Survey of follow-up catheterization use in pediatric pulmonary hypertension - a TOPP-2 registry analysis

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Background

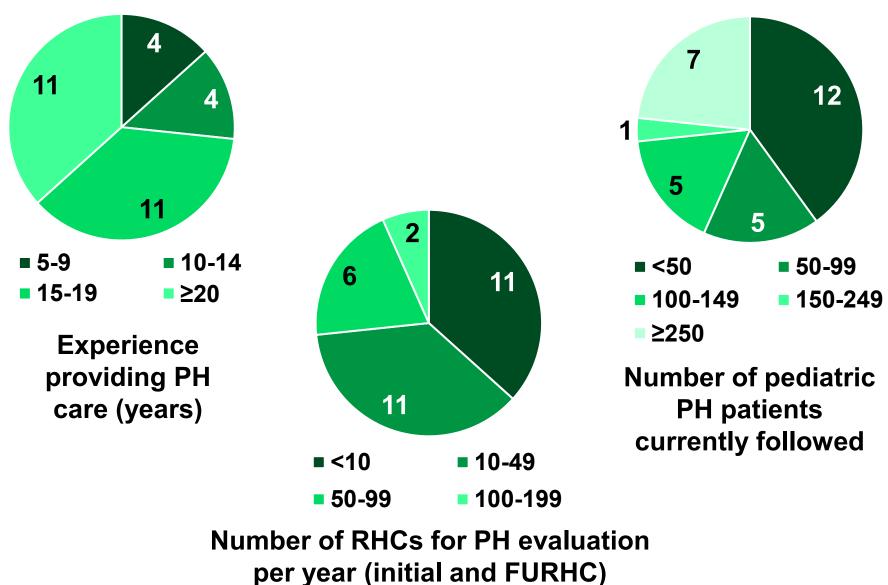
- Initial right heart catheterization (RHC) is the gold standard for diagnosis of pulmonary hypertension (PH)
- The role of follow-up RHC (FURHC) is less clear
- We sought to describe institutional practice regarding FURHC practice among pediatric PH centers participating in the Tracking Outcomes and Practice in Pediatric Pulmonary Hypertension-2 (TOPP-2) registry (NCT02610660)

Methods

• REDCap-based survey of pediatric centers participating in the TOPP-2 registry performed in 2021

