Welcome (bienvenida, bienvenue, willkommen, pryzwitanie, accoglienza, welkom) to the new EACTS cardiac surgery database

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It is a great pleasure and an honour to play a small part in introducing the EACTS Database as unveiled in this issue of the Journal [1]. The authors and more importantly the multinational constituencies represented are to be congratulated for taking this very important first step in establishing this database. This represents a truly Herculean effort to obtain collaborative agreements with originally 12 countries in 2003 to 29 countries ten years later. The cardiac surgery performed at 366 hospitals is now included in the annual data collection, and collectively, over one million patients have been added to the rolls. Similar to the early steps the Society of Thoracic Surgeons (STS) took with the US National Cardiac Database, the EACTS Database has achieved an important first objective—collecting the data. Without data we are all just another person with an opinion. The authors report that, not surprisingly, given the heterogeneity of the patients, the cultures and the health care systems, there is a wide variety of practice patterns from country to country. Despite this variation, the outcomes, specifically length of stay and raw mortality rates, have improved over the decade of reporting in the face of increasing patient age and comorbidities.

The next tricks will be to standardize definitions, perform appropriate modelling to obtain risk-adjusted rates of mortality and morbidity and eventually audit the database. The STS has had several advantages in establishing a database in the US not the least of which is that, for the most part, we all speak the same language. More recently, in the US, there has been an incentive to participate in a national database due to governmental and payor interest/pressure. While similar forces are likely in play on individual national levels for EACTS, the ability to supersede them collectively will only strengthen the efforts for continuous quality improvement, which is needed for improving patient care.

Congratulations to EACTS and the introduction of your database is most welcome.

REFERENCE