

Heart surgery stalled as COVID-19 spread

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As the novel coronavirus spread across the globe in early 2020, hospitals worldwide scaled back medical procedures, including life-saving heart surgery, to deal with the emerging threat of COVID-19. Now, as the SARS-CoV-2 virus becomes a chronic fact of life, hospitals must find ways to resume cardiac surgeries while protecting patients and health

care workers as much as possible from SARS-CoV-2.

Dr. Marc Ruel, professor in the Departments of Surgery and Cellular and Molecular Medicine at uOttawa Faculty of Medicine, and M. Pitfield Chair & Head, Division of Cardiac Surgery at the University of Ottawa Heart Institute, is the senior author of two recent articles that examine how cardiac surgery centres have been impacted by the COVID-19 pandemic, and how they can resume operations in an environment characterized by a low-grade, long-term prevalence of SARS-CoV-2.

"Cardiac surgeons, who provide lifesaving procedures, must manage two threats at the same time: obviously the threat from COVID, and that of death or complications from untreated heart disease. As such, patients with the most pressing cardiac needs have to be triaged as objectively and as reliably as possible, using predictor tools such as the one developed at the University of Ottawa by my colleague Dr. Louise Sun, from the Department of Anesthesia and Pain Medicine," Dr. Ruel said. "Every day we strive to preserve capacity for a possible COVID surge, but at the same time we must optimally manage our many patients who need [heart surgery](#), help ease their anxieties, and safely return them to enjoying a healthy life."

In the first article, "[Response of Cardiac Surgery Units to COVID-19: An Internationally-Based Quantitative Survey](#)," published in *Circulation*, Dr. Ruel and his co-authors found that 60 cardiac surgery centres in 19 countries had reduced their cardiac surgeries by an average of 50 to 75% in response to the pandemic.

"The widespread interruption in cardiac [surgery](#) described herein adds to the concerning observation that excess non-COVID-19 mortality may now surpass mortality directly related to COVID-19 infections," the article noted.

The second article, "[Committee Recommendations for Resuming Cardiac Surgery Activity in the SARS-CoV-2 Era: Guidance from an International Cardiac Surgery Consortium](#)" published in *The Annals of Thoracic Surgery*, contains 12 recommendations developed by a consortium of experts in 19 countries. The recommendations cover topics such as: prioritizing surgeries; dealing with cardiac patients who test positive for COVID-19; and patient discharge and follow-up protocols.

More information: Mario Gaudino et al, Response of Cardiac Surgery Units to COVID-19: An Internationally-Based Quantitative Survey, *Circulation* (2020). [DOI: 10.1161/CIRCULATIONAHA.120.047865](https://doi.org/10.1161/CIRCULATIONAHA.120.047865)

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