The value of a challenge

Ari A. Mennander, MD, PhD

From Tampere University Heart Hospital, Tampere, Finland.

Disclosures: Author has nothing to disclose with regard to commercial support.

Received for publication Feb 19, 2017; accepted for publication Feb 28, 2017; available ahead of print March 22, 2017.

Address for reprints: Ari A. Mennander, MD, PhD, Tampere University Heart Hospital, SDSKIR, PL 2000, Tampere, Finland (E-mail: ari.mennander@sydanskairaala.fi).

J Thorac Cardiovasc Surg 2017;154:71

0022-5223/\$36.00

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<http://dx.doi.org/10.1016/j.jtcvs.2017.02.050>

Arrangement in Gray and Black No. 1, commonly known as *Whistler's Mother*, was an unpopular painting that eventually garnered the painter notable success. Initially rejected by many proficient critics and considered a dull layout in grey of an aged woman, the painting has since gained worldwide recognition as representing the ideal serene mother and resides in the Musée d'Orsay in Paris. It gives value to an ordinary, yet precious, person.

Raza and colleagues¹ evaluate the outcome of surgery for endocarditis in a challenging patient group, including 144 patients undergoing chronic hemodialysis. Patients undergoing hemodialysis with infective endocarditis are not considered ideal for surgery. Risk factors for postoperative complications may outweigh the advantages obtained from surgery.² Poor kidney function, not to mention hemodialysis, is a surrogate for poor outcome in many surgical interventions.³ Although hospital mortality (13% vs 5%, respectively) and survival at 1 and 5 years (56% vs 83% and 24% vs 59%, respectively) showed worse outcome for patients undergoing hemodialysis versus without, clearly better results were obtained in surgically treated hemodialysis patients compared with those without surgery.¹ Survival in surgically treated hemodialysis patients with endocarditis was 15% above the patients abstained from surgery.¹

Are these outstanding results achievable in every disciplined clinic? Meticulous surgery alone is not sufficient to cure patients with endocarditis undergoing hemodialysis, and the authors highlight the importance of a multidisciplinary team approach. The patients are treated wholly, undergo necessary imaging, and early surgery is aimed for, whereas medication is adjusted accordingly. The article reports transparently missing values and the limitations of the study in regard to the propensity score analysis. A reassuring conclusion is rightfully drawn based on this study: It is worthwhile to consider surgery for infective endocarditis even in patients undergoing hemodialysis.

Patients with endocarditis undergoing hemodialysis have often diabetes, may be drug abusers, may have a variety of

Whistler J. (1871). *Arrangement in Grey and Black No. 1*. © Musée d'Orsay/Berizzi.

Central Message

Seeing and treating the challenging person and patient wholly correlates with surgical success.

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pathogens responsible for infections, and occasionally present with various stages of cardiac insufficiency. In short, patients are individuals. It is essential to emphasize the significance of the individual patient-surgeon relationship in the decision for or against surgical treatment. The control patients included individuals undergoing hemodialysis who refused surgery, were deemed inoperable, or who did not have absolute indications for surgery. When is it ethical to deny surgery to the most vulnerable patients? Obviously, the retrospective study approach does not address all speculation. Combining extensive statistical methods may not abolish all confounding effects of this heterogeneous study population.

The authors are to be commended for treating and studying a forsaken patient group. Patients with endocarditis should not be disregarded as unworthy of surgery on the pretext of hemodialysis. A challenging patient profile may turn out to offer a surgeon a very precious and rewarding experience.

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