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Title: Pulmonary hypertension: The experience of a large UK district general hospital

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Body: Introduction Recent advances in therapy make early identification of patients with Pulmonary Hypertension (PH) important. The 2008 consensus statement reported an average UK treatment rate of 24.9 per million.⁽¹⁾ Aim Our institution is a District General Hospital serving a population of 330,000. Our aim was to compare our treatment rate to the national average since the appointment of a physician with an interest in PH. Method Retrospective casenote review of patients attending our monthly PH clinic since 2006. Results We identified 102 Outpatient and 35 Inpatient referrals. 28 went on to receive specialist treatment for PH; mean age 66 (range 36-85); 24 female 4 male. Diagnoses: Chronic thromboembolic 10, Idiopathic 8, Collagen vascular disease 5, Congenital left to right shunt 2, COPD 2 and Portal hypertension 1. Haemodynamics (mean): Cardiac catheter: mean Pulmonary Artery Pressure (PAP) 48mmHg (n=22, range 22-78), cardiac output 4.8 (n=21, range 2.5-7.7), cardiac index 2.83 (n=22, range 1.47-5.14) and pulmonary vascular resistance 760 (n=22, range 123-1600). Echocardiography: systolic PAP 66mmHg (n = 23, range 13.8-107). Treatment: Oral Monotherapy 11, Prostanoid Monotherapy 1, Combination therapy 10, Intolerant of therapy 1, Pulmonary Endarterectomy 6, Transplant referral 4, Shunt repair 1. Outcome: 18 out of 28 patients survive on medical and surgical therapies. This is equivalent to 54 patients treated per million, considerably higher than the national average.⁽¹⁾ Conclusion Diagnosis and treatment rates for PH in the UK can be substantially improved in many areas by developing local services with the support of the regional Specialist centre. ⁽¹⁾ Thorax 2008;63(Suppl II):ii1-ii41.