Dear Editor,

In the past weeks, the authors of the manuscript “Mortality in Cardiac Surgeries in a Tertiary Care Hospital in the South of Brazil”, published in the latest edition: 2015, volume 28, issue 3, of the International Journal of Cardiovascular Sciences, received some criticism and deem it appropriate to clarify them.

The first one is that the manuscript does not mention in its title the institution where the data were obtained: not mentioning the institution in the title or in the methods meets the blinded review policy applicable to scientific papers, which significantly improves the quality of publications. Nevertheless, after reading the manuscript, it rests clear to any attentive reader that the data mentioned are those from the Instituto de Cardiologia de Santa Catarina (ICSC), connected to the Final Term Paper of the Medical Residency Program in Cardiology of one of the authors. As the Instituto de Cardiologia do Rio Grande do Sul (IC-FUC) is indicated as an academic association of the second author at the time of the submission, inattentive readers could associate it to the data appearing in the manuscript, which is not true.

There is also a lot of criticism on the publication of data considered “negative” about heart surgeries, since they could bring little practical benefit and adversely affect the public image of the aforementioned services. Note that literature data suggest otherwise: since 1989, the Health Department of New York began to publicly disclose data on mortality adjusted for risk in heart surgeries per hospital (including per surgeon). Despite the large negative repercussions seen in the beginning, the records demonstrated that services and professionals with lower volumes had higher rates of complications. As a result, services were restructured and there was a 41% reduction in mortality from coronary artery bypass surgeries in the first four years of the publication.

Despite controversial, the manuscript “Mortality in Cardiac Surgeries in a Tertiary Care Hospital in Southern Brazil” already has some important repercussions that seek to improve the quality of the institution, which now has a death review service; a team to discuss all cases referred for cardiac surgery, consisting of cardiac surgeons, hemodynamicists and clinical cardiologists; more spots available in the postoperative unit, aiming at the reduction of total hospitalization time; and an investigation was started by the Health Department seeking other potential problems associated with the mortality presented. It is expected that, just like in New York, the study published is not only controversial but also promotes a significant reduction in the ICSC complication rates.

Keywords: Thoracic surgery; Myocardial revascularization; Heart valve prosthesis implantation

Potential Conflicts of Interest
This study has no relevant conflicts of interest.

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Academic Association
This study is not associated with any graduate programs.
References


