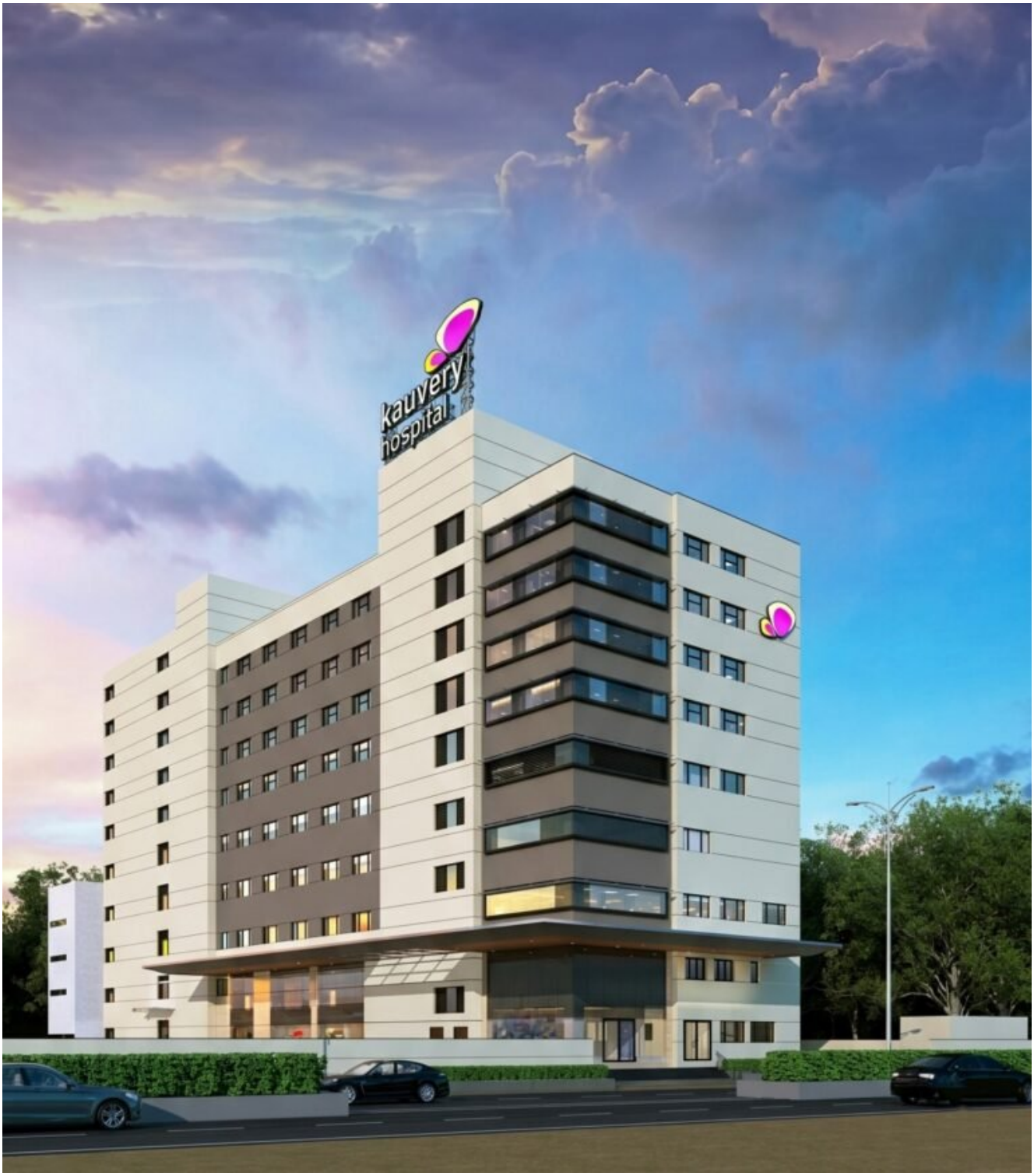
Kauvery Hospital Performs Combined Heart Bypass and Laparoscopic Abdominal Surgery Without Intervening Gap in 75-Year-Old Patient

