

25th February 2022

Dear Member

Joint statement by Presidents of BCS/BCIS/ SCTS to members about interpretation of the 2021 AHA/ACC/SCAI Coronary Artery Revascularization guidelines

The AHA/ACC/SCAI Coronary Revascularisation guidelines published in December 2021 have proved contentious, and have precipitated this statement.

We would like to reinforce to all our members that we encourage them to continue to assess and manage patients requiring coronary revascularisation according to the principles set out in "*Getting the Best from the Heart Team*" by the Association of Cardiothoracic Anaesthetists and Critical Care, British Cardiovascular Society, British Cardiovascular Intervention Society, the British Heart Valve Society and the Society for Cardiothoracic Surgery in Great Britain and Ireland.

We recommend that non-emergency cases involving left main or multivessel disease should be discussed at an appropriate MDM, and a suggested management plan/options should then be considered as part of a process of shared decision-making with the patient. Specifically, we do not agree with the downgraded Level of Evidence for the use of CABG as laid out in the recent AHA/ACC/SCAI guideline document.

The appropriate management of patients with left main or multivessel disease will be optimally achieved via the MDM process and after informed discussion with the patient.

With best wishes

John Greenwood

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Nick Curzen President, BCIS

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