Ministernotomy and fast tracking in pediatric cardiac surgery

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Conventional approach to congenital cardiac surgeries has its own limitations such as increase in recovery time, length of chospital stay, pain and less cost effectiveness. Hence newer minimally invasive approaches have come into practice. Initially most of these newer approaches were done in adults when compared to pediatric patients. But advances in cannula design and instrumentation have made these techniques feasible in pediatric patients too. Ministernotomy technique offers satisfactory cosmetic results, stable sternal reconstruction, good surgical exposure, minimal interference with respiratory mechanics, and minimal pain, allowing extubation in the operating room and a speedy recovery. With the escalating number of pediatric patients requiring cardiac surgery, efficient use of facilities by fast track cardiac anesthesia and resource utilization resulted in the adoption of early tracheal extubation techniques in cardiac surgery. Economic concerns such as significant increases in overall medical expenses, the accumulating data that patient's care is not jeopardized but rather perioperative morbidity may actually be reduced by early hospital discharge, have made the concept ministernotomy and fast-tracking attractive for practitioners involved in the care of children with congenital heart disease (CHD) as well.

Biography

Baskar Ranjith Karthekeyan received his M.B.B.S degrees from Kilpauk Medical College, Chennai, India and his MD & DNB from the Sri Ramachandra University, Chennai, India. He is presently the Professor of Anesthesia at the Sri Ramachandra University in Chennai. His major area of research is related to minimal invasive cardiac surgery and fast tracking in cardiac surgery. He currently holds a research guide for postgraduates in Anesthesia. He is a teacher and examiner for post graduate in Anesthesia (MD) and postdoctoral course (DM Cardiac Anesthesia). He is an author for 28 peer reviewed papers. He is also a manuscript reviewer of two major journals. He is also the executive committee member of Indian Association of Cardiothoracic and Vascular Anesthesia (IACTA). He is a regular speaker in cardiac anesthesia conference.

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