

Cardiac surgery – Introduction

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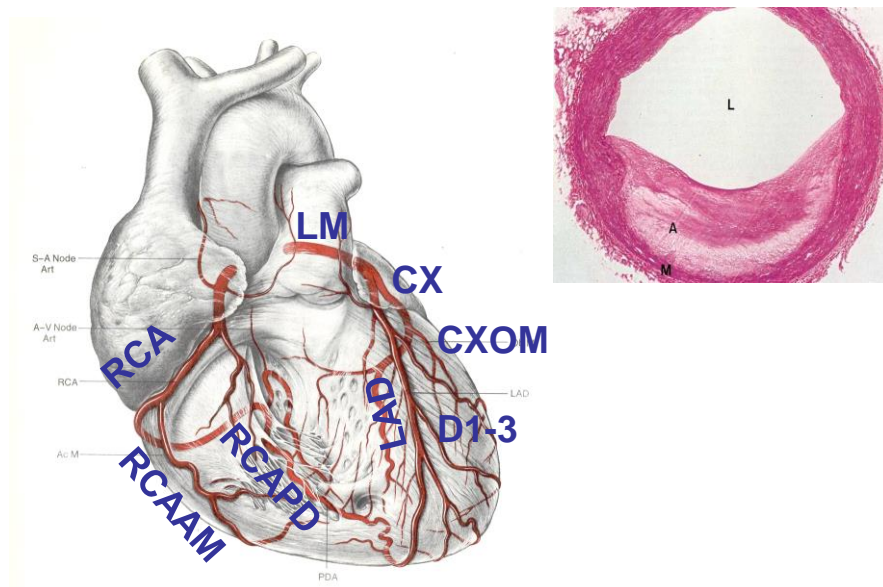
University of Pécs, Heart Institute

<http://aok.pte.hu/en/egyseg/oktatasianyagok/290>

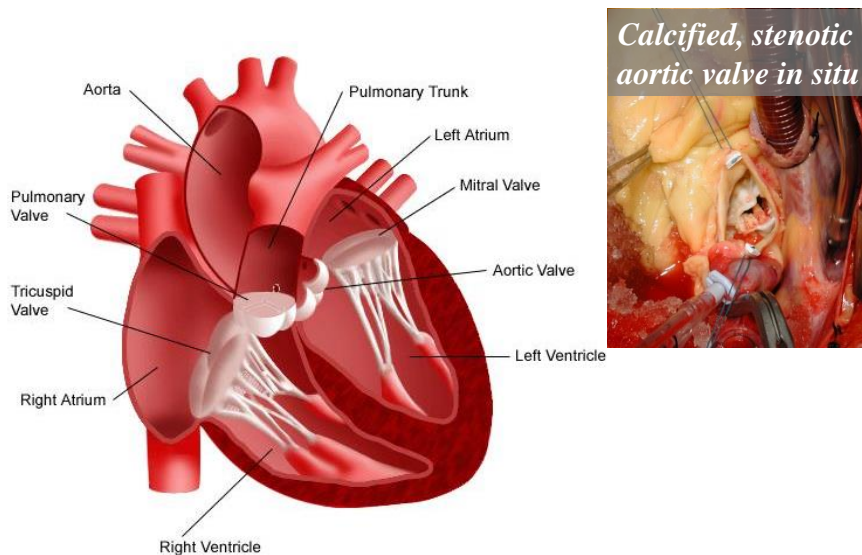


Pécs, 2025

The anatomy of coronary arteries



The anatomy of the heart



Most common types of heart operations

- coronary bypass grafting (CABG)
- valve replacement (AVR, MVR, TVR)
- valvuloplasty - repair (tricuspid, mitral – TVP, MVP)
- congenital (VSD, ASD, DBP...)
- operations on thoracic aorta (asc., arch)
- aneurysmectomy, aneurysm-plication
- heart transplantation and its alternatives
- pacemaker implantation

combined operations (CABG+valve, CABG+carotid endarterectomy, CABG+aneurysmectomy)

Milestones of cardiac surgery



Theodore Billroth
(1821-1894): *'Any surgeon who would attempt operation on the heart should lose the respect of his colleagues'*.



