

Exploring the pathophysiology and emerging therapies in coronary artery disease.

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Introduction

Coronary artery disease (CAD) remains a leading cause of morbidity and mortality worldwide. As our understanding of heart disease advances, treatment strategies have evolved to include a combination of surgical and percutaneous approaches. One of the most innovative techniques in recent years is Hybrid Coronary Revascularization (HCR), a combination of coronary artery bypass grafting (CABG) and percutaneous coronary intervention (PCI). This approach aims to provide optimal treatment for patients with complex coronary artery disease, combining the benefits of both therapies while minimizing the risks and complications associated with traditional treatments. Hybrid coronary revascularization refers to a treatment strategy that integrates both CABG and PCI. This approach is typically used for patients who have a combination of conditions that may benefit from both strategies. In HCR, patients receive coronary artery bypass grafts for major coronary artery blockages, while PCI (commonly known as angioplasty) is used to address less critical blockages or those located in areas that are not easily accessible via surgery. This approach allows for a personalized and comprehensive revascularization plan, potentially improving patient outcomes and reducing recovery times [1,2].

Hybrid coronary revascularization is typically considered for patients who meet specific criteria. Patients with a combination of left main coronary artery disease, multi-vessel disease, and lesions in difficult-to-reach areas may benefit from an HCR approach. In some patients, traditional CABG surgery may be associated with a high risk of complications, such as elderly patients or those with multiple comorbidities. In these cases, PCI can complement CABG to reduce overall risk. Patients with multiple coronary lesions in both proximal and distal segments may require a hybrid approach to ensure comprehensive treatment of all affected arteries. Some patients prefer a combination of procedures to minimize their hospital stay and reduce the recovery time associated with full surgery [3,4].

HCR allows for a more tailored approach to coronary artery disease, offering the best of both surgical and interventional therapies. The major coronary artery lesions are addressed surgically, while less critical blockages can be treated with PCI. By limiting the extent of surgery required, HCR reduces

the trauma and recovery time associated with traditional CABG. This approach is particularly beneficial for patients who are older or have multiple health conditions. The use of PCI allows for a quicker recovery compared to traditional surgery, often resulting in a shorter hospital stay and a more rapid return to daily activities for patients. By combining PCI with CABG, there is a possibility of reduced complications that may arise from either technique when used independently. The strategy also allows for more precise targeting of coronary lesions. Studies have shown that patients who undergo HCR may experience better outcomes in terms of survival rates and fewer incidences of major adverse cardiac events (MACE) when compared to those who receive traditional surgery alone. [5,6].

While hybrid coronary revascularization offers significant benefits, it is not without its challenges. HCR requires a high level of expertise from both surgeons and interventional cardiologists. The planning and execution of the procedure must be coordinated carefully to ensure the best outcomes. Not all patients are candidates for hybrid procedures. The approach is typically reserved for those with specific types of coronary artery disease, and careful evaluation is required to determine whether the benefits outweigh the risks. [7,8].

The hybrid approach may be more expensive than a single treatment modality, as it involves both surgery and interventional procedures. While it may reduce long-term complications, the upfront costs can be a barrier for some healthcare systems. While the early results for hybrid coronary revascularization have been promising, more long-term studies are needed to fully assess the benefits and risks, particularly in terms of durability and outcomes over several years. The field of hybrid coronary revascularization continues to evolve with technological advancements. The development of more advanced stents, improved imaging techniques for lesion assessment, and enhanced surgical techniques will likely further improve patient outcomes. Additionally, as artificial intelligence and machine learning tools become more integrated into the medical field, they could help refine the selection of patients for hybrid procedures, optimizing treatment outcomes. [9,10].

Conclusion

Hybrid coronary revascularization represents a significant advancement in the treatment of coronary artery disease,

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offering a more personalized and effective approach to patients with complex coronary lesions. By combining the strengths of CABG and PCI, this technique has the potential to improve outcomes, reduce recovery times, and minimize risks. While challenges remain, the growing body of evidence and continued innovations in the field suggest that HCR will play an increasingly prominent role in the management of coronary artery disease.

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