

THERE IS STILL ROOM FOR OPEN CARDIOVASCULAR SURGERY
 AINDA HÁ ESPAÇO PARA CIRURGIA CARDIOVASCULAR ABERTA

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Despite the constant announcements that open cardiovascular surgery as a surgical procedure is watching its decline, a new study published in the New England Journal of Medicine (NEJM) shows that there is still some room for such procedure.

The article entitled “Endovascular versus Open Repair of Abdominal Aortic Aneurysm”, published online at April 11th, 2010, brings us the continuation of a median 6 year-follow-up study (minimum 5 and maximum 10 years follow-up) comparing the outcomes of endovascular repair of abdominal aortic aneurysm, which until then had shown impressive results in preoperative morbidity and mortality, and open repair, which had shown much worse outcomes.

Nevertheless, as our eyes were already moving towards the new minimally invasive procedures, this article comes to change even the researchers' expectations. In a long-term analysis endovascular repair has shown an increase in mortality at four or more years of follow-up and no significant difference when compared to open repair (rates of death by any cause converged at two years, and aneurysm-related deaths, at six); moreover, the overall rates of graft-related complications and reinterventions were three to four times higher in the endovascular repair group (adjusted hazard ratio

at six months to four years period of time was 7.92 for complications and 9.12 for reintervention, thus representing the most complicated period after initial intervention).

And also, even though analysis has failed to complete every data regarding costs, as the researchers did not include outpatient procedures, endovascular repair has shown to be more costly (difference of \$4,568).

In conclusion, to overcome open cardiovascular surgery at least regarding aortic aneurysm, there is still a lot to develop in endovascular procedures. Nonetheless, we can be sure that there will always be more suitable indications for each type of procedure.

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Errata

Gianini RJ. Ensaio clínico randomizado: verdadeiro ou falso?. Rev Fac Ciênc Méd Sorocaba. 2010; 12(4):27-31.

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