Results - participating centers

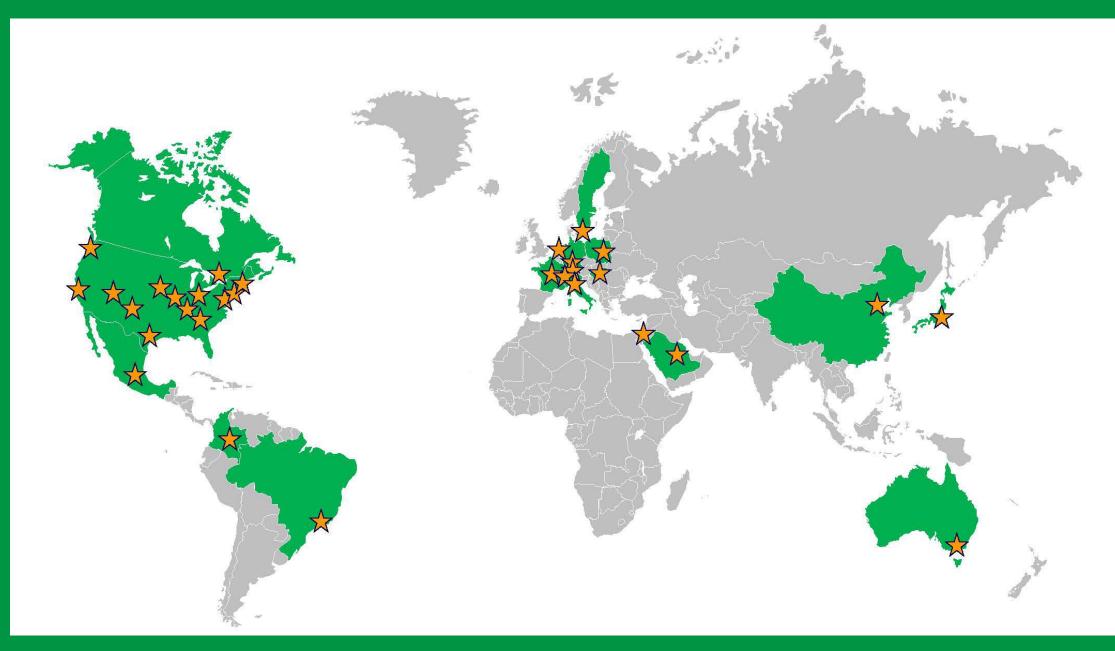
• 30 of 31 centers responded





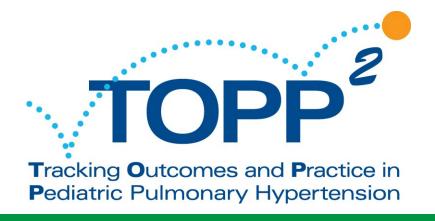


Key finding: There is substantial variability in institutional practice among pediatric pulmonary hypertension centers regarding the use of follow-up right heart catheterization



