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Editorial

Types of Heart Surgeries

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Heart-related problems do not always require surgery. Sometimes they will be addressed with lifestyle changes, medications or nonsurgical procedures. For example, catheter ablation uses energy to form small scars in your heart tissue to stop abnormal electrical signals from moving through your heart. Coronary angioplasty may be a minimally invasive procedure during which a stent is inserted into a narrowed or blocked arteria coronaria to carry it open. Nonetheless, surgery is often needed to address problems such as heart failure, plaque buildup that partially or totally blocks blood flow in a coronary artery, faulty heart valves, dilated or diseased major blood vessels (such because the aorta) and abnormal heart rhythms. There are many types of heart surgery. The National Heart, Lung, and Blood Institute, which is a component of the National Institutes of Health, lists the subsequent as among the foremost common coronary surgical procedures. Coronary artery bypass grafting (CABG). In CABG — the foremost common sort of operation — the surgeon takes a healthy artery or vein from elsewhere in your body and connects it to provide blood past the blocked coronary artery. The grafted artery or vein bypasses the blocked portion of the arteria coronaria, creating a replacement path for blood to flow to the guts muscle. Often, this is often finished quite one arteria coronaria during an equivalent surgery. CABG is sometimes referred to as heart bypass or coronary artery bypass surgery.

Heart valve repair or replacement. Surgeons either repair the valve or replace it with a man-made valve or with a biological valve made up of pig, cow or human heart tissue. One repair option is to insert a catheter through a large blood vessel, guide it to the heart and inflate and deflate a small balloon at the tip of the catheter to widen a narrow valve. Insertion of a pacemaker or an implantable cardioverter defibrillator (ICD). Medicine is usually the first treatment option for arrhythmia, a condition in which the heart beats too fast, too slow or with an irregular rhythm. If medication doesn't work, a surgeon may implant a pacemaker under the skin of the chest or abdomen, with wires that connect it to the guts chambers. The device uses electrical pulses to control the heart rhythm when a sensor detects that it is abnormal. An ICD works similarly, but it sends an electrical shock to revive a traditional rhythm when it detects a dangerous arrhythmia. Maze surgery. The surgeon creates a pattern of connective tissue within the upper chambers of the guts to redirect electrical signals along a controlled path to the lower heart chambers. The surgery blocks the stray electrical signals that cause fibrillation — the foremost common sort of serious arrhythmia. Aneurysm repair. A weak section of the artery or heart wall is replaced with a patch or graft to repair a balloon-like bulge within the artery or wall of the guts muscle.

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