

Feasibility of Biventricular Intracorporeal Ventricular Assist in a Pediatric Patient



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In this issue of Seminars, Schulz et al from Berlin report on the successful placement of 2 Heartware HVAD devices in an 8-year-old child to provide intracorporeal biventricular assist.¹ The implant utilized a strategy that has been published previously;² however, the report demonstrates the feasibility of biventricular intracorporeal support in a 20 kg child. The ultimate outcome of this patient's course is unknown, but the patient was able to be discharged and was stable at 5 months follow-up.

Biventricular support for the pediatric patient currently has limited options. Extracorporeal devices are the only option if long-term right ventricular support is needed, as Heartware HVAD devices are not approved for use for right-ventricular failure in the United States. Fortunately, RVADs can oftentimes be removed after a short period of time as right ventricular function improves, but the rare patient requiring long-term biventricular support remains. More options for our pediatric patients are necessary and the shortage of donor organs does not appear to be improving any time soon. Hopefully, with reports like this showing the feasibility of total intracorporeal biventricular support in young patients, more options will become available to our patients in the United States.

REFERENCES

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Central Message

Heartware HVAD can be an option for internal BiVAD use in pediatric patients in Europe.

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