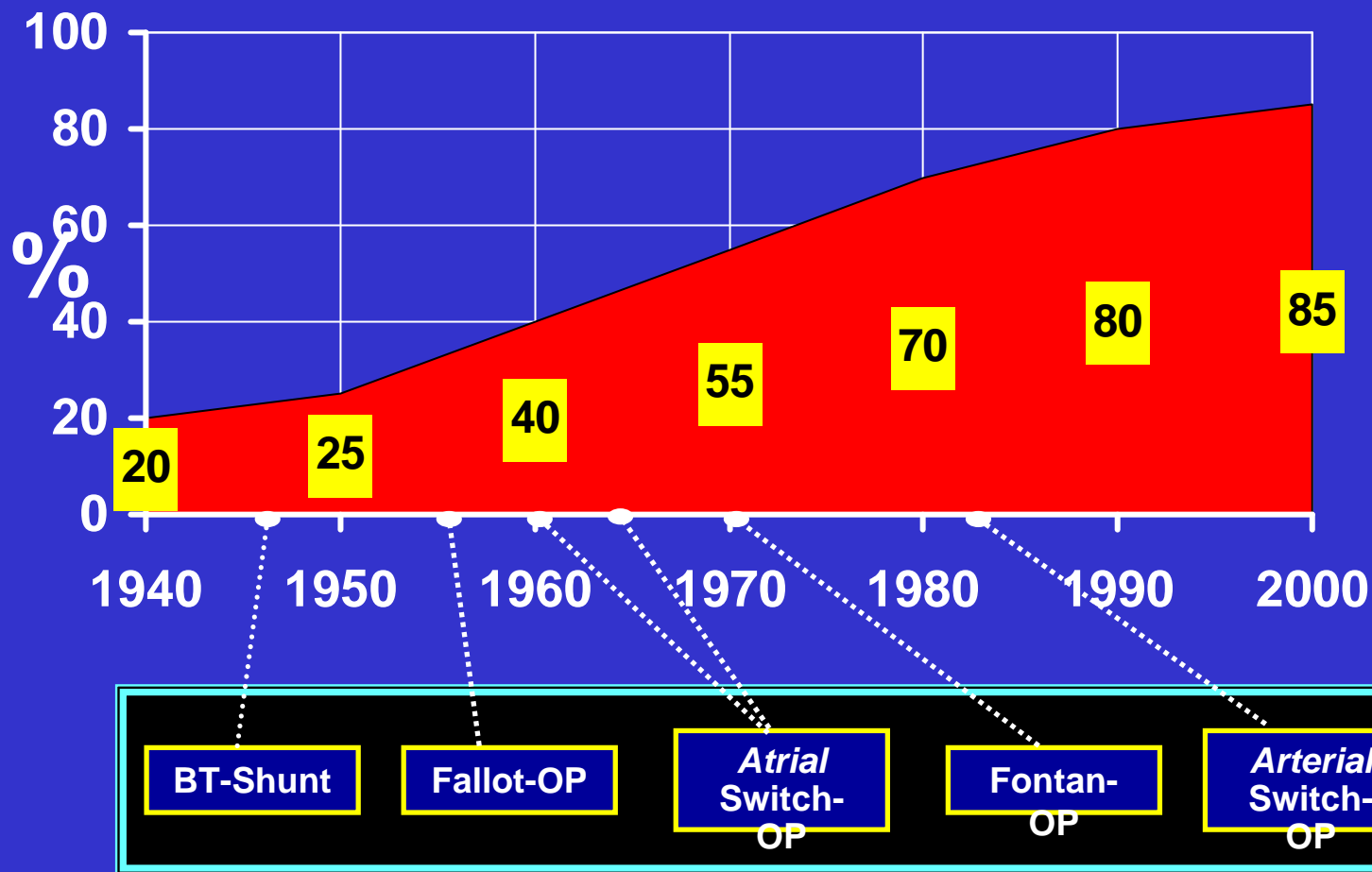


# CHD – A Life Long Commitment to Expert Care

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Director, Congenital Cardiac Centre for Adults  
University Health Network /  
Toronto General Hospital  
Toronto, Ontario, Canada



