

Invited Lecture

Invited Lecture09 (II-IL09)

Chair: Takaaki Suzuki (Saitama Medical University International Medical Center, Japan)

Sat. Jul 10, 2021 10:50 AM - 11:40 AM Track1 (現地会場)

[II-IL09]Building teams for the growing population of adults with congenital heart disease

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Improvement in surgical techniques, anesthesia, and perioperative care has resulted in most children born with congenital heart disease to survive into the adult years with a normal or near normal quality of life. A careful transition from pediatric to adult care providers is important to avoid issues related to the loss of continuity of care an undue financial or psychological burden to the patients and their families. The patient's, their families, and the healthcare providers are faced with many challenges during this transition process that can be optimized an overcome by Education about the heart defects and a team approach with clear lines of communication. This presentation will address several challenges related to a transition of care from pediatrics to adults, and some of the specific medical and surgical challenges that face all the adult Congenital healthcare providers.

At the present time there are more adults with congenital heart disease then there are children and part of this is due to improvement in survival for the vast majority of infants with congenital heart disease who have undergone successful surgery during infancy and childhood with most living well into the adult years. Residual or recurrent lesions may precipitate the need for reoperation and some patients require multiple surgical procedures or interventions over the course of a lifetime. Arrhythmias are also a common problem to most all congenital defects and require medical therapy or percutaneous/surgical treatment.

The most common problems encountered in the adult congenital population are valve related; most result in the need for numerous reoperations and many of these valve interventions involve more than one valve abnormality. Approaches to patient selection and strategies and risks related to surgery in the ACHD population will be reviewed.