

Reference Number: FOI202223/116
From: Private Individual
Date: 04 July 2022
Subject: Minimally invasive procedures performed and outcomes

Q1 Is your Trust able to offer the following procedures combined via a minimally invasive approach:

- a. Mitral valve repair
- b. Left atrial appendage closure
- c. Atrial Fibrillation (AF) ablation
- d. +/- Coronary Artery Bypass Graft (CABG of diagonal branches) if found to be required during surgery?

A1

- a. Yes
- b. Yes
- c. Yes
- d. LIMA to LAD only

Q2 If so, do both Mr Modi and Mr Kirmani perform such combined procedures via a minimally invasive approach?

A2 Mr Modi only

Q3 How many of these procedures has each consultant performed?

- a. Mini-mitral valve (MV) repairs
- b. Mini-mitral valve repair + Left Atrial Appendage Closure (LAAC) + AF ablation

A3

- a. 454 up to 01/06/2022 including 47 robotic repairs
- b. 74 of the above included LAAC or AF ablation

Q4 Do they routinely use robot assistance for mini-mitral valve repairs?

A4 Mr Modi uses robotic assistance selectively depending on operative complexity for MV repair

Q5 What is the median (or average if you don't have the median) and maximum waiting time for mini-mitral valve repair at your Trust?

A5 Median current English/Welsh waiters listed for Mini MV repair/Robotic MV repair – 47.5 weeks from original referral
Maximum current wait for Mini MV Repair is 88 weeks from original referral

Q6 For this procedure, what are your Trust's rates of:

- a. Conversion to open
- b. 30-day mortality
- c. Serious adverse events e.g. stroke, MI etc
- d. Failure of procedure

e. Re-operation?

- A6
- a. 10/454 (2.2%)
 - b. 4/454 (0.9%)
 - c. 4/454 (0.9%) stroke
 - d. Information not held – The Trust does not have a data category for ‘failure of procedure’ as this would be recorded in specific categories such as those listed Q6 a-c and e.
 - e. 13/454 (2.9%) in-hospital re-operation for bleeding