Ludwig Wilhelm Carl Rehn
(1849-1930)
First successful myocardial suture: **1896**

The requirements for modern cardiac surgery

- diagnostic background (coronarography, echo)
- asepsis, antibiotics
- transfusiology
- hemostaseology
- anesthesiology - intensive care
- extracorporal circulation
- myocardium protection
- operative technique
- artificial valves, other prostheses

Milestones in cardiac surgery

1896. Rehn (G, 1849-1930) successfully sutures a heart wound

1925. Souttar (UK, 1875-1964) – closed mitral commissurotomy

1928. Forssmann (G, 1904-1979) – first cardiac catheterization via cephalic vein on himself

1939. Gross (USA, 1905-1988) – ligation of ductus Botalli

1950-s Gibbon, Kirklin, Lillehei - ECC

1951. Vineberg a. thoracica interna implantation

Favaloro, Effler v. saphena bypass

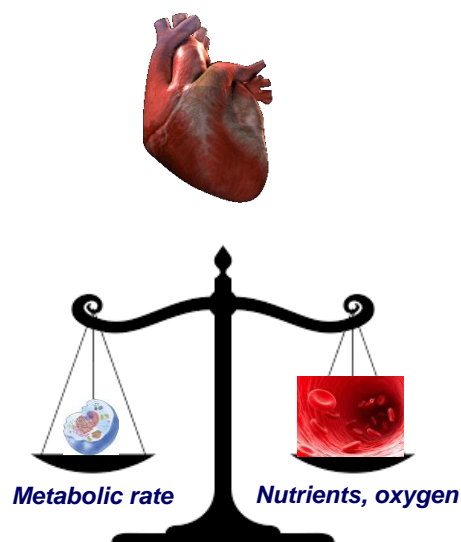
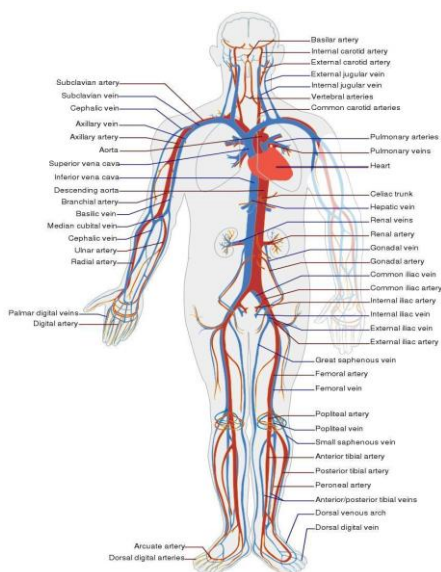
1953. ASD operation

1955. VSD operation

1964. Kolesov a. thoracica interna-LAD bypass

1968. Green a. thoracica interna-LAD bypass

The circulation – ischemic damage



The making of the heart-lung machine

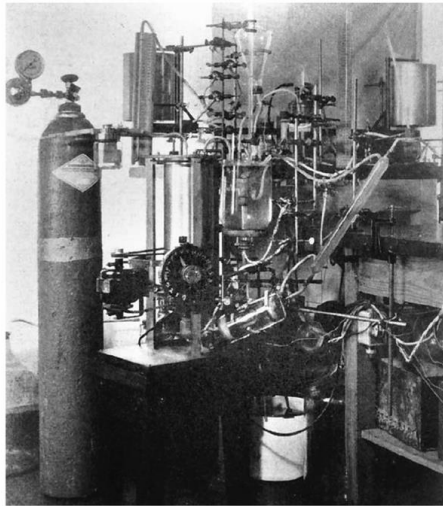
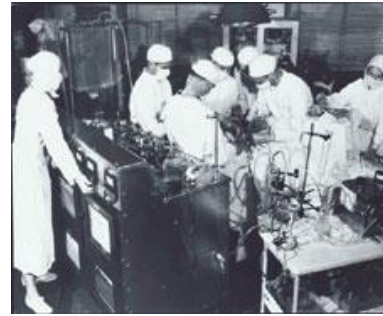
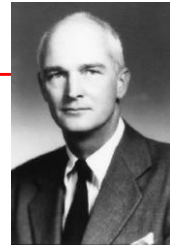


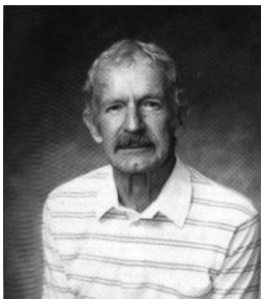
Fig 2. Photograph taken in Dr Gibbon's laboratory, showing an early version of his heart-lung machine. (Courtesy of J. H. Gibbon, Jr. Reprinted with permission from Gibbon JH et al. Arch Surg. 1937; 34:1109.)

