

Summary

3 Who we are





Our Institute / Teaching & Research

5

Our Facilities & Technology





Activity

11

Leading services



22 Annexed







Minimally invasive cardiac surgery / Interventional Cardiology / Sports Cardiology

"We offer you the best and fast resolution option for your cardiovascular disorder"

"Comprehensive approach to all cardiovascular disease"

"State-of-the-art in cardiovascular therapies, technology and procedures"

"Best scientific evidence-based Medicine"

"Precision Medicine, personalized and patient centered care"

"Team Work at Institutional level"



Who we are





The Cardiovascular Institute of barnaclínic+ was created by a group of professionals involved in Cardiovascular Medicine and Surgery to give a service of excellence to patients with heart and vascular disorders requiring a very personalized way of care and in the shortest time possible with a comprehensive and multidisciplinary approach using state of the art and most developed equipments.



One of the largest, most experienced cardiovascular groups in Spain, and one of the best well-known in Europe, cares for patients from all our Country and many different areas around the world.





Our depth and breadth of experience allows us to perform high complex surgeries and treatments, with success rates above the national average. Our staff works with the newest surgical and interventional techniques, equipment and devices, including most recently developed strategies. We are one of the largest and best equipped University Medical Center in Europe, due to the prestigious and devoted professionals, researchers and teacher in the Cardiovascular field.



For nation-wide scores, it has been established a comprehensive rating system to compare the quality of cardiac surgery among hospitals across the country. Most years the Hospital and our Institute have been awarded with the highest positions at the Top ten which is based on Aortic Valve Replacement, combined Aortic Valve Replacement and Coronary Artery Bypass Graft (CABG) Surgery, and CABG or PCI.

Our Institute











168

Nurses



4.576 Admissions



22.270

Outpatient visits



1.308

Emergencies



1.959

Surgeries

*ONE-YEAR RESULTS

Our facilites and Technology



8 BEDS

Coronary Care Unit



18 BEDS

Medial Intermediate care



8 BEDS

Surgical ICU



5

Angio Hemodinamic rooms



46 BEDS

Hospitalization



8 BEDS

Short stay



8 BEDS

Surgical Step-down unit



2 cardiac 1 vascular

Operating Rooms (24/365 availability)



2 LABS.

Cath. Labs.



3 LABS.

EPS Labs.



7

Echo machines



Z R Ech

OR Echo machines

Teaching

University of Barcelona. Master degrees





Advanced Medical Skills. Specialization in:

- · Acute Cardiac Care and Perioperative Intensive Care
- \cdot Diagnosis and Interventional Treatment in Coronary Heart Disease
- · Clinical Electrophysiology and Rhythm Management Devices
- · Non-Invasive Cardiac Imaging
- · Endovascular and Cardiac Treatments



Advanced cardiovascular surgery and specialized intensive care



Techniques of extracorporeal perfusion and oxygenation



Collaboration in International Master of Valve Repair



FELLOWSHIP PROGRAMS













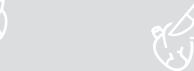
Cardiac Insufficiency and transplantation

Interventional cardiology

Acute cardiac care

Non invasive imagining









Sports cardiology Cardiac surgery

Electrophysiology and Arrhytmias

Vascular surgery

Research



The Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS) is a biomedical research institute of excellence. It combines clinical and basic research in order to accelerate the translation of the knowledge to the benefit of the patients.

The research activity of Cardiology is primarily involved in two main lines of research:



Atherosclerosis, coronary disease and cardiac insufficiency



Arrhythmias, resynchronization and cardiac imaging



OUR RESULTS





81

Published originals



5.13 413

Mean

Total

Impact factor



19

Competitive national projects



2

Competitive international projects

*ONE-YEAR RESULTS

Activity





0,83 RAMI



0,94 RACI



0,84RARI



3.650
Admissions



2,19 Complexity



6 Lengh of stay

* ONE-YEAR RESULTS

RAMI - Risk-adjusted Mortality Rate

RACI - Risk-adjusted Complication Index

RARI - Risk-adjusted Readmissions Index

Our results



50

Percutaneous heart valve interventions



800

Device implantation (pacemaker ICD)



900

Cardiac surgeries Including MICS



3.000

Catheterization



1.200

Arrhythmia
ablation
(Including atrial
fibrillation and
ventricle tachycardia)



100

Aortic aneurism (Including endovascular treatment)



300

Vascular surgery (carotid artery, AV fistula)



12.000

Echocardiograms



700

Cardiac MRI



1.700

Stress test



Professionals

Our core values are the vocation of patient service and respect for people and rely on the intense teamwork of our group and the ambition for excellence and excellence.

