



The Society for Cardiac Angiography & Interventions

SCA&I President's Page



The Patient

John McB. Hodgson, MD, FSCAI
Heart and Vascular Center
MetroHealth Medical Center
Cleveland, Ohio
President
Society for Cardiac Angiography & Interventions

Mel was playing racquetball when he first experienced the dull substernal pressure. When it persisted, he decided to call off the game and head home. Debbie knew something was wrong the minute he came in. While Mel waited on the couch she called “911”.

The dull thud in the next room was an ominous sound. Finding him slumped on the floor and turning blue, Paul knew what he had to do. Debbie watched in horror as her son performed CPR on her lifeless husband. Local rescue arrived and after a single defibrillation, Mel stabilized. Triaged at a community emergency care center, he was sent by helicopter to our institution. We converged as he traveled, unsure what we would confront when he rolled in the door. Awake but groggy, neck collar collecting blood from the gash over his right eye, pressure at 90 exceeded by his pulse of 120; our challenge of the evening. The rest is remarkably routine for us all: IABP, cross the occluded ostial LAD, anticoagulate, clot removal, IVUS, and a final balloon. I'll come back to that in a minute.

Meeting his waiting wife, son and daughter fretting patiently in an abandoned waiting room reminded me why I had rushed from home in the middle of the night, called to bear years of experience, expended thousands of dollars, and interrupted two of my nurses' much deserved sleep. “He's going to be OK,” I offered. It had all been worth it.

I was proud of Debbie and Paul. They had started the lifesaving cascade, and without their initiative, I would have never heard of Mel. I was proud of the firemen from Brecksville, Ohio who were trained to deliver the lifesaving shock. I was proud of our triage and Life Flight transfer system, serving thousands of patients yearly. I was proud of my nurses; they never complain and they rise to every occasion we throw their way. I was thankful for 20 years of acute MI intervention and for the lessons I had learned.

In that moment, I knew why we do what we do. It's all about the patient. Mel recovered fully (His ejection fraction is now 55%). He left the hospital with a renewed bond to his family and a will to do whatever it took to live with his newly diagnosed atherosclerosis.

Often in the pages of this journal we focus on the technology and science behind the procedures we invasive specialists spend so much of our time performing. Mel's outcome was our industry partner's success

*Correspondence to: John McB. Hodgson, MD, FSCAI, Heart and Vascular Center, MetroHealth Medical Center, 2500 MetroHealth Drive Cleveland, Ohio 44109. E-mail: president@scai.org

DOI 10.1002/ccd.10571

Published online in Wiley InterScience (www.interscience.wiley.com).



as well. The balloon pump we take for granted since it works so reliably. The three different wires I used to finally cross a flush occluded LAD ostium; the Transit catheter I used to confirm distal wire position, the Angiojet that safely removed the clot hanging precariously into his left main. The IVUS that confirmed a small, ruptured plaque and an excellent lumen area. Advanced anticoagulants: bivalirudin, tirofiban, clopidogrel; all the products of intense R&D programs by multiple pharmaceutical companies.

Ten years ago when many of these technologies were not available, Mel might have had a very different outcome. But that's just the point. Our technologies are

"enabling". They enable us to save lives and restore families.

We regrouped for a photo several weeks later. Left to right in the photo are Debbie, Sarah (14), Mel, Jessica (16), Paul (18). A family restored. In the rear are Nancy, myself and Colette. Mel continues to do well, and we continue to treat yet the next patient in a busy schedule. As I leave the hospital every night, I pass by our institution's slogan: "The way people should be treated". I think of Mel and I smile.

I'm sure each of you has similar stories. As I serve you over the next year, let us endeavor to keep our mission clear: It's all about the patient.