

Outcomes Following Implementation of a Pediatric Cardio-Oncology Program

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Abstract

The comprehensive care that cancer patients require has become increasingly complex and led to the creation of cardio-oncology clinics (COC). Ninety-five patients were referred to our quaternary care COC. Initiation of oral heart failure therapy (OHFT) or advanced cardiac therapies within 1 year following referral were identified and risk factors for these were evaluated. Patients older at the time of cancer diagnosis and with lower LV ejection fraction were more likely to require OHFT. COC's elicit a high degree of clinically actionable information for pediatric patients suffering from not only cancer, but also cardiomyopathy, a particularly high-risk patient population.

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