The department comprises a strong team of professionals from various cardiac subspecialties, (cardiovascular surgeons, interventional cardiologists, non-interventional cardiologists, cardiovascular intensive care professionals), and specialized nurses, among others, capable to treat all types of heart diseases.

Our prestigious and devoted professionals, researchers and teachers in the Cardiovascular field are international opinion leaders in all the subspecialtiyes.

Our multidisciplinay team has extensive experience in the patient centered care and is completely committed to the patient process during the treatment but also to the post-procedural care. We are known to deliver a professional, individualized and compassionate care to all patients.



HEART VALVE DISEASE

- Aortic Stenosis
- Aortic Insufficiency
- Mitral Insufficiency
- Mitral Stenosis
- Tricuspid Valve Disease

SERVICES





Percutaneous intervention treatment: Implant of valve prosthesis, valve repair devices, percutaneous closure of paravalvar leaks.

Minimal invasive Cardiac surgery tageted at repair and substitution in mitral disease

Open heart surgery targeted at the substitution with valvar prosthesis or homograft valves transplant (valvar transplant) in valve disease

Second opinion

Pre- and post-operative rehabilitation

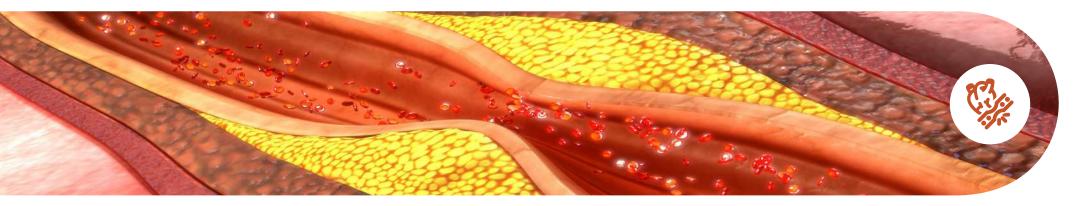


HEART RHYTHM DISEASE

- Atrial fibrillation
- Other supraventricular tachycardias
- Ventricular tachycardia
- Artificial cardiac pace makers and defibrillators
- Pace-makers and desfibrilators (ICD)
- Bradicardia

SERVICES

- Imaging diagnostics: monitoring of ambulatory ECG, echocardiography, stress tests, CT scan, cardiac MR, electrophysiological studies
- Medical treatment with medication
- Percutaneous intervention treatment: ablation of arrhythmias
- Prevention of embolism in patients with atrial fibrillation: treatment with anticoagulants and percutaneous closure of left atria
- Surgical treatment: Minimal invasive surgery targeted at atrial fibrillation and combined treatment for valve disease (valve repair and substitution)
- Implanting and follow up with artificial cardiac pace makers and defibrillators
- Second opinion
- Evaluation of sudden cardiac death
- Familiar Arrythmic diseases



CORONARY ARTERY DISEASES

- Myocardial infarction and acute coronary syndrome
- · Chronic ischemic cardiopathy
- Angina pectoris
- Coronary bypass
- · Coronary stenting
- Total coronary chronic occlusion

SERVICES





🎇 Percutaneous intervention treatment: angioplasty and coronary stenting

Surgical treatment: surgery of coronary artery bypass grafting (CABG)

Second opinion

Pre- and post-operative rehabilitation

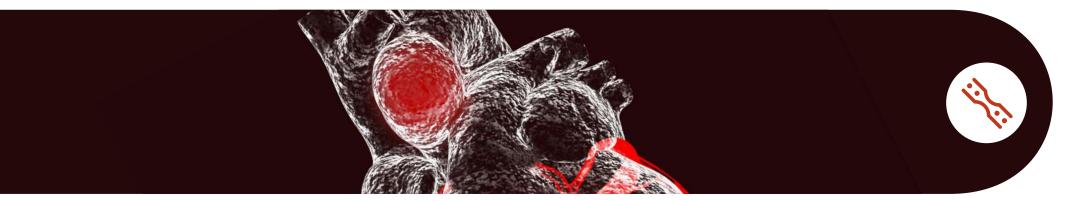


HEART FAILURE

- Hypertrophic cardiomyopathy
- Amyloidosis and other forms of cardiomyopathy
- Dilated cardiomyopathy
- Ischemic cardiomyopathy
- Familiar cardiomyopathies

