

## **Endoscopic Vessel Harvesting**

The Standard of Care



## EVH and ERAH should be the standard of care

for patients who require these conduits for coronary revascularization according to the 2017 ISMICS consensus statement.'

## Based on evidence from 76 studies, including over 281,000 patients, the new ISMICS consensus statement for 2017<sup>1</sup> recommends:

For saphenous vein harvesting	Class*	Level**
1. EVH should be the standard of care for patients requiring saphenous vein for CABG		В
2. EVH to reduce wound related complications		А
3. EVH reduces postoperative LOS and out-patient wound management resources		
4. EVH is non inferior to open vein based on the quality of the conduit harvested	lla	B-R
5. EVH to improve patient satisfaction and postoperative pain	l.	A
For radial artery harvesting	Class	Level
1. ERAH should be the standard of care for patients requiring radial artery for CABG	I.	В
2. ERAH to reduce wound related complications	l I	B-R
3. ERAH to improve patient satisfaction and postoperative pain	I.	
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## \* Class of recommendation:<sup>2</sup>

Class I: Conditions for which there is evidence and/or general agreement that a given procedure or therapy is useful and effective; Class IIa: Weight of evidence or opinion is in favor of usefulness or efficacy

\*\* Level of evidence:<sup>2</sup>

Level A: The data were derived from multiple randomized clinical trials; Level B: The data were derived from a single randomized study or from nonrandomized studies

1. Ferdinand FD, MacDonald JK, Balkhy HH, et al. Endoscopic Conduit Harvesting in Coronary Artery Bypass Grafting Surgery: An ISMICS Systematic Review and Consensus Conference Statements. Innovations. 2017; 12(5): 301-319.

 Halperin JL, Levine GN, Al-Khatib SM et al. Further Evolution of the ACC/AHA Clinical Practice Guideline Recommendation Classification System. Journal of the American College of Cardiology. 2016; 67; (13): 1572-1574.