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Translated from french

Docteur FRANCESCHI Service de Chirurgie Vasculaire Hôpital Saint Joseph

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OB/VF

Dear Colleague,

As a cardiac surgeon, I am always preoccupied when the patients had a previous saphenous stripping.

On one hand, the indications seems to have been often performed "at random" and in the other hand this previous surgery makes our surgery more risky.

Obviously, the saphenous veins are not appropriate for coronary by-pass, when damaged by the venous insufficiency. Therefore, those veins are not used for coronary by-pass and we prefer the mammary arteries. However, those veins, even if damaged, can be used for a third or fourth by-pass considered as accessory but fundamental for the post operative success. They can be used as well as saving material in valve surgery as well as in coronary surgery.

So, great saphenous veins even if damaged represent a material that permits saving by-passes in cardiac surgery and their absence creates a potential risky situation. I ask you for avoiding saphenectomy the most you can and favour mostly conservative venous surgery.

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