What's Pumping in Pediatric Heart Transplant Research?
Summary of the following recently published article from PHTS

Survival After Heart Transplant Listing for Infants on Mechanical Circulatory Support
Jennifer Conway, MD | Ryan Cantor, PhD | Devin Koehl, MSDS | Robert Spicer, MD | Dipankar Gupta, MD | Michael McCulloch, MD | Alfred Asante-Korang, MD | Dean T. Eulrich, PhD | James K. Kirklin, MD | Elfriede Pahl, MD

Babies with heart failure are at the highest risk of dying while waiting for transplant, even when supported with a mechanical device such as extra-corporeal membrane oxygenator (ECMO) or ventricular assist device (VAD).

It is not clear if survival is affected by the reason for listing [cardiomyopathy (CM) vs congenital heart disease (CHD)] or the type of mechanical support (ECMO vs. VAD).

2049 patients
Children <10Kg listed between 2010-2018

Pre and Post Heart Transplant
- In CM patients, VAD use was more common.
- No difference in ECMO use.

Outcomes
- Survival pre-transplant on VAD was better than ECMO.
- No difference in pre-transplant survival for infants <5kg between VAD and ECMO.
- CM patients on VAD and ECMO had better pre-transplant outcomes than CHD patients.

Summary:
This work highlights that devices specific for smaller children, especially those with CHD, are needed to help support patients to transplant.

For more information refer to the original article: