## Professor John Puskas, Emory University



Dr John Puskas is Professor of Cardiothoracic Surgery at Emory University School of Medicine in Atlanta, Chief of Cardiothoracic Surgery at Emory University Hospital and Director of the Carlyle Fraser Heart Center at Emory University.

Dr Puskas was recently recruited back to Emory University, Atlanta, from the Icahn School of Medicine at Mount Sinai, New York, where he was Professor and Chairman of the Department of Cardiovascular Surgery at Mount Sinai Morningside, Mount Sinai Beth Israel and Mount Sinai West Hospitals from 2014 to 2024.

Dr Puskas is co-Founder and Director of the International Coronary Congress and the International Society for Coronary Artery Surgery. Past President of ISMICS and previous Council Member and Program Chairman of the AATS annual meeting and of AATS/STS Tech Con, Dr Puskas has held numerous leadership roles in professional societies serving the field of cardiovascular surgery. He is internationally renowned as a leader in advanced coronary revascularization by all-arterial, robotic and off-pump techniques. Dr Puskas has served as National Principal Investigator for numerous NIH, FDA and Industry sponsored clinical trials in adult cardiac surgery and has published more than 300 peer reviewed papers and delivered more than 300 invited lectures worldwide.

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Session:06\_Symposium: [Heart] The Japanese CABG: Reconsidering Japan original CABG for sending evidence

## State-of-the-Art Surgical Coronary Revascularization

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## Abstract:

As percutaneous coronary intervention (PCI) has evolved and improved over the past 30 years, the case volume ratio of PCI/CABG has increased steadily throughout the developed world. While this initially resulted in a decline in absolute numbers of CABG procedures performed in many geographical regions, the overall number of CABG procedures has stabilized and maintained relatively constant during the past five years. This is the result of the increasing complexity of coronary artery disease associated with increased age and increased prevalence of diabetes among patients in most geographic regions.

In response to this laudable competition from PCI, surgical coronary revascularization has also evolved and improved, as the result of concerted effort by numerous innovators and coronary surgical leaders worldwide, especially in Japan. Indeed, Japanese coronary surgeons have led the way in developing and popularizing several of the major improvements to the traditional on–pump, single–arterial CABG procedure that was developed in the 1960's and 1970's. Off–pump and multiple–arterial CABG have been more commonly performed in Japan than in any other country, as has all–arterial, no–aortic–touch OPCAB, which may represent the present state–of–the–art in surgical coronary revascularization.

This lecture will summarize the evidence for and the key technical considerations of all-arterial, no-aortic-touch OPCAB, while emphasizing the fundamental reasons why CABG remains the best therapy for patients with complex coronary artery disease.