



GENERAL NEWS

“ICAD Team at SIMS Hospitals conducts a successful lifesaving staged procedure for complex cardiac and aortic disorder in an elderly US based NRI”

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#ICAD_Team at_SIMS Hospitals#google#video...



ICAD (Institute of Cardiac and Aortic Disorders) team at SIMS Hospitals, Vadapalani, successfully treated a rare cardiac cause of hoarseness of voice and breathing difficulty in a 66-year-old man (US based NRI) through multiple complex surgical interventions. The team headed by Dr. V V Bashi, Director & Senior Consultant (ICAD), performed a coronary artery bypass grafting (CABG) on a beating heart, followed by stenting of the aorta in a staged procedure, thus not just adding years to the patient's life, but adding life to his years! Other members of the team included Dr. Aju Jacob (Senior Cardiac anesthetist), Dr. K. Murali (Interventional Radiologist), Dr. Mohammed Idhrees (Cardiovascular & Thoracic Surgery) and Dr. Arunkumar (Cardiac anesthetist).

Patient History and Line of Treatment

A 66-year-old male patient, an American citizen, originally from Bangalore was evaluated for breathing difficulty and hoarseness of voice. Following a treatment with an ENT surgeon for 2 months, he was referred to a Pulmonologist for his breathlessness. A preliminary diagnosis of chronic obstructive lung disease (COPD) was made. But a chest Xray revealed an abnormal shadow, calling for a CT Chest, which showed a large aortic aneurysm of 7 cm. Having been diagnosed with an aortic aneurysm, he was referred to us for further evaluation and management. Since he had breathlessness, we decided to evaluate his heart too. The echo cardiogram showed that he had

moderate dysfunction of heart muscle, owing to which we decided to do a coronary angiogram that showed severe blockages of all his arteries supplying the heart muscle (coronary arteries).

Post the preliminary investigations, we concluded that this patient requires two procedures – one, a coronary artery bypass grafting (CABG) and the other, a treatment for aortic aneurysm. We knew by performing both simultaneously, as a combined procedure, we would be risking the patient's life. On the one hand, if we perform the CABG first, there would have been a risk of rupture (bursting) of the aortic aneurysm in the postoperative period, which would have proved lethal. On the other hand, while performing the procedure to treat an aortic aneurysm, he could have sustained lethal cardiac complications. Adding to the complication was his kidney dysfunction.

Highlighting the complications of this case, Dr. V V Bashi, Director & Senior Consultant

(ICAD) said, “Keeping the above challenges and the critical state of the patient's medical condition in mind, our dedicated team of doctors planned to proceed with the staged procedure intervention. On receiving the consent from the patient's relatives, we decided to go ahead with the planned intervention, where we were set to perform one procedure after the other, in a controlled manner. As a team we decided to do the CABG on a beating heart as the first procedure and then stenting of the aorta. The use of heart lung machines during CABG carried additional risk for rupture of aortic aneurysm. Performing CABG surgery for patients with damaged heart muscle like this patient required a balloon support, where a balloon is placed in the aorta to support the heart. Unfortunately, this was not possible for him because of his dilated aorta, as placing the balloon could lead to rupture (bursting) of the aortic aneurysm. So, with utmost care, we did bypass surgery on a beating heart, without the need for a heart lung machine and the balloon pump”.

“All through the procedure, we ensured his blood pressure was under control. He had an uneventful postoperative recovery with proper medications for six weeks, post which he was admitted again for the treatment of his aortic aneurysm. He underwent a successful stenting of the aorta, which the heart tolerated very well. Today, we are glad and thankful that he has recovered from both the procedures and we strongly believe that the timely diagnosis and staged treatment was responsible for his smooth recovery”.

1. **VV Bashi** added that all breathing difficulties do not necessarily arise from lung diseases alone, but also because of underlying heart diseases, which may remain silent. He stressed on the importance of regular master health checkups, especially for high-risk individuals, who are in their old age and the ones with Diabetes and hypertension too. “Besides these, life threatening diseases like aortic aneurysms can also be picked up”, he concluded.

Speaking at the press conference, Dr. Ravi Pachamuthu, Chairman, SRM Group, said, “These kinds of complex cases that are extremely critical, require experienced hands and a highly equipped state-of-the-art technology, including modular theaters and Cath Labs for comprehensive treatments and medical care. Empowered with such all-round excellence under the able guidance of **Dr. V V Bashi, Director & Senior Consultant (ICAD)** and his dedicated team of doctors, we could successfully perform the staged procedures. At SIMS we have successfully treated some of the most complex cases in the country, and this is yet another milestone in our journey of clinical excellence. Such positive outcomes will encourage us to cater to many more patients requiring advanced cardiac care in the future too”.

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