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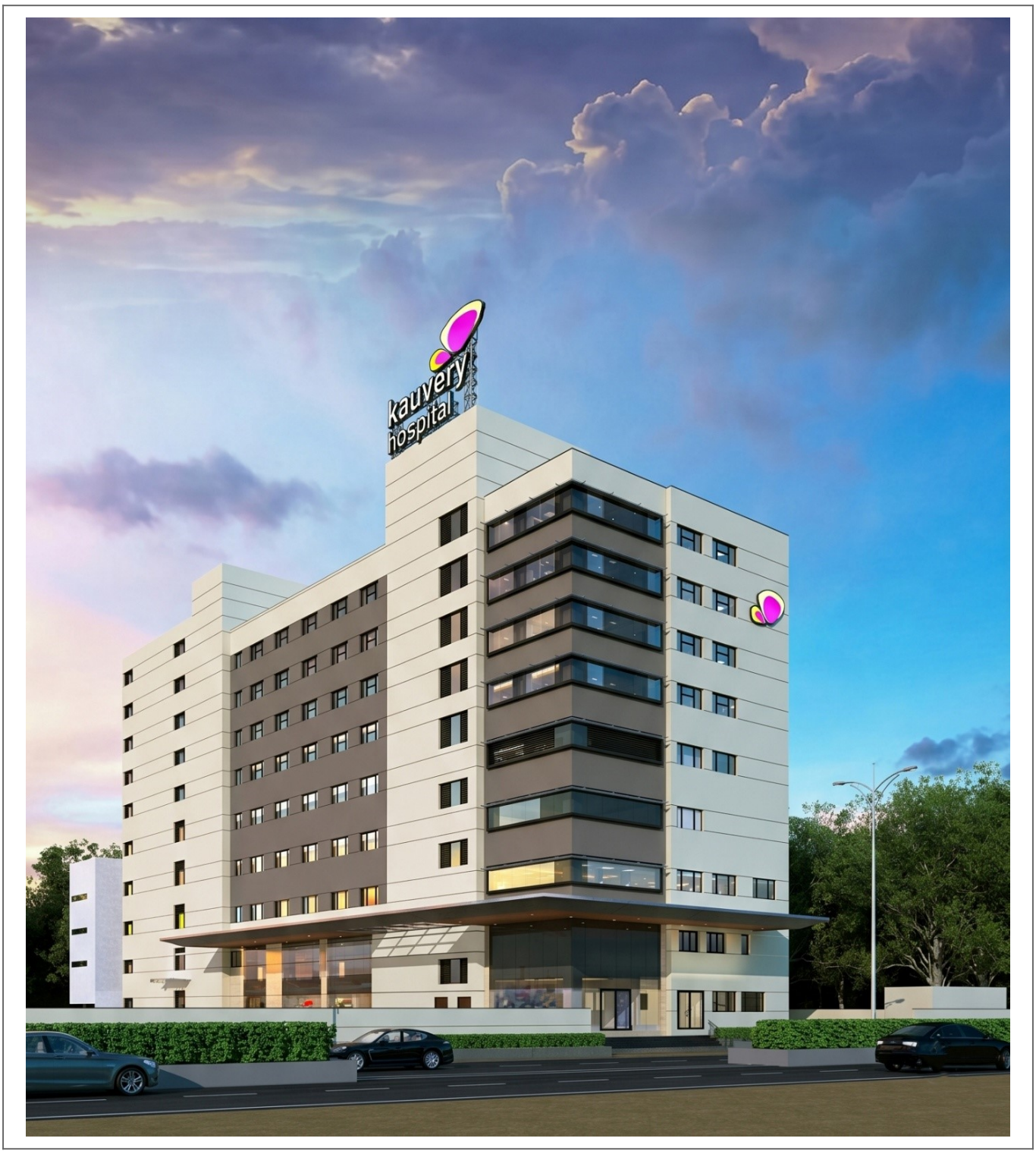


Rare achievement; only a few such sequential cardiac and abdominal surgeries reported globally.

Marking a rare milestone in surgical history, Kauvery Hospital, Tirunelveli, successfully performed a coronary artery bypass surgery followed immediately by a laparoscopic abdominal surgery with no intervening gap between the two

procedures.

