Team-Based Approaches

Multidisciplinary team–based care plays a central role in the contemporary management of a broad array of cardiovascular diseases. The primary value of multidisciplinary heart teams lies in their ability to consolidate input from multiple team members with varied expertise in a manner that facilitates complex patient-shared decision-making. In this issue of Cardiac Interventions Today, several key cardiovascular opinion leaders provide insight into how team-based care plays a pivotal role in the daily management of patients.

To begin our coverage for this issue, Dr. Rachel Rosovsky leads a panel of early adopters to the PERT (pulmonary embolism response team) concept, with insights into clearing administrative hurdles, finding willing partners, and what they wish they’d known at the outset. Drs. Klevin Roger L. Reyes, Gizem Bilgili, and Florian Rader explore new opportunities for interventionists in the field of hypertension management, as clinical trials continue to evaluate renal denervation and other potential approaches to uncontrolled hypertension.

Next, Dee Dee Wang, MD, and Brian O’Neill, MD, provide us with six keys to building a quaternary mitral and tricuspid center of excellence. Hooman Bakhshi, MD, and Matthew Sherwood, MD, delve into current guidelines that support a multidisciplinary heart valve team approach for lifetime management of aortic stenosis.

Raghav Gattani, MD; Carolyn M. Rosner, NP; and Behnam N. Tehrani, MD, show us how recent studies have demonstrated the merits of protocolled team-based care with regionalized shock networks in improving outcomes in cardiogenic shock.

Finally, in a literature review of a recent paper in JACC: Advances, I close out our feature coverage by evaluating the role, history, composition, and challenges of multidisciplinary heart teams in cardiovascular medicine, along with best practices for its use.

Our Today’s Practice column features Xiaoyan Huang, MD; Meredith Rosenthal, PhD; and Joel Sauer, MBA, who highlight how increased needs in cardiovascular services should be met with an advancement of the care team and an embrace of virtual and digital care.

We conclude our issue by interviewing Gorav Ailawadi, MD, who shares why he was drawn to transcatheter interventions as a cardiac surgeon, insights from his work at the forefront of device innovation, and his philosophy for treating patients deemed too high risk.

These articles highlight the central role of team-based care in the management of complex cardiovascular disease. The ultimate success of novel catheter-based interventions depends not only on continued device innovation but also on the appropriate deployment of these therapies in the right patient, at the right time. This is where multidisciplinary team-based care provides its greatest value and will continue to play an important role well into the future.

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