# Survival Rate in CHD and Milestones in Cardiac Surgery

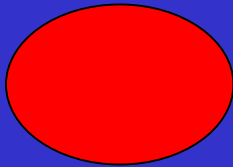


Courtesy by Prof. H. Kaemmerer, Munich

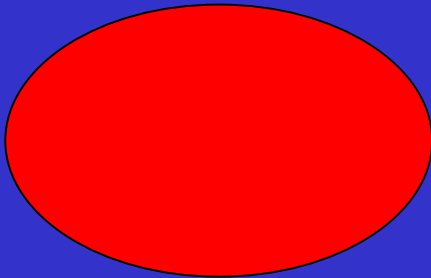
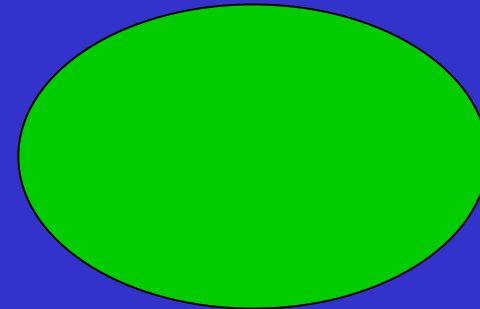
# Workload Is Increasing

Adult Congenital Heart  
Patient Numbers

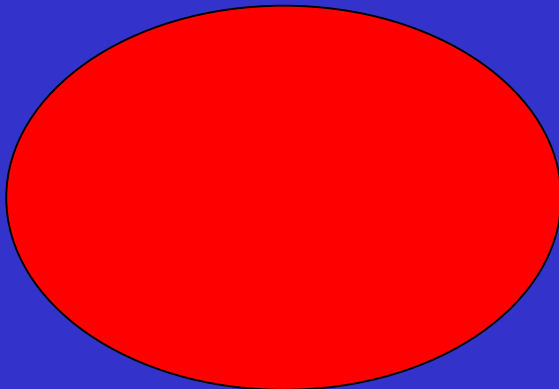
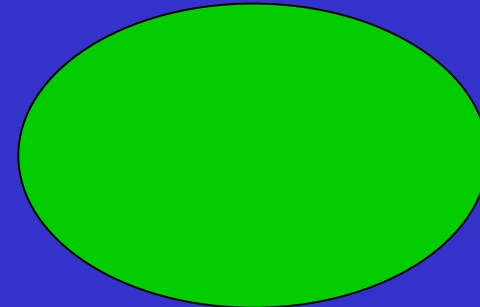
Pediatric Congenital Heart  
Patient Numbers



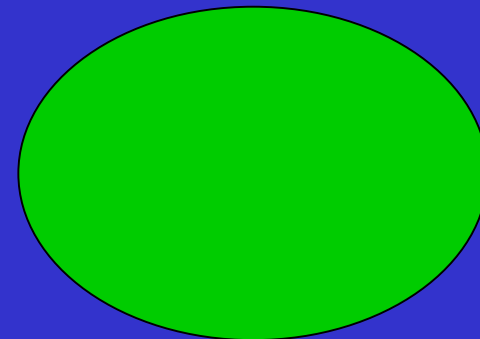
**1980**



**2000**



**2020**



G. Webb

Annual Increase ~ 1,000 Adults

Need for Follow-up  
at **Regional ACHD**  
**Centres:**

**~ 55,000 Adults**

(Moderate and High Risk)

