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| Abstracttitel: | The risk factors of hyperlacteremia after off-pump Coronary Artery Bypass graft surgery |

PURPOSE: It is well-known that hyperlacteremia relfects a low perfusion of tissue. In this study, we analyzed the factors of hyperlacteremia after Off- Pump Coronary Artery Bypass graft Surgery (OPCABG).
METHODS: We investigated and analyzed the data obtained from 88 patients (2006. Jan – 2008 Jun) undergoing OPCABG. The patients in whom any artificial circulatory assist (CPB, PCPS or IABP) was used were excluded in this analysis. We calculated relative risks for hyperlacteremic group (HL) (> 3.0mmol/L) compared with non-hyperlacteremic group (NH) (< 3.0mmol/L) with regard to the demographic data, pre-operative laboratory data, data of echocardiography, intraoperative circulatory condition (s-BP,CVP,mPAP,CCI,SVO2), usage for catecholamine, water in-out balance, amount of bleeding, and rectal temperature. Statistical analysis for this study was performed by unpaired t-test followed by the logistic analysis (SPSS ver. 16.0).
RESULTS: According to unpaired t-test, there were significant differences between both groups for age, amount of intraoperative bleeding, and infusion dose of noradrenaline. Independent predictors of hyperlacteremia , with adjusted relative risks (RRs) and 95% confidence intervals (CIs), were ages (RR, 1.08;95% CI, 1.033-1.217), amount of intraoperative bleeding (RR, 1.001; 95% CI, 1.000-1.003), and infusion dose of noradrenaline (RR, 1.696; 95% CI, 1.088-2.644).
CONCLUSIONS: Our data showed that age, intraoperative bleeding, and infusion dose of noradrenalin are independent predicted factors of hyperlacteremia.