**John Gibbon
(1903-1973)**



May 6th 1953. The first successful ASD closure with the usage of heart lung machine (IBM).

Hypothermia – other arm of the scale



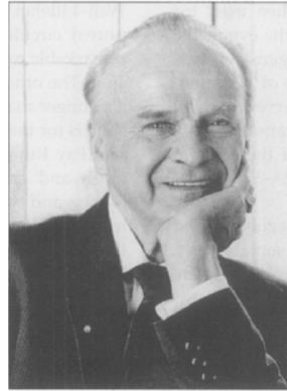
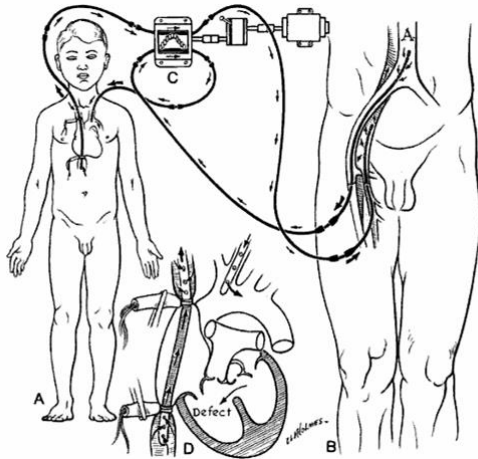
JF Lewis (1916-1993)

1953. Lewis and Taufic: Closure of atrial septal defects with the aid of hypothermia. in Surgery



Sept. 2nd 1952. The first open heart surgery, 2 cm ASD-II closure in a 5 year old girl, $t=26^{\circ}\text{C}$ full body hypothermia, with inflow stasis. (University of Minnesota Hospital)

„Cross-circulation”



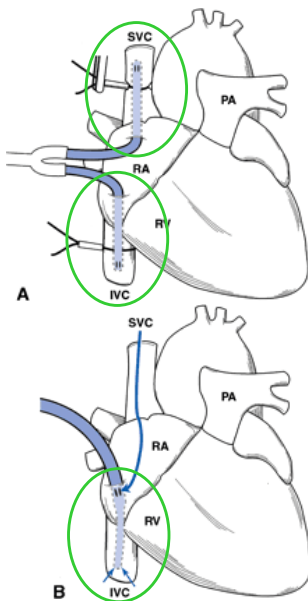
CW Lillehei (1919-1999)

Lillehei-Cohen-Warden

Hard criticism...

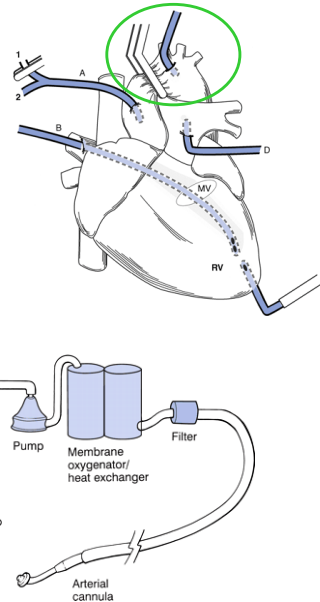
1954-55: 45 open heart surgeries: VSD, AV-canal, Fallot-IV. Eg.: F-IV 14 minutes cross-circulation time.