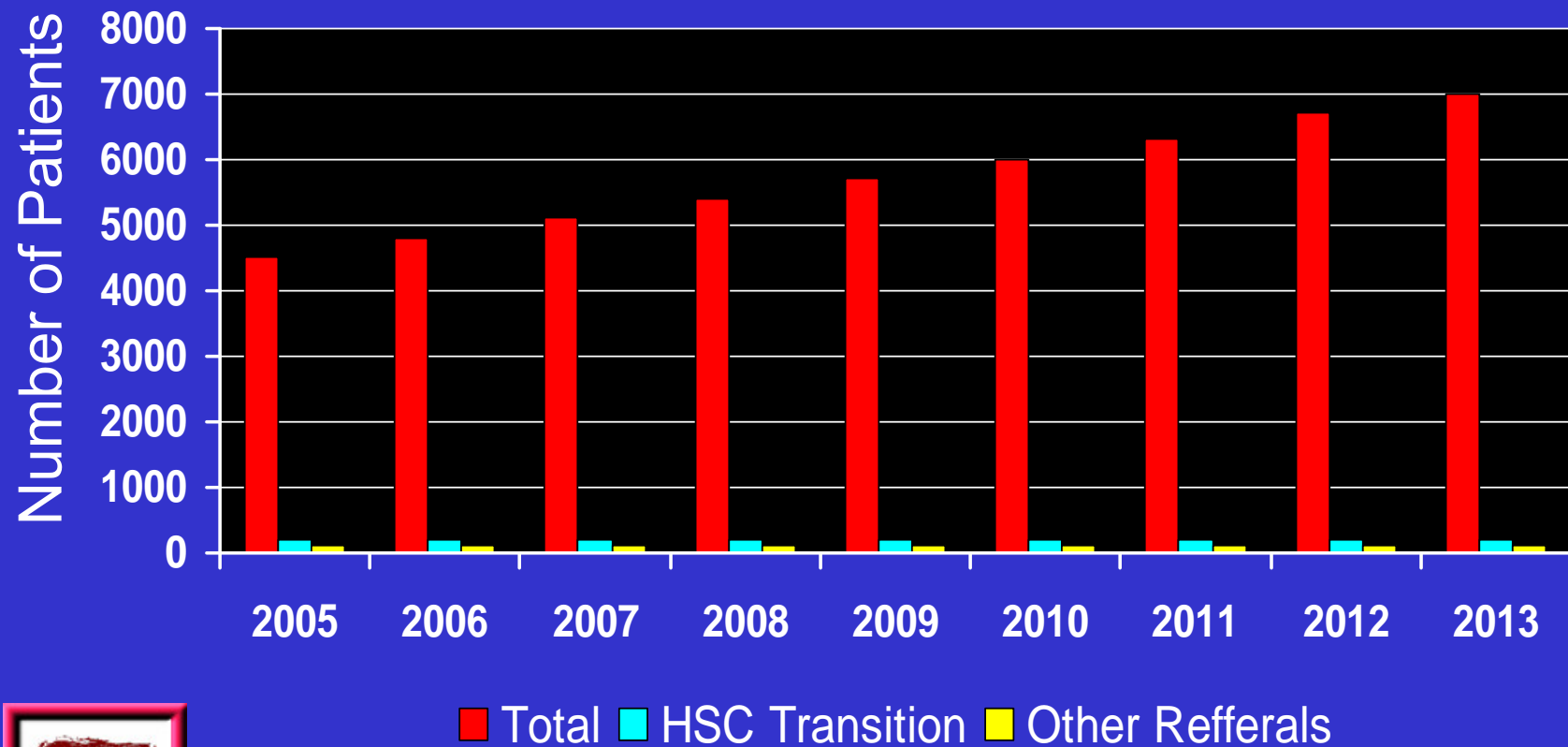
Annual Increase ~ 400 Adults

Need for Follow-up  
at **Regional ACHD  
Centres:**  
**~ 20,000 Adults**

