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Periareolar Access for Minimally Invasive Mitral Valve Surgery: The Brazilian Technique

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**The Society
of Thoracic
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EACTS
European Association For Cardio-Thoracic Surgery



No disclosures

Objective

- **Describe a novel approach for video assisted minimally invasive mitral valve surgery:**
 - **Effective and optimized manipulation**
 - **Excellent aesthetic result**

Methods

- 2006 to 2016: 214 patients
- Age: 18 to 72 years
- N= 145 female (69%)
- EF: 52,16±14,7%
- LOG EuroScore: 4,9±6%
- NYHA Class II/III: 80,4%

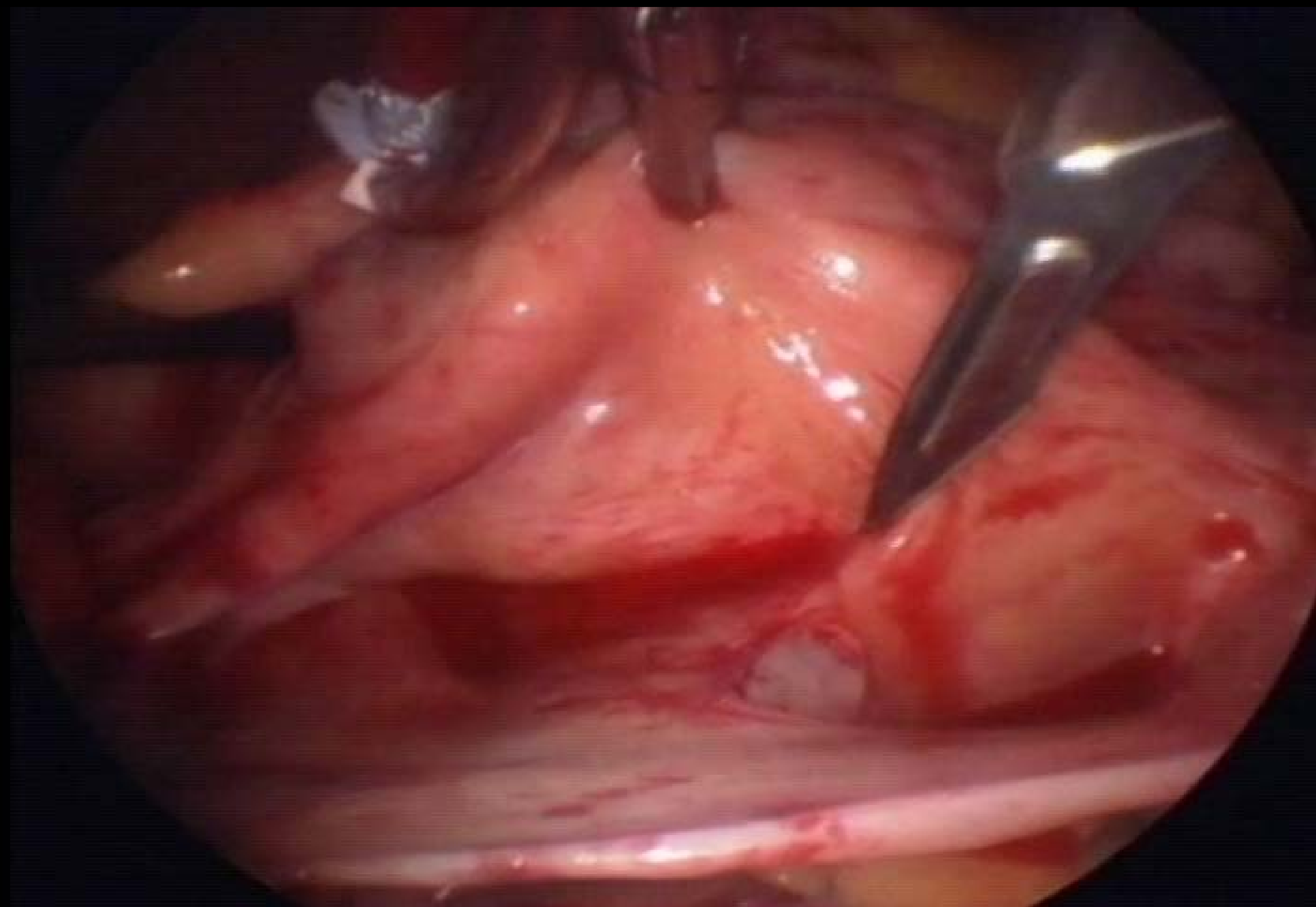
Cardiac Pathologies

Mitral valvopathy	n= 132
Atrial septal defect	n= 74
Tricuspid insufficiency (Associated)	n= 24
Atrial fibrillation (Associated)	n= 35
Pacemaker leads endocarditis	n= 8

Contra indications for Periareolar Access

- **Young women where the breasts are still in development**
- **Lactating**
- **Breast nodules (screening with ultrasound above 40 years-old)**
- **Hyper healing**







Results

Mitral pathologies	n= 132
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CPB Time:	123,8±46,2min (85-210 min)
CC Time:	102,41±42,71 min (60-190min)
Bleeding Volume:	201±101,9ml (50-450ml)
Mechanical Ventilation	8,6±3,5h (0-13,1 h)
ICU LOS	29,9±7,8h (16-42h)
Hospital LOS	6,5±1,9days (4-12 days)

Mitral valve repair	n= 95 (72%)
Mitral valve replacement	n= 37 (28%)
Degenerative mitral valve disease repair rate	n= 96%

Complication Rate	3,2%
30-day mortality	0,75%

Results

- **There were no complications during the procedures**
- **There was no conversion to sternotomy in neither cases**
- **There were no complications related to the surgical healing of the periareolar access or peripheral cannulation**
- **Numbness of the nipple: less than 2%**

Conclusions

- **The Periareolar Access is safe and effective and can be used for video-assisted minimally invasive mitral valve surgery**
- **It demonstrates excellent aesthetic and functional results**
- **Access of choice specially in female patients that have mitral valve pathology.**

Thank you!



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