

MEETING ABSTRACT

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Simultaneous coronary artery bypass grafting and carotid endarterectomy can be performed with low mortality rates

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Background/Introduction

There remains a controversy on the best approach for patients with concomitant carotid and coronary artery disease.

Aims/Objectives

In this study, we report our experience with simultaneous carotid endarterectomy (CEA) and coronary artery bypass graft (CABG) surgery in our clinic in the light of the literature data.

Method

Between January 1996 and January 2009, a total of 110 patients (86 males, 24 females; mean age: 65.11 ± 7.81 years; range, 44 to 85 years) who were admitted to hospital, Cardiovascular Surgery Clinic were retrospectively analyzed. All patients underwent simultaneous CEA and CABG. Demographic characteristics of the patients and a history of previous myocardial infarction (MI), hypertension, diabetes mellitus, hyperlipidemia, peripheral arterial disease, and smoking were recorded.

Results

One patient (0.9%) with major stroke died due to ventricular fibrillation. Perioperative neurological complications were observed in seven patients (6%). Complications were persistent in two patients. Four patients (3%) had post-operative major stroke, whereas three patients (2%) had transient hemiparesis. No perioperative myocardial infarction was observed.

Discussion/Conclusion

Simultaneous CEA and CABG can be performed with low mortality and morbidity.

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