**(Moderate and High Risk)**

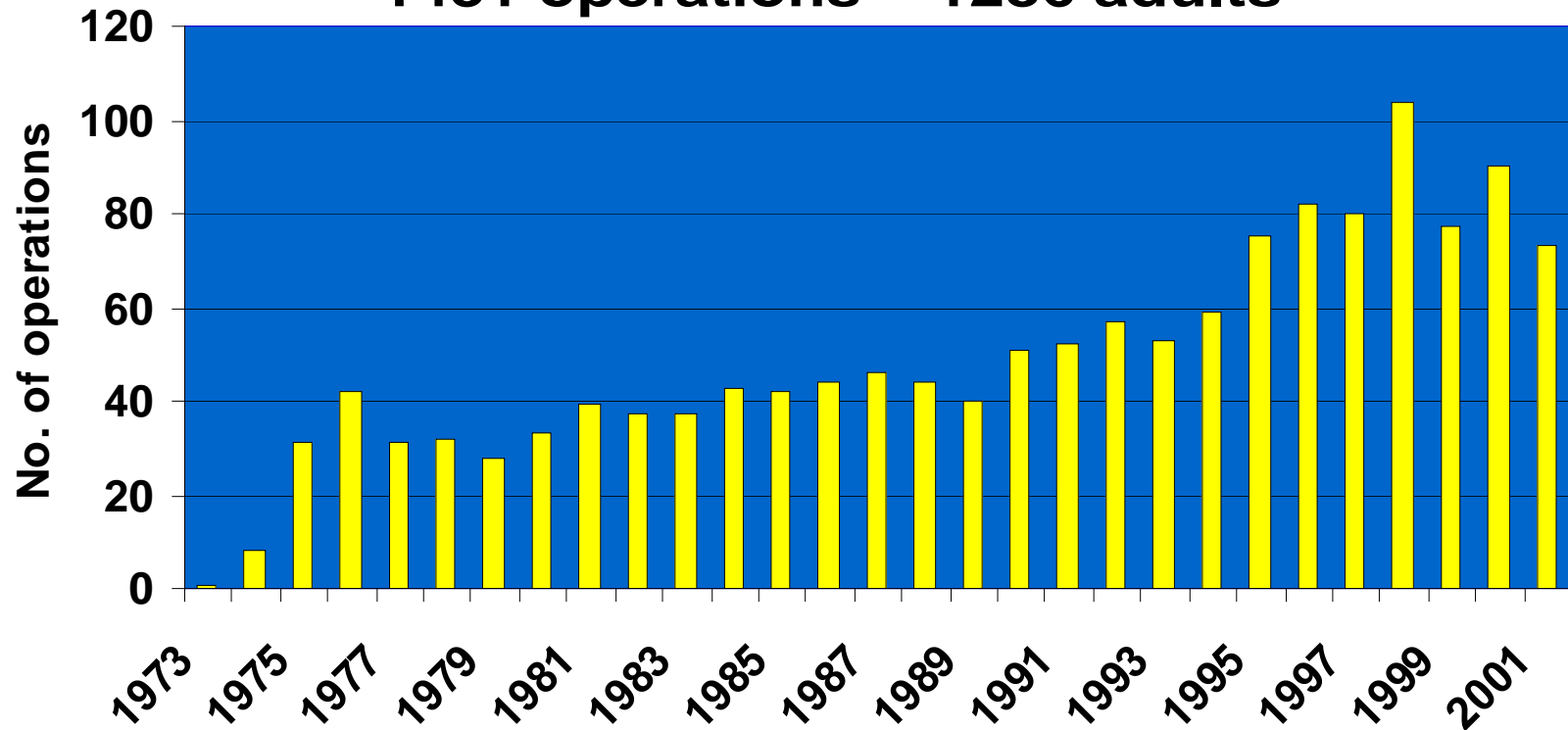
Low Risk Patients : 15,000 – 20,000 Adults  
(to be seen at least once in an ACHD)

