

Methods

This report summarises all cardiac surgery performed in 1994 using information supplied by 34 of the 37 cardiac surgery units operating in Australia. Three of the units could not supply the information in time for inclusion in this report. A list of participating units is presented in Appendix A. The list of units is reviewed each year and new units are invited to join the register and submit their data.

Statistics from previous years are also included, as changes over time in the numbers, rates, and associated mortality of operations are of interest. Information about the rate of reoperations for coronary artery bypass grafts and valve surgery is also presented.

Data collection forms are sent to all units at the beginning of each year for procedures done in the previous calendar year. Units are asked to complete the forms with aggregate results, not individual patient details, and submit them within eight weeks. Reports are provided by each unit under the condition that results will be presented in aggregate form only, and that results from individual units will not be released unless the head of the unit concerned agrees in writing.

Data are collected on a form presented here in Appendix B. This form is reviewed and updated by the Cardiac Surgery Advisory Committee each year to reflect changes in practice. Units' responses are reviewed, data are checked for consistency, any discrepancies are referred to the relevant unit, and data are then entered into a dedicated database at the Australian Institute of Health and Welfare. Results are analysed and the annual report compiled and subjected to scrutiny by members of the Advisory Committee prior to its publication.

'Mortality' refers throughout the report to death within 30 days of the operation, or during the post-operative period in hospital.

The terms 'closed' and 'open' surgery are used in this report to indicate those operations performed without and with cardiopulmonary bypass support respectively. They do not allude to the use of catheter-based techniques, which will be reported for procedures done from 1995 onwards in future issues of this collection.

Surgery rates are calculated as the number per million people in the Australian population. Death rates are given as percentages of those receiving the surgery.

The rates for bypass graft surgery have been calculated to include the Australian Capital Territory population with New South Wales, and the Northern Territory population with South Australia, since those are the States where the vast majority of Australian Capital Territory and Northern Territory residents are treated. Up to 1991 half the Tasmanian population was included with Victoria and half with South Australia. This is because, until 1991, Tasmanian patients travelled to either State for open heart surgery, in approximately equal numbers. The precise distribution of patients from Tasmania is not known, so rates for Victoria and South Australia may not be exact for that period. However, they should reflect the general trend in coronary artery bypass grafts in these States. In 1991 open heart surgery began in Tasmania.