Editor's introduction

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Some time ago, we published a manuscript, "Multicenter Clinical Evaluation of the HeartMate Vented Electric Left Ventricular Assist System in Patients Awaiting Heart Transplantation" by O. H. Frazier and associates [J Thorac Cardiovasc Surg 2001;122:1186-95]. The multicenter study evaluated the HeartMate vented electric left ventricular assist system in patients awaiting heart transplantation. The study compared the outcome in patients bridged to transplantation with this device with that of a group of patients who matched the inclusion criteria for implantation of the device but who did not undergo implantation because the device was unavailable "prior to FDA approval," because the family did not approve the treatment, or because the manufacturer had only a limited supply of devices and one was not available at the time it was needed.

This study provided data indicating that the HeartMate vented electric left ventricular assist device provided adequate hemodynamics support, had an acceptably low incidence of adverse effects, and improved the functional class and survival in heart transplant candidates. The device corrected much of the organ dysfunction present in these transplant recipients before the time of transplantation. The survival benefit appeared greater for patients who received the pump than for those who did not. These important conclusions prompted our request to Dr Jack Copeland for an editorial that would help to put these observations into perspective and would also point out some of the salient issues surrounding the use of mechanical devices as a bridge to transplantation. In turn, we gave the author an opportunity to respond to the comments in the editorial. Dr Copeland is a known advocate of mechanical devices to support the failing circulation and certainly an authority in this area. The same is true for Dr Frazier. Dr Frazier's response to the editorial is published as a Letter to the Editor in this same issue, and the combination of the comments and the response serve to effectively allow readers to make independent decisions regarding the issues at hand.