# Projected Numbers of Active Pts at TCCCA



# Surgery for Adults with CHD

1431 operations – 1286 adults



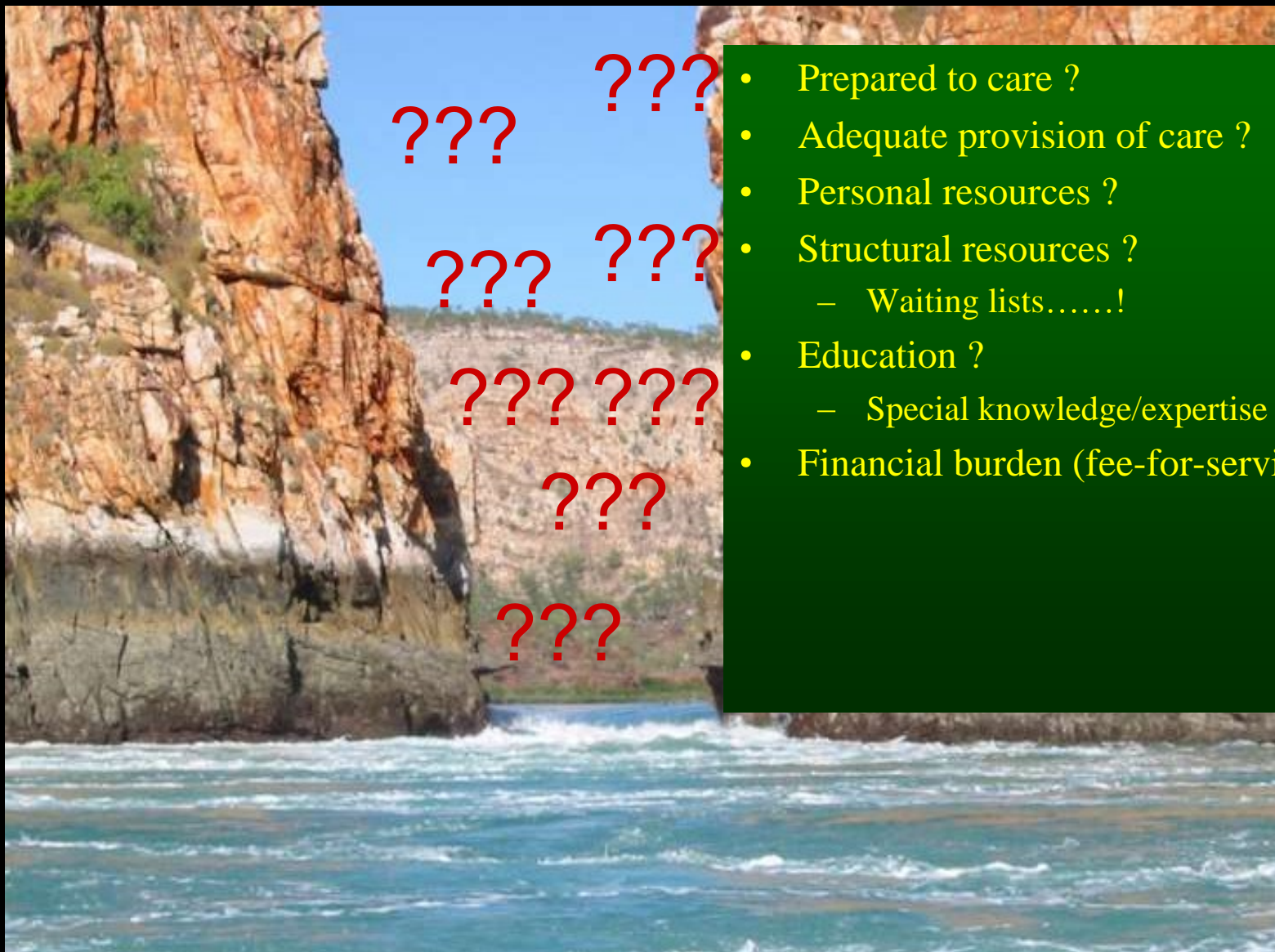
Courtesy by Dr. W. Williams,  
Toronto

Childhood/Adolescence



Age 18

Adults



???

???

???

???

???

???

???

???

