

Patient Satisfaction 3 years after Endoscopic Saphenous Vein Harvesting is Higher than after Open Harvesting

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Although arterial conduits to the left coronary system have been shown to have a higher patency rate in CABG patients, the Saphenous vein (SVG) is still frequently used as a graft to the right coronary system and in other high risk patients. Traditionally the SVG was harvested in an open, long incision technique. Since the introduction of Endoscopic Saphenous vein Harvesting (EVH) in 1998 over 1000 Patients had EVH in Carmel Medical Center and it has become the routine technique

Material and Methods: From this patient cohort, 108 patients that had EVH in the years 2005 or 2006 were randomly chosen. Those were compared to a control group of 35 patients that had undergone open vein harvesting (OVH) at the same time period. The patients answered an 11 questions telephone survey – 8 questions regarding the leg incision and 3 questions regarding the chest incision. The patients were asked to grade from 1 to 10 the extent of pain from the incisions, the discomfort from the incisions and scars and the cosmetic result. The patients were asked about three times periods: 1- Immediately after surgery, 2 – In the short period after discharge and 3 – At preset day – 2-3 years after the operation. They were also asked to score their general satisfaction and about occurrence of major complications. Results: Pain from the leg incision was statistically lower in the study group starting immediately post operative through out and until today. There was statistically less leg discomfort and mobilization difficulties during the 3 time periods. Chest pain was also statistically lower in the study group. There was no statistically difference in major complication rate between the two groups. Conclusion: EVH patients compared with OVH patients have less pain, less discomfort and a higher satisfaction post operative and 2 and 3 year after operation. Further study of the Patience rate of EVH is needed