PedCath and the Short and Long-Term Importance of Adult Congenital Heart Disease (ACHD)

A. PedCath's place in ACHD

A fundamental difference between *congenital* heart disease (CHD) and *acquired* heart disease is the <u>structural</u> abnormalities that are part and parcel of the congenital field. PedCath is the only product on the market today that successfully addresses <u>structural</u> abnormalities in the cath lab. Why is this important? Existing tools in the adult lab do not work for ACHD, PedCath does. It works for the adult congenital population just as well as it does for the pediatric population.

B. Historic Growth in ACHD

Adult congenital heart disease is the fastest growing segment in cardiology today. Successes in pediatric cardiology over the past 40 years have resulted in increased survival; 800,000 adults with CHD in the US in 2001. It is estimated that there are now more adults with congenital heart disease than children with CHD. This segment will continue to expand as ~85% of babies born today with complex CHD can expect to reach adulthood. Centers with established ACHD programs are seeing exponential growth (e.g. Toronto General saw a 269% increase in outpatient ACHD visits between 1987 and 1997).

C. Future Growth in ACHD

Since the <u>Bethesda Conference on Care of the Adult with Congenital Heart Disease</u> in 2001, plans have been underway to build the systems and facilities required for the care of adult patients with CHD. Recommendations are that one regional ACHD center be created to serve populations of 5 to 10 million people. Approximately 30 to 50 such centers should be developed or strengthened across the US. These will be regional centers, which will set the standard of care for smaller centers around the country.

D. Changes in Standards of Care

Over the past 30 years, care for patients with congenital heart disease has moved from large general hospitals, often associated with medical schools, to dedicated children's hospitals. Adults with CHD have fallen into a no-man's-land between children's hospitals and adult cardiologists with primary training/experience in *acquired* disease. In the coming 3-5 year period, care for ACHD will move to the regional centers mentioned in point C.

E. Indications of the growing importance of Adult Congenital Heart Disease

- 1) A few major medical centers have established ACHD centers. Most notably, Toronto General, UCLA, Duke & NY Presbyterian. (Each of these is a PedCath user)
- 2) ACC 2003 52nd Scientific Sessions introduces new education track, Adult Congenital Heart Disease.
- 3) Duke develops fellowship program for ACHD.

Many of the points covered above come from the 32nd Bethesda Conference, **Care of the Adult with Congenital Heart Disease**, published in the Journal of the American College of Cardiology, Vol. 37, No. 5, 2001