The schematic of extracorporeal circulation

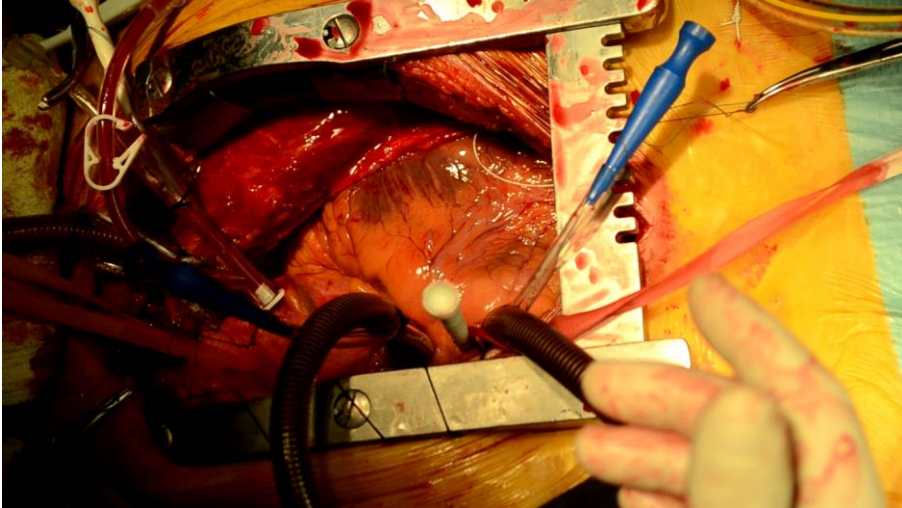


Heparinization:
300IU/bwtkg
Na-heparin

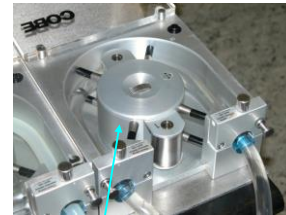
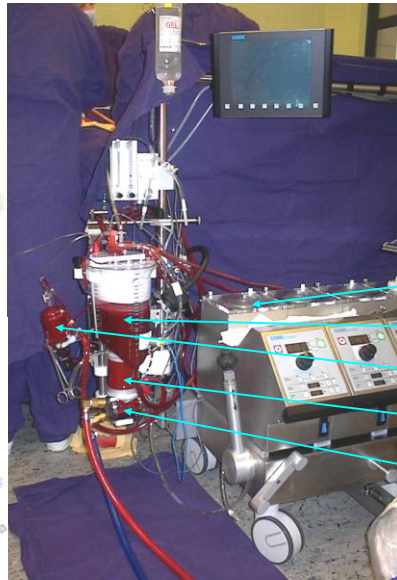
Antidote:
Prothamin



The cannulation in real life



The modern heart-lung machine

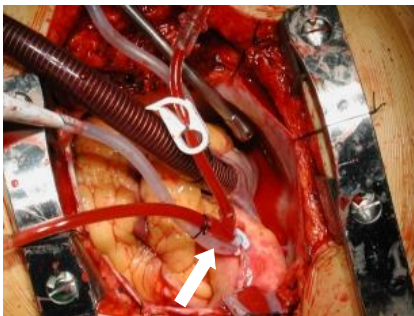


- roller pump (2)*
- reservoir (1)*
- bubble trap (5)*
- oxygenator (3)*
- heat exchanger (4)*
- tubing*

The pathophysiology of the ECC

- *hemodilution*
- *locoregional malperfusion*
- *acidosis*
- *inflammatory response, complement activation*
- *capillary leakage*
- *actions of hypothermia (Hb oxygen binding properties, enzyme activity, hemostasis, etc.)*
- *disruption of blood cells*
- *metabolic, endocrine changes*
- *electrolyte disturbances*

Myocardial protection



*anterograde aortic root
cardioplegia and vent*



local ice-squash

Myocardial protection by administering a special cold solution into the coronary circulation. The most popular: +4 °C hyperkalaemic crystalloid cardioplegia, that causes depolarization block, arrest, sparing the energy expenditure of contraction and electric activity.

Myocardial protection

anterograde

aortic root
direct ostial

retrograde

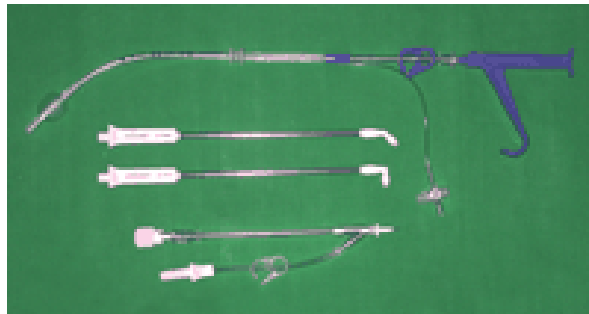
sinus coronarius

anterograde-

-retrograde

crystalloid - blood

cold - warm cardioplegia



The diagnosis of heart diseases

History: angina, dyspnea, fatigue

Physical changes: primarily not present in CAD, murmurs

Tests: ECG, stress ECG, Holter (silent ischaemia)

Echocardiography (transthoracic, transesophageal)

(Myocardium perfusion: scintigraphy, SPECT)

Coronary angio: above 40 years before each cardiac surgery
Coronary CT (or at suspicion of IHD)