- Prepared to care ?
- Adequate provision of care ?
- Personal resources ?
- Structural resources ?
  - Waiting lists.....!
- Education ?
  - Special knowledge/expertise
- Financial burden (fee-for-service)

# Obstacles....

- Staffing crisis:
  - Numbers
  - Education
  - Time allocated to CHD

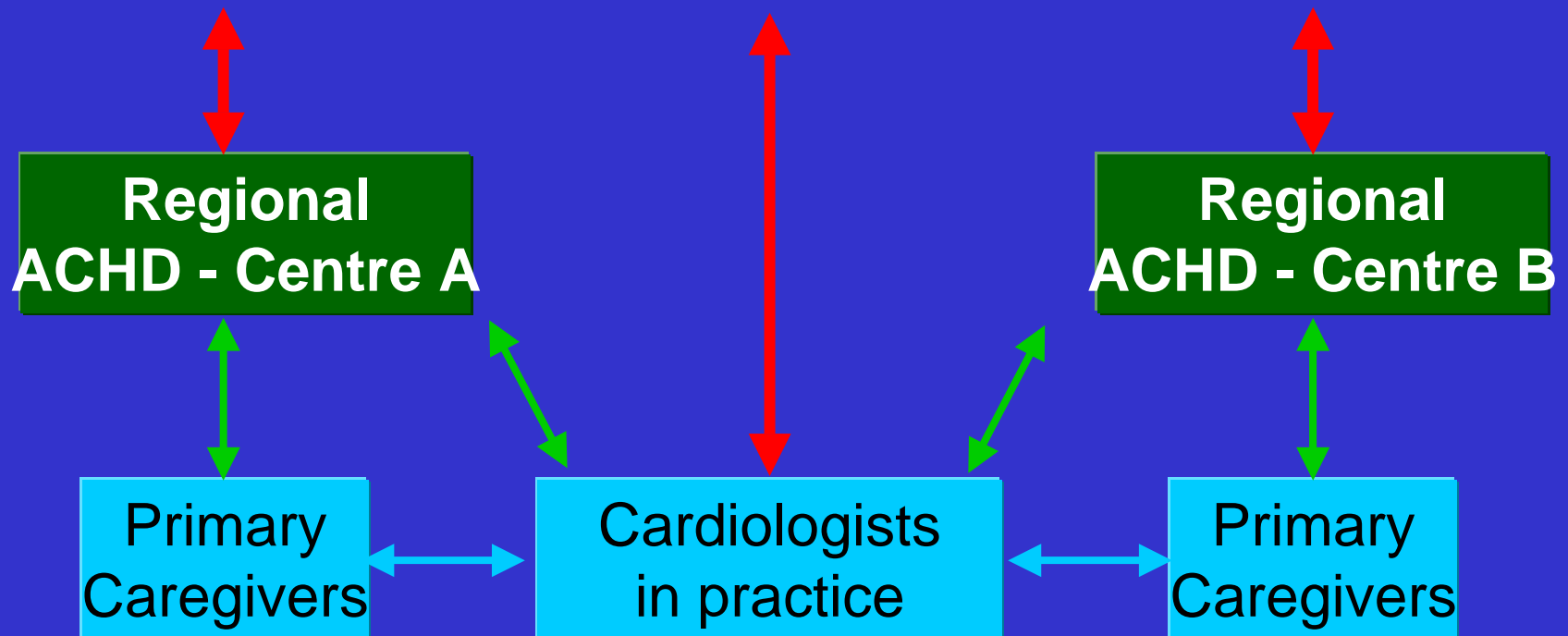
# Expert Care

- To provide high quality care:
  - Complex anatomy / physiology
  - Long term complications
- To provide the latest technologies
  - Electrophysiology (e.g. Carto system)
  - Congenital interventional cardiology
- To provide timely access care

Operating Rooms / Catheterization  
Laboratory  
designated to CHD

# Care for Adults with Congenital Heart Disease

## ational (supraregional) Referral Centre



# A Life-Long Commitment To Specialized Care

**Appropriate actions** are urgently needed  
by:

- The **leaders of the cardiovascular community**

and of the **academic centres**

**To address and improve:**

- **Structural and training resources**
- **Financial resources**
- **Personal resources**

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