



Introduction to the focused series on “Current Management Aspects in Adult Congenital Heart Disease (ACHD): Part V”

Medical care for patients with congenital heart disease (CHD) has currently reached a high, unprecedented level (1). Children with CHD now reach adulthood in more than 95% of industrialized countries, and the number of adults with congenital heart defects (ACHD) is estimated at 50 million worldwide and will steadily rise in the next decades (2,3).

Most CHDs are repaired rather than completely corrected, anatomic and functional residua and sequelae often exist. Cardiac defect-specific late complications such as heart failure, arrhythmias, pulmonary vascular disease, aortopathies, infective endocarditis, or concomitant acquired organ disease affect the quality of life (QOL), performance, work capacity, and mental health of ACHD with advancing age (4,5). If treated inappropriately, further development of heart failure, arrhythmias, and possibly premature death will occur. Therefore, most patients with CHD will require life-long follow-up from a multidisciplinary team as a major determinant. This requires that all treating physicians are up to date with the latest knowledge and also continuously educate themselves in this area (6).

At a new era of the planet, with an immense number of refugees and immigrants due to regional wars and economic inequality, we need to consider bringing the scientific level of all international congenital cardiac heart centers to a certain advanced level, regardless of our own countries' borders.

We have always to keep in mind that a patient with CHD that was incompletely repaired in a remote country may turn out to be a candidate that can still be treated medically and with cardiac surgery in a developed country.

In this regard, the need of networking and international cooperation, as well as remote teaching tools like journals and publications in congenital cardiac disease and congenital heart surgery, appear to be a very important international contribution to public healthcare.

In this 5th volume of a series on ACHD, international authors again present new research findings and communicate relevant aspects of ACHD care. This volume includes 19 excellent papers; 15 original and 4 review papers. Recent data on cardiac failure, pulmonary hypertension, aortopathies, vascular aging, QOL and psychological issues, health care status, transposition of the great arteries after atrial switch procedures, and Ebstein's anomaly are presented. Also, interesting findings on bicuspid aortic valve, Fabry disease, left ventricular (LV) noncompaction and Fontan procedure are provided.

We hope that this issue of the *CDT* journal, which reports on important, new, and also practice-relevant aspects of ACHD care, will help expand knowledge about ACHD for young colleagues and further develop ACHD care. We would like to thank the *CDT* journal and especially Prof. Paul Schoenhagen, editor in chief, for their dedication to the field of ACHD and for giving the topic of “Adult Congenital Heart Disease”.

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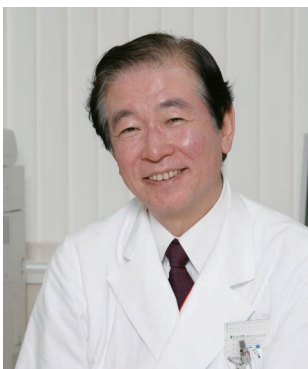
and participates on steering board for COMPERA International Steering Board. The authors have no other conflicts of interests to declare.

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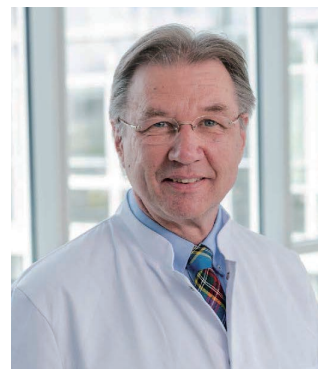
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