Viability examinations: MRI, (PET)

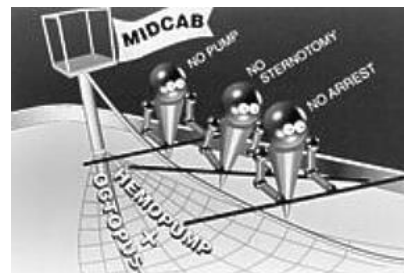
Biopsy

Possible complications of heart operations

- injury at cannulation site
- thromboembolism (heart, brain, kidney, extremity...)
- bleeding, coagulopathy, DIC
- pleural, pericardial effusion (Dressler)
- perioperative infarction, heart failure
- arrhythmia (atrial fibrillation, VES, stb.)
- phrenic nerve palsy (due to ice squash)
- airway infection, atelectasis, pneumonia
- neurological, mental disturbances
- stress ulcer, gastrointestinal hemorrhage
- woundhealing problem, infection, septicaemia
- exacerbation of unrecognized infectious focus
- dissemination of unrecognized tumor
- exitus lethalis

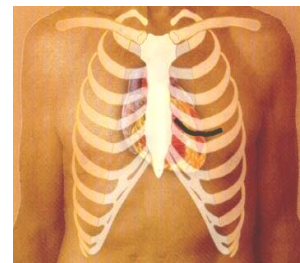
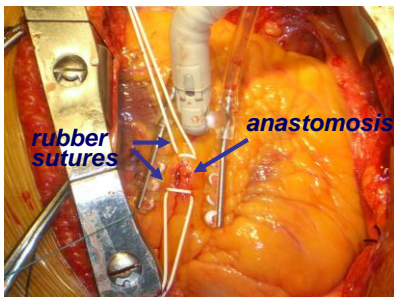
Minimally (less) invasive directions

„off-pump” CABG
MIDCAB



Stabilizing LAD

Octopus, Medtronic, Inc.



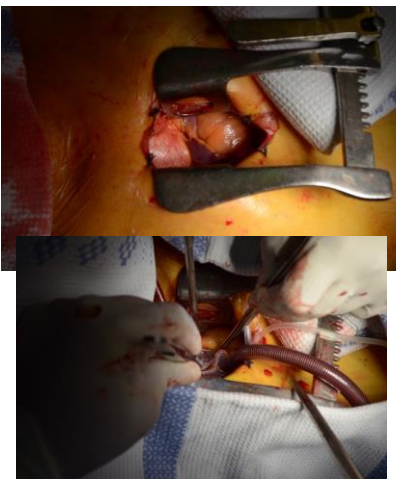
Off-pump CABG operations

- avoids complications of ECC
 - however, hypoperfusion↑
 - still manipulations on asc. aorta
- need for special stabilizing device
 - occluder or shunt occluder
 - sometimes difficult access of coron.
 - cannot open heart chamber
 - operative manipulation affects cardiac output



Minimally invasive access

- smaller (even 4-6 cm!) skin incision
- minimal tissue damage, intact chest wall



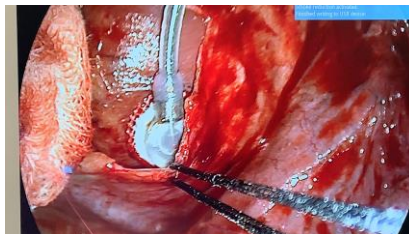
- less operative stress
- shorter operation (?)
- less complications (?)
- less postop. pain
- shorter physical recovery
- early rehabilitation
- **better cosmetical results**
- reduced costs (?)

Minimally invasive access: VATS

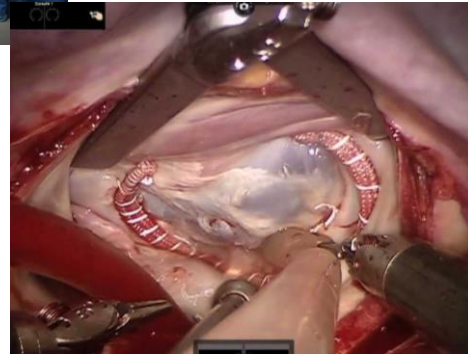
- through 10mm ports
- through uniport access



Minimally invasive access: epicard. PM



Robot-assisted surgery



- Mitral valve repair
- CABG
- PM electrode implant.
- etc.

Thank you for your attention !

