PP-249 The first two hundred cases of open heart surgery in Baku Central Military Hospital

Anar Emrah[1], Arzu Murselova[2], Valeh Mammadov[1], Nazim Salimov[2], Elman Samedov[3], Teymur Qasimov[3], Firdovsi Huseyinov[1], Samed Samedli[2], Samir Abbasov[2], Afet Vekilova[2], Nurlana Osmanova[2], Eldar Veliyev[1]

[1]Department of Cardiovascular Surgery, Central Military Hospital, Baku, Azerbaijan
[2]Department of Cardiology, Central Military Hospital, Baku, Azerbaijan
[3]Department of Anesthesiology, Central Military Hospital, Baku, Azerbaijan

OBJECTIVES

We are reporting the first results of open heart surgery operations in our newly established cardiovascular center belonging to Baku Central Military Hospital.

MATERIALS-METHODS

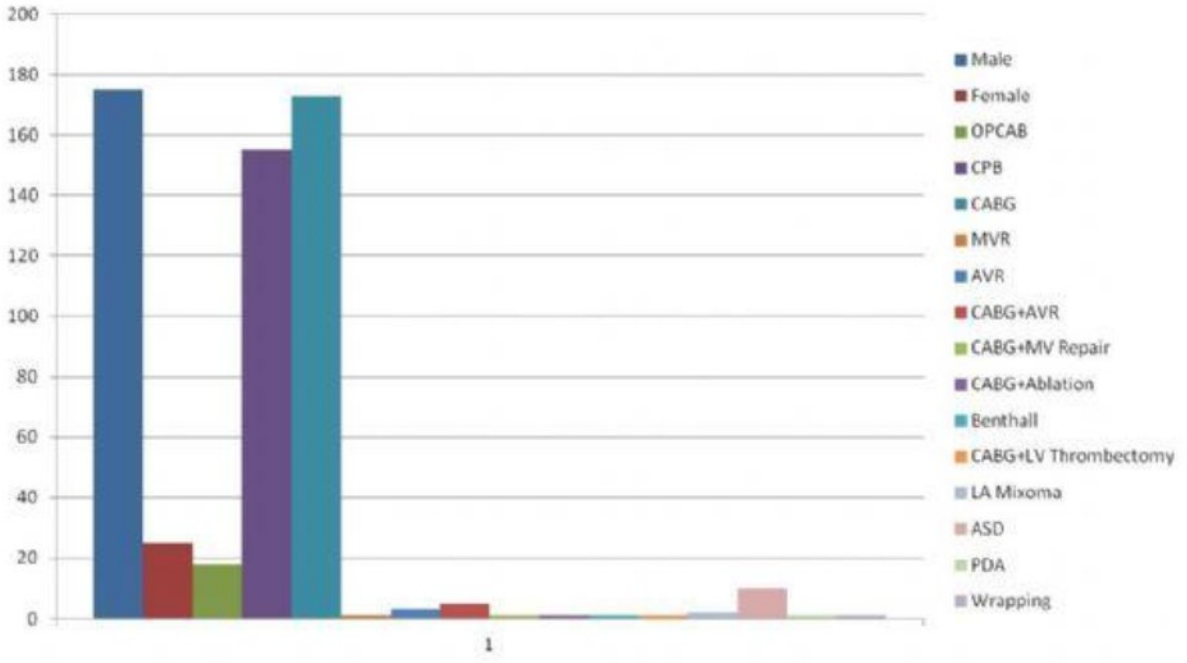
We evaluated retrospectively results of the first two hundred open heart surgery operations in our center. Our heart team of 30 professionists, including anaesthesist, cardiolog, assisting surgeon, perfussionist and nurses were trained in Ankara Gulhane Military Medical Academy for over 2 years. The first surgeon had a training period of 6 years.

RESULTS

200 patients underwent open heart surgery between 08.10.2013 and 23.12.2014 (175 men, 87.5 %). Mean age was 52 years (11 months-80 years). According to EuroSCORE, 59 patients were found to be in low risk group (0-2 point). 107 patients were found in medium risk group (3-5 point) and 34 patients were in high risk group. Coronary artery bypass grafting was performed in 173 patients (18 OPCAB). The other procedures included one MVR, three AVR, five CABG+AVR, one CABG+mitral valve repair, one CABG+LA ablation, one CABG+LV thrombectomy, one Bentall procedure, one ascending aorta wrapping, one PDA ligation, two LA mixoma excision and 10 secundum type ASD repair, one of which with minimal invasive technique.

Mean intensive care unit stay was 2.2 days and mean duration of hospital stay was 8.6 days. Mortality rate was 0%. Re-exploration was required in 5 patients for hemorrhage. Two patient had postoperative gastrointestinal bleeding. There was no mediastinitis or neurologic complication.

Description of the operations



CONCLUSIONS

Establishing a new cardiovascular center is challenging and requires expertise. However, it is possible to get excellent results with a hardworking and enthusiastic team, trained for a mid-long term period in an experienced center.