SSV is an alternative conduit in patients with unsuitable arterial and insufficient venous grafts for CABG. SSV may be harvested with supine position of the patient on the table, which is adduction and internal rotation at the hip level and flexion at the knee level.

The outcome of CABG with SSV graft is unsatisfactory because venous grafts are prone to occlusive disease. Occlusion rate of venous grafts is around 12–20% during the 1st year and 2–4% annually for the next 4 or 5 years [2].

As described by the authors, long-term angiographic follow-up of the patency of SSV grafts is not sufficient and there are trials with a small number of patients. In our clinic, we used SSV in three patients due to insufficient venous graft for the last five years. The patients were clinically asymptomatic at follow-up but there still have been no angiographic findings, which support this clinical status.

Finally, the strategy of CABG must be based on the fact that sufficient conduit should be available prior to sternotomy.

References


eComment: Short saphenous vein as a conduit in coronary artery bypass grafting

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I congratulate the authors for their effort to find out the patency rate of the short saphenous vein (SSV) when used as a conduit in coronary artery bypass grafting (CABG) [1]. During my training in cardiac surgery in the early and mid-nineties in the UK, I personally harvested more than 30 short saphenous veins as conduits during CABG surgery. The indication for SSV harvesting as mentioned by the authors was ‘used or unsuitable long saphenous and other arterial conduits’. The harvesting of SSV was more common during the early and mid-nineties because radial artery harvesting as a conduit for CABG was not favored by many surgeons. With regard to the operative technique of harvesting, we used the technique of flexing the hip by an assistant. I agree with the authors in their conclusion that SSV may be considered as an alternative to brachial or cephalic vein in patients with unsuitable long saphenous vein, and unsuitable mammary or radial arteries.

Reference