

Letter to the Editor

Perioperative enhancement for CHD patients

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To the Editor,

We applaud Wernovsky et al for sharing what we strongly support as excellent guidelines for standardised testing and coordinated surveillance of patients with complex CHD.¹ In the United States of America, there are currently more adults than children living with CHD, and projections indicate that this population will continue to grow.²

CHD patients have improved life expectancy, higher healthcare utilisation rates,³ and increasingly require elective or emergent non-cardiac surgical, radiological, obstetric, and/or procedural care under anaesthesia. These patients have a higher risk of mortality compared with patients without CHD,^{4,5} and consequently carry with them lifetime complex medical and social issues that require multi-disciplinary care.

Therefore, a perioperative care plan including consultation with an anaesthesiologist, discussion of unique patient characteristics that portend risk, anaesthetic technique, appropriate testing, and procedure location should be included in the “roadmap” for each patient. This type of patient-centred, interdisciplinary, coordinated care at our institution is implemented by the Perioperative Enhancement Team, whose projects to date have addressed patients with anaemia, diabetes, malnutrition, senior health, and chronic pain.^{6,7} Motivated by the recommendations of Wernovsky et al, Perioperative Enhancement Team will now go forward to develop a programme to address the unique and important perioperative challenges of patients with CHD.

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Conflicts of Interest

None.

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