

Private Catheterization program in Trinidad and Tobago: The burden of care, supply and demand.

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CMJ Vol 74, No1 June 2012

Cardiovascular disease is the leading cause of death in Trinidad and Tobago (24.1% reported mortality in 2004). (1) There is no statistical data on the incidence or prevalence of coronary artery disease (CAD) but some indication can be extrapolated from the volume of cardiac procedures performed in T and T in recent years.

Caribbean Heart Care Medcorp (CHCm) has performed an average of 345 cardiac surgery procedure per year and over 5000 catheterizations over the last 5 years. (2)

This is probably just the tip of an iceberg with a burden of care remaining due to inaccessibility of emergency catheterization in the public sector, such as primary angioplasty, emergency angioplasty and timed elective catheterization.

CHCm catheterization program has been helping the Ministry of Health (MOH) for over 7 years and is fully integrated with the cardiac surgery service which since its establishment in 1993 has performed over 3500 cardiac surgery cases (private and public) with mortality and morbidity equal to the best international centers (3,4)

The program is run by very experienced interventionists from institutions doing high volume procedures including the Bristol Heart Institute, UK and the Association Cardiovascular, Ascardio, Venezuela. We also work with high volume operators from other countries such Brazil, USA, Canada including Trinidad and Tobago. The program strictly follow the American College Cardiology American Heart Association (ACC/AHA) and European Society of Cardiology Guidelines (ESC) (2)

In last 5 years we have established a 24 hour primary and emergency angioplasty service with a team which has door to balloon times, morbidity and mortality results equal to the best international standards. (2)

The long waiting time for MOH approval for elective and emergency cases unfortunately does not help the development of such an ambitious and innovative overall program.

CHCm also runs a private catheterizations program for non cardiac procedures such as cerebral, uterine, chemo and tumor embolization coiling, peripheral artery and aortic stent graft.

The primary mission of CHCm program has and continue to be the introduction of new procedures in T and T, the use of highly trained specialist, training programs for nurses, technician and doctors and most important of all accountability to patients and MOH.

CHCm is providing a first class elective and emergency cardiology, surgery and first world ICU care program with short waiting time at affordable costs for the population of TT and the rest of the Caribbean islands.

References:

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(4) Burgos-Irazabal J, Rampersad RD, Gomes WJ, Rampersad , KA, Angelini GD. Cardiac surgery in a multi-ethnic low volume service: the Caribbean Heart Care Experience. Braz J Cardiovasc Surg 2005;20(3):332-5.