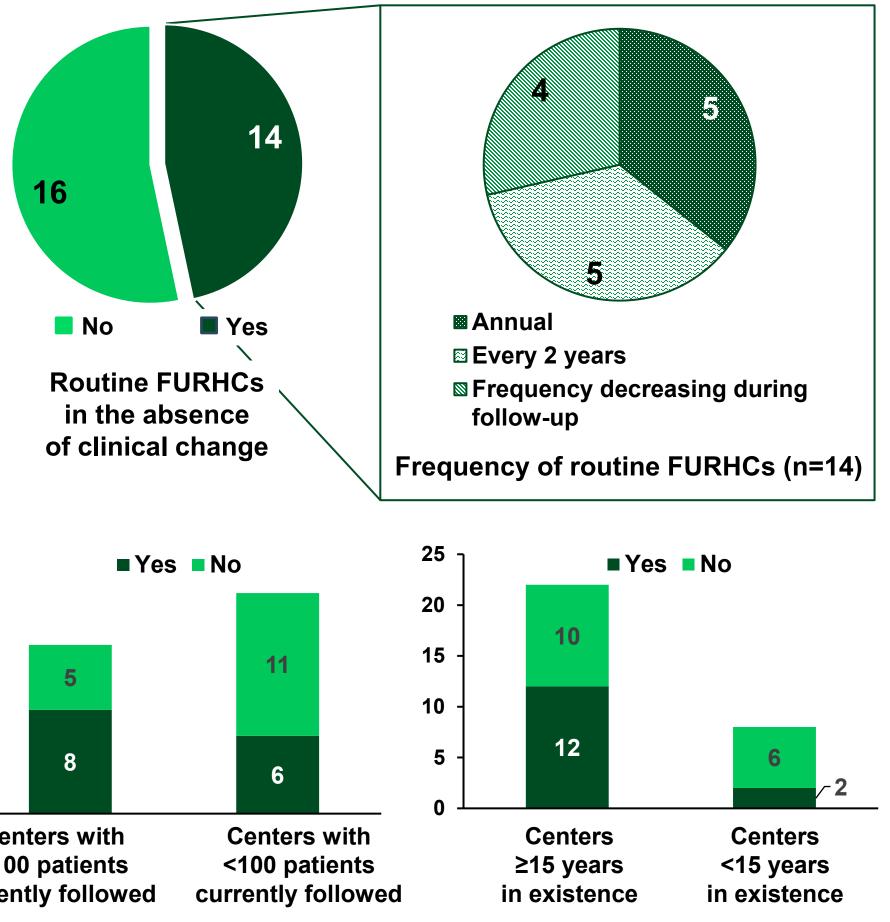
Children's" Healthcare of Atlanta

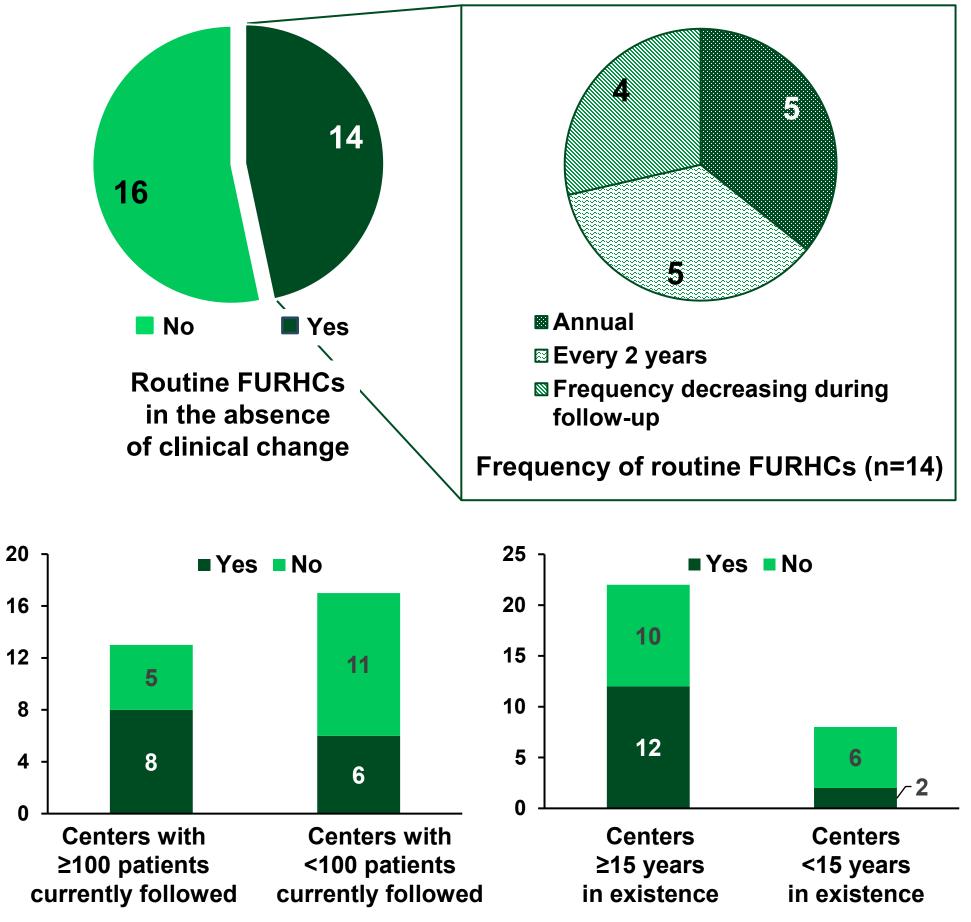




Location of centers participating in the TOPP-2 registry

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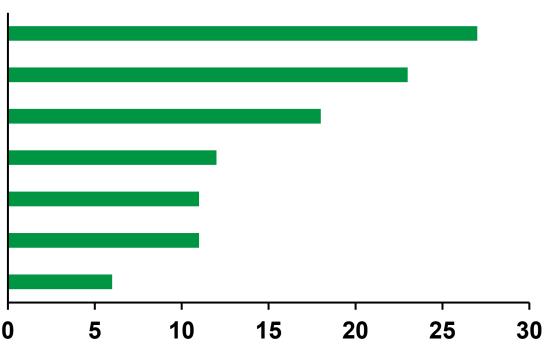
Results - use of clinically indicated FURHC

Conclusions

Disclosures

Results - use of routine FURHC

Clinical worsening Echocardiographic worsening Unplanned PH hospitalization **Discontinuation of PH medication** Addition of PH medication **Rising BNP/NTproBNP Clinical improvement**



Factors typically prompting a FURHC (n=30)

There is wide variability in clinical practice regarding the indications for and timing of FURHC in pediatric PH

• Further research should clarify the clinical utility of this invasive test to inform practice guidelines

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