assessment of intraoperative graft quality and patency.

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Reply to the Editor:

We thank Ouzounian and Ali for their comments. As discussed in the "Materials and Methods" section of our article,¹ they correctly point out that the Veterans Affairs Cooperative Studies Program 517 Randomized On/Off Bypass (ROOBY) trial² was initiated in 2002 with the endoscopic

vein harvest (EVH) preplanned subanalysis initiated later (in 2003, with some centers obtaining institutional review board approval in 2004). For the period of enrollment that applies to our EVH subanalysis (late 2003–2008), the penetration of EVH in coronary artery bypass grafting in the United States and the Veterans Health Administration was approximately 70%, well past the learning curve (M.A.Z., unpublished data, February 2011). Although the of Ex-Vivo Vein Graft Engineering via Transfection (PREVENT) IV Trial subanalysis³ was criticized precisely for the reason raised by Ouzounian and Ali, our subanalysis was conducted after the EVH learning curve was mastered.

In the ROOBY trial, repeat revascularization was primarily ischemia-driven. However, some asymptomatic ROOBY patients may have underwent repeat revascularization at the time of protocol-mandated angiography based on severe native coronary artery stenosis in the presence of occluded saphenous vein graft.

Given the main ROOBY trial's focus was to compare off-pump versus on-pump coronary artery bypass grafting outcomes, EVH-related technical details and harvester's experience were not gathered. A new prospective randomized trial funded by the Veterans Affairs Central Office has been proposed by our team and has received initial funding for expanded project planning (Cooperative Studies Program 588 REGROUP).

The ROOBY trial co-authors concur that it is possible that selection bias may have played a role in the sub-

analysis performed. The REGROUP team plans to use randomization, to capture surgical technical details, and to evaluate more rigorously the role of harvester's experience on outcomes.

The ROOBY trial team concurs with the stated need for a large, multicenter prospective randomized trial to definitively address the issue of safety and efficacy of EVH. Pending Veterans Affairs Central Office Cooperative Studies Program approval and funding, the REGROUP trial will rigorously address these outstanding questions comparing saphenous vein graft harvest approaches appropriately.

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