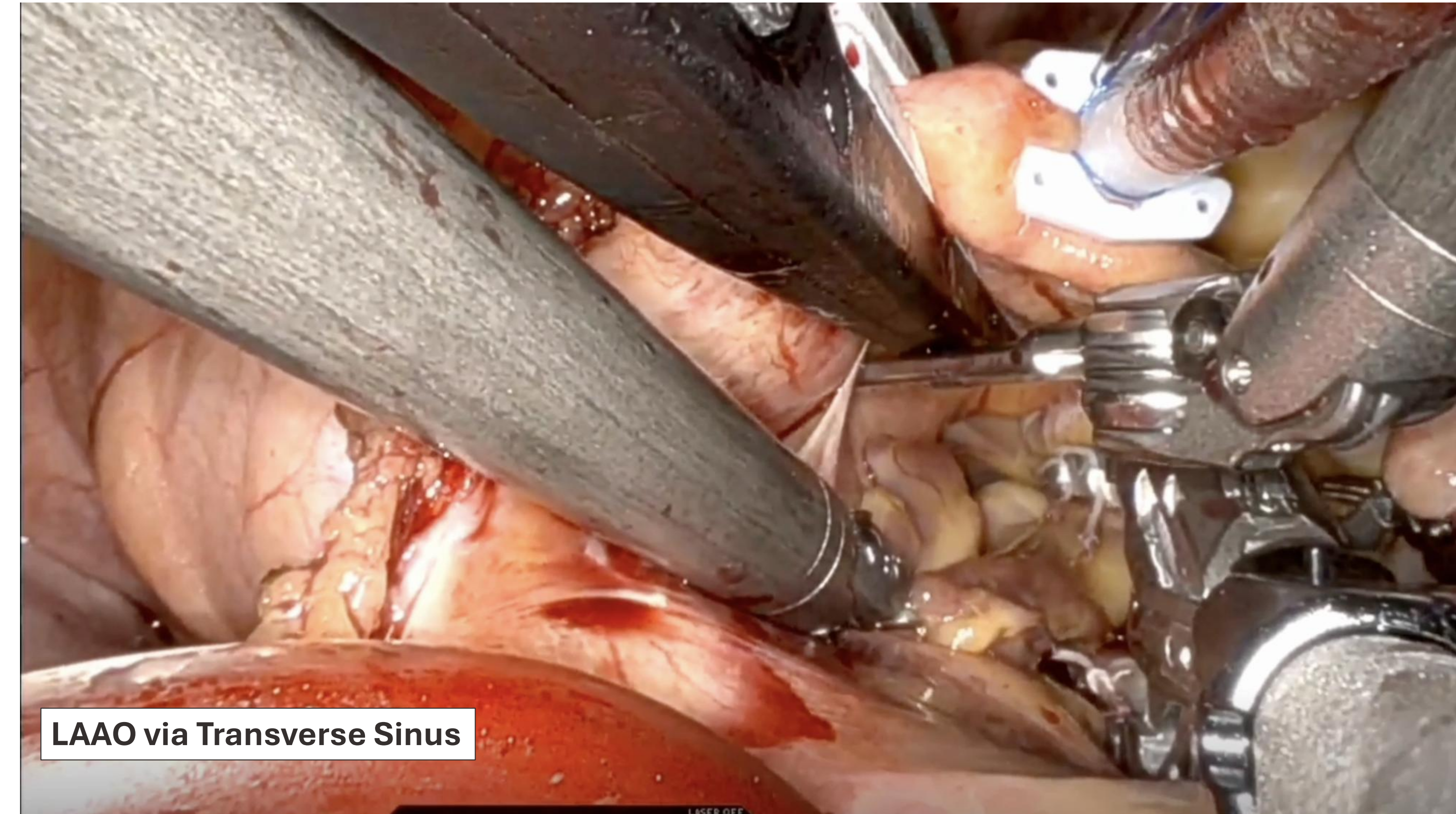
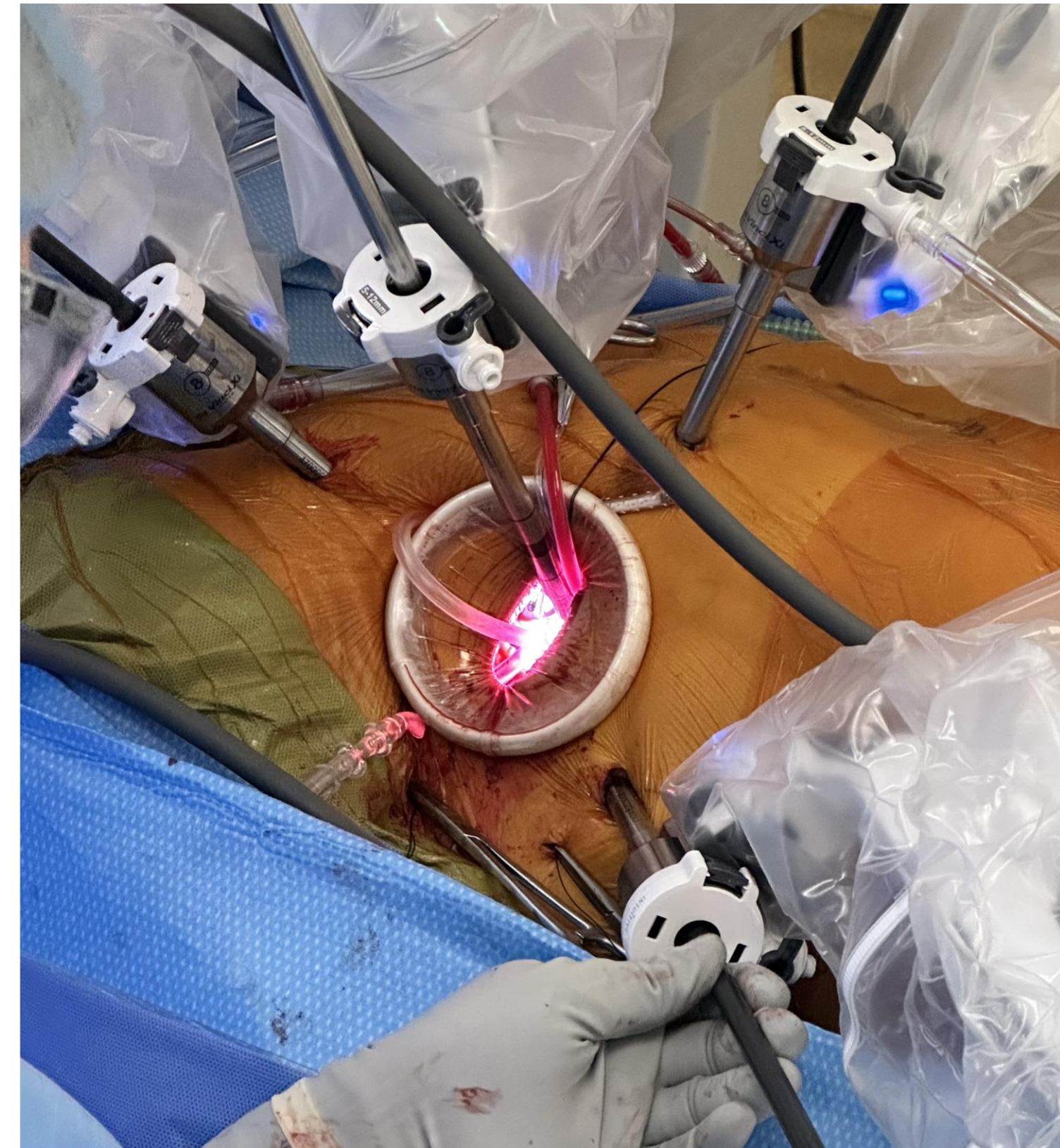
Fleck, R; Jefferson, L ; Van Doorn, E; Osmun, SJ; Ferraro, M; Hodges, K

Introduction

Surgical ablation for atrial fibrillation and left atrial appendage occlusion (LAAO) are guideline-supported strategies for rhythm control and stroke prevention in patients undergoing cardiac surgery, and in selected patients with refractory atrial fibrillation. We present a step-by-step approach to a robotic assisted Cryo MAZE procedure and left atrial appendage closure via the transverse sinus performed entirely from the patient's right side. The patient was a 67-year-old man with symptomatic persistent Afib refractory to medical therapy, DC cardioversion and catheter ablation.

Methods

Access was via a 4-5cm working incision in the 4th space and three 8mm ports in the 3rd, 4th and 6th spaces on the patient's right side. Bicaval cardiopulmonary bypass is commenced via the femoral artery, vein and right IJ vein. Left atrial appendage was occluded with an occlusion device from the right side via the transverse sinus, confirmed on TEE. Using a combination of endocardial and epicardial cryoablation, lesions were created as shown opposite. CPB was 132 minutes, cross clamp was 62 minutes.



Results and Conclusion

The patient was extubated in the OR and discharged home after a short hospital stay. He has had no recurrence of his Afib to date.

This approach offers a reproducible, minimally invasive way to perform the Cryo MAZE procedure either in isolation or in addition to other robotic cardiac surgery procedures.

