SHA 29. Open chest strategy after cardiac surgery; the gate for survival in highly critical situations
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Objectives: To evaluate the incidence, patient characteristics, and early outcome of open chest technique.

Methods: Fourteen adult patients were managed by open chest technique after cardiac surgery. Preoperative, operative and postoperative patient’s data were recorded and reviewed.

Results: Mean age was 52 ± 8.2 years, NYHA functional class III/IV 78%, emergency operation 52%, redo operation 21%. Preoperative mean EF% = 38% ± 14%. Preoperatively, eight patients (52%) required inotropic support and five of them (36%) required intraaortic balloon pump (IABP) support in addition to inotropic support. Mortality was 42.8%, causes of death included multi-organ failure in three patients, low cardiac output in two patients, and sepsis in one patient. Complications included superficial sternotomy wound infection occurred in three patients and mediastinitis in one patient. sepsis in three patients, upper. Delayed sternal closure was performed successfully at 2.8 ± 1.7 days after primary operation.

Conclusion: Open chest management with delayed sternal closure is a helpful strategy in the management of critical patients who had unstable hemodynamics or uncontrollable bleeding after cardiac surgery. It allows easy management of mediastinal bleeding, monitoring of cardiac edema regression, and recovery of ventricular function with a relatively low incidence of sternal morbidity.

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SHA 30. On-pump beating heart coronary bypass surgery; Is it the right choice in left main coronary artery disease
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Objectives: To evaluate early outcome of on-pump beating heart coronary bypass surgery in patients with significant left main coronary artery stenosis.

Methods: Fifty-one patients with significant left main stenosis >50% were operated by on-pump beating heart technique, 34 patients were stable while 17 patients were clinically unstable. Preoperative, operative and early postoperative data were collected and analyzed.

Results: The hospital mortality was 3.9%. The mean number of grafts was 3.1 ± 0.6 graft/patient. The mean CPB time was 72 ± 29 min. Intraaortic balloon pump was used in 33 patients preoperatively and inserted intraoperatively in 4 patients. There were no conversions to cardioplegic arrest and aortic cross clamping in any of our patients. The mean Intensive Care Unit stay was 3.1 ± 3.5 days and the mean global hospital stay was 12 ± 5.2 days.

Conclusion: On-pump beating heart coronary artery bypass surgery is a safe, and feasible modality for patients with significant left main coronary artery disease who poorly tolerate both cardioplegic arrest of the conventional technique and extensive manipulations during off pump technique. It gives chance for full revascularization without fear of hemodynamic instability. Early outcome is encouraging for this technique in this special subset of critical patients.

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SHA 31. Life styles related to coronary artery disease in Saudi males older than 12 years of age
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Objectives: The present study aims to highlight life styles related to coronary artery diseases risk factors among patients attending a primary care clinic at King Khalid University Hospital, in Riyadh, Saudi Arabia.

Methods: Cross sectional study has been conducted at a primary care clinic in King Khalid University Hospital, Riyadh, Saudi Arabia, during the period from 18/4/2006 to 13/6/2006. All adult male patients above 12 years who attend a primary care clinic were included in the study, all patient were interviewed by one consultant family medicine during the study period. The patients were asked about dietary habits, physical activity and type of exercise, and smoking habits. Weight and height was taken for all patients by the nurse in the clinic, and body mass index (BMI) was calculated for all patients. The total numbers of participants were 246 patients. The data were analyzed using the Statistical Package of Social Science (SPSS) version 11.5.

Results: A total number of 246 male adult patients were interviewed during the study period. The present study showed that 45.4% of the participants were following healthy diet control, and 21.5% of the participants were practicing exercise in daily bases, and 51.2% practicing exercise sometimes, while 26% of participants did not had any type of exercise. The type of exercise which has been practiced by active participants was walking (76.5%) and sports (22.9%). Sports were like football, basketball, swimming, and other sport club activity. The present study showed that only 20.7% of the participants had ideal body weight (BMI < 30), while 37.7% of the participants had obesity (BMI > 30). The present study showed that 8.9% of the participants were current smokers.

Conclusion: It is an important health plan priority to concentrate in improving life styles in the community, to prevent cardiovascular risk factors, and to reduce the prevalence of coronary artery disease in The Kingdom of Saudi Arabia.

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SHA 32. Vitamin D status is associated with cardiometabolic risk factors among non-obese Arab children and adolescents
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Objectives: Hypovitaminosis D has recently gained attention as a novel risk factor for cardiovascular disease. The relationship of vitamin D status to cardiometabolic risk factors among children and adolescents, however, has been limited. This study aims to determine whether such risk factors are influenced by vitamin D among non-obese Arab children and adolescents.

Methods: A total of 53 boys (mean age 11.6 ± 3.8 years) and 65 girls (12.1 ± 4.1) participated in this cross-sectional study. Anthropometric measurements included body mass index, waist and circumference as well as blood pressure. Fasting blood samples were also collected and serum glucose as well as lipid profile were measured using routine methods. Serum 25-hydroxyvitamin D was quantified using enzyme-linked immunosorbent assay.

Tracks: Cardiovascular Surgery.

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