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Off-pump coronary bypass surgery, graft patency, and the need of an informed consent

To the Editor:

We read with interest the article by Lim and colleagues¹ concerning graft patency after off-pump coronary bypass surgery (OPCAB). They showed that both patency and number of distal anastomoses are lower in OPCAB, which confirms and ex-

tends previous evidence published by our group concerning reduced patency rates.²⁻⁴

The OPCAB technique was developed and reintroduced in the clinical practice for economic reasons in some southern America countries more than a decade ago, and then it became progressively adopted by European and North America centers to reduce trauma, thus rendering coronary bypass surgery an easier choice compared with less invasive options (eg, interventional cardiologic procedures).

In recent years, evidence has accumulated concerning both the pros and cons of the OPCAB approach. It is now well established that OPCAB is associated with a reduced rate of minor outcomes such as the incidence of postoperative atrial fibrillation, the need of blood products, and probably reduced myocardial enzyme release.⁴ On the other hand, the risk of reduced patency and reduced revascularization is an important issue of OPCAB procedures. Thus, patients should be extensively informed about the pros and cons of the OPCAB approach before surgery, and they should clearly express their acceptance to undergo OPCAB.

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