

Outcome of Total Arterial Minimally Invasive CABG in Patients With Left Ventricular Ejection Fraction <30%

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BACKGROUND

Patients with severe LV systolic dysfunction undergoing CABG represent a high-risk cohort. Total arterial minimally invasive CABG may improve recovery and reduce perioperative morbidity.

METHODS

Retrospective observational study including 30 consecutive patients between January 2020 and June 2025 undergoing off-pump total arterial MICS-CABG via left anterior mini-thoracotomy.

KEY OUTCOMES

- Mean age: 55.1 ± 13.2 years
- Mean LVEF: 27.8 ± 4.3%
- Total arterial revascularization: 96.7%
- Mean operative time: 283.7 minutes
- ICU stay: 6.9 days
- Hospital mortality: 3.3%
- Mid-term survival: 93.3%

CONCLUSION

Total arterial MICS-CABG demonstrated favorable perioperative and mid-term outcomes in patients with severe LV dysfunction and appears to be a safe and effective strategy in selected high-risk patients.

Clinical Parameter	Value
Diabetes	53.3%
Hypertension	50%
Prior MI	33.3%
No Blood Transfusion	56.7%
Re-exploration	6.7%
Total Mortality	6.7%

