The Vineberg procedure comprises implantation of the internal thoracic artery (ITA), without ligating the intercostal side branches, directly into the left ventricle muscle. Over the past 8 years, we have successfully used the Vineberg technique which was modified by the senior author, obtaining low morbidity and mortality rates and high graft patency rates, in more than 60 patients who were unable to undergo direct myocardial revascularization with ITA anastomosis to the anterior interventricular artery (AIA). In the majority of these unusual cases, the AIA was hypoplastic, with diffuse atheromatous disease, which is incompatible with an endarterectomy procedure and direct revascularization or angioplasty surgery. As per current literature, the Vineberg procedure is a last resort therapeutic option. In regard to angiogenesis, which is one of the justifications for the efficacy of the Vineberg procedure, the medical literature demonstrates the induction of angiogenesis in an ischemic human myocardium; other studies suggest a beneficial association of this procedure with angiogenic therapy. We believe that in the near future, patients will be able to profit from this powerful treatment combination.

**Key words**
Angiography; myocardial revascularization; mammary arteries.
References