This uninterrupted sequence, reported in only a limited number of patients worldwide, was performed on a 75-year-old man diagnosed with triple-vessel coronary artery disease and a large 10-cm mesenteric cyst.



Tirunelveli Kauvery Hospital Performs Combined Heart Bypass and Laparoscopic Abdominal Surgery Without Intervening Gap in 75-Year-Old Patient

The cardiac procedure was a beating-heart Coronary Artery Bypass Grafting (CABG).

Three bypass grafts were created – one using an artery from inside the chest and two using veins from the leg – to bypass three blocked coronary vessels.

The abdominal procedure was a laparoscopic subtotal excision to remove the 10-cm cyst located in the mesentery, the tissue that supports the intestines.

The patient recovered well following both procedures and continues to do well with no signs of infection during follow-up.

Normally, when a patient requires both cardiac and major abdominal surgery, the procedures are performed in separate stages, often with a gap of several weeks to months to allow the heart and other organs to recover and stabilise after the first major operation.

Performing two major surgeries in immediate succession is considered high-risk, as it places additional stress on the heart and lungs and increases concerns related to blood loss, anaesthesia, postoperative complications and infection.

In this instance, as the patient was experiencing severe pain due to the abdominal cyst, the medical team decided to perform both procedures during the same surgical session. To minimize the risk of bleeding, the cardiac team performed the bypass on the beating heart.

The gastrointestinal team then excised the cyst through small keyhole incisions using the laparoscopic approach.

The procedures were performed by a multidisciplinary team led by Dr. R. Arun Singh, Cardiothoracic Surgeon, who performed the bypass surgery, with support from Dr. M.S.L. Mahboobu Subuhani, Cardiologist. Dr. Karthikeyan, Gastrointestinal Surgeon, performed the laparoscopic abdominal procedure, while Dr. Lakshmanan K and Dr. Selvi Mahalingam M, Anaesthesiologists*, provided anaesthesia and perioperative support for both procedures.

Dr. R. Arun Singh, Cardiothoracic Surgeon, Kauvery Hospital, Tirunelveli, said, *“Performing bypass surgery and then proceeding immediately to a major abdominal surgery in the same session is not routinely undertaken anywhere, as the heart is particularly vulnerable in the period immediately following bypass. There are several risks involved. The blood-thinning medicines used during cardiac surgery, along with the body’s altered clotting tendency after bypass, can increase the risk of bleeding. Laparoscopic surgery itself can affect blood flow and heart function. Besides, performing two major procedures in succession places additional stress on the heart and lungs. There is also a risk of infection, including infection affecting the heart. However, in this situation, the*

patient was experiencing severe pain caused by the abdominal cyst and the procedure could not be delayed. We therefore carefully assessed and managed each of the associated risks to proceed with the abdominal surgery immediately after the bypass."

Dr. Karthikeyan, Gastrointestinal Surgeon, Kauvery Hospital, Tirunelveli, said, *"This was the first time I performed a major abdominal surgery immediately following a cardiac bypass, and it was a challenging experience that required considerable expertise and close coordination with the cardiac and anaesthesia teams. The patient had to undergo the abdominal procedure because of the severe pain caused by the cyst, despite having just undergone a major cardiac surgery. We had to carefully balance the abdominal requirement with the patient's cardiac condition and proceed with the laparoscopic surgery without any delay. I am very happy that we were able to complete the procedure successfully and that the patient is recovering well, with both his cardiac and abdominal conditions addressed."*

Dr. Lakshmanan, Medical Administrator, Kauvery Hospital, Tirunelveli, said, *"We are extremely proud of this significant achievement, which demonstrates the clinical expertise, preparedness and teamwork of our medical teams. Performing two major procedures without an intervening gap required meticulous planning, close coordination and continuous monitoring. The seamless collaboration between our cardiac, gastrointestinal and anaesthesia teams enabled us to undertake this challenging sequence of procedures safely and successfully. This achievement reflects our commitment to providing advanced, multidisciplinary care for patients who present with complex and time-sensitive medical needs."*

