The Fontan Procedure:

Time For a West Indian Approach?

Introduction

The treatment of cyanotic congenital heart disease remains one of the most challenging aspects of paediatric cardiac surgery. In some complex cases surgical therapy is best left to practitioners who are highly experienced "super-specialists" in dealing with bizarre malformations. Where such facilities exist they should be utilised, but where they are absent, a judgement must be made by the surgeons present as to the degree of complexity of malformation they are prepared to take on. Whatever decision is made will depend on factors such as the overall experience of the operating team and intensive care facilities, among several other considerations. In the past, the treatment of tricuspid atresia and other malformations resulting in a similar haemodynamic state were associated with significant surgical, hospital and early morbidity and mortality, and as a result, treatment of these conditions was carried out only in highly specialised centres. The causes and contributing factors to the early disappointing results have now been identified, and satisfactory results in the surgical treatment of "straightforward" malformations can now be expected. With this in mind, it is the aim of the following discussion to outline the surgical therapy of tricuspid atresia and related conditions with a view to advocating that the time has come for the Cardiothoracic services at the University Hospital of the West Indies (UHWI) to begin to offer surgery to these unfortunate children.