SERVICES

- Image diagnostics: echocardiography, stress tests, CT scan, cardiac MR, catheterization, electrophysiological studies
- Medical treatment: follow ups
- Percutaneous intervention treatment: angioplasty and coronary stenting, alcohol septal ablation in hypertrophic cardiomyopathy (myectomy)
- Surgical Treatment: Minimal invasive surgery targeted at repair and substitution with valve in secondary mitral disease
- Surgical treatment: surgery of coronary artery bypass grafting (CABG), surgery of ventricular remodeling, surgery for hypertrophic cardiomyopathy (myectomy), cardiac transplant
- Second opinion
- Pre- and post-operative rehabilitation
 - Treatment with devices: Left ventricular assist device (artifical heart), Pacing in hypertrophic cariomyopathy, Resyncronization therapy (CRT) in dilated cardiomyopathy



AORTIC DISEASES

- Aneurysm and dilation of thoracic and abdominal aorta
- Dissection of aorta
- Intramural hematoma

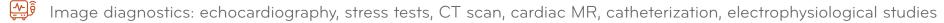
SERVICES

- Imaging diagnostics: echocardiography, CT scan, cardiac MR, vascular MR (angiography), catheterization
- Medical treatment with medication
- Percutaneous intervention treatment: endovascular therapy for abdominal and thoracic aortic aneurysms
- Surgical treatment: Open surgery for thoracic and abdominal aortic aneurysm
- Second opinion
- Pre- and post-operative rehabilitation



CONGENITAL CARDIOPATHY IN ADULTS

SERVICES



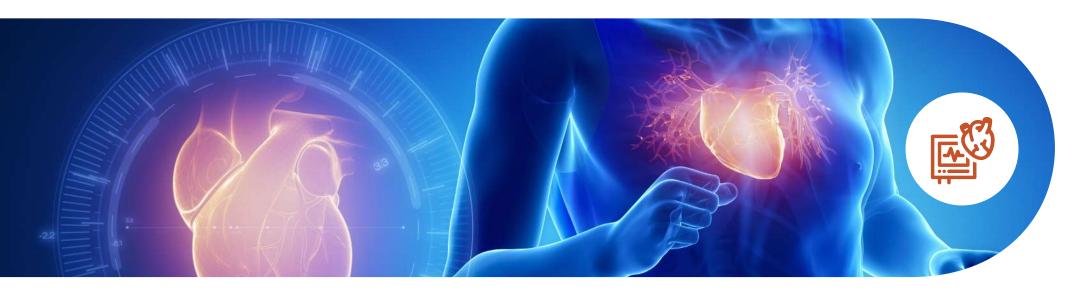


Percutaneous intervention treatment: implantation of occludes for atrial septal defect, ventricular septal defect, alcohol septal ablation in hypertrophic cardiomyopathy (myectomy), trans catheter pulmonary valve implantation

Surgical treatment: Repair and palliative surgery for congenital heart disease, valve surgery, surgery for hypertrophic cardiomyopathy (myectomy)

Second opinion

itation Pre- and post-operative rehabilitation

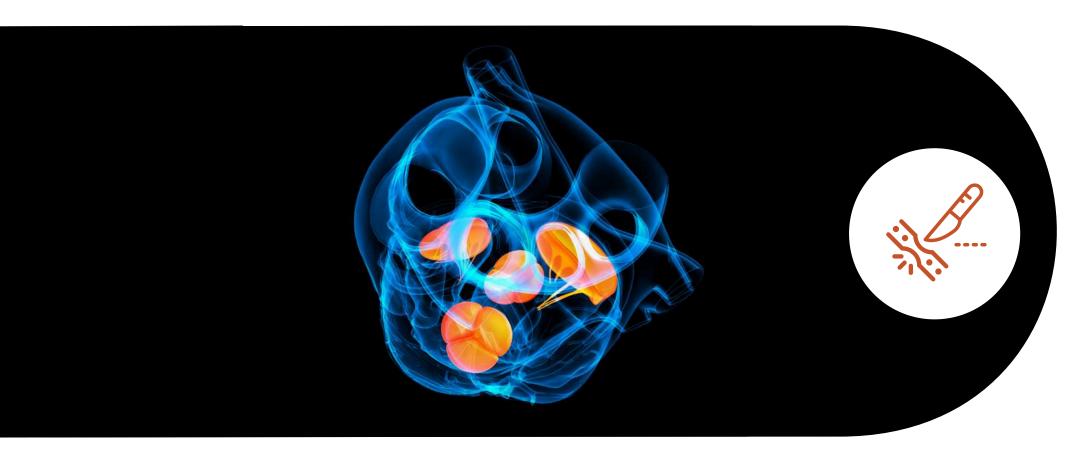


SPORTS CARDIOLOGY

SERVICES

- Imaging diagnostics: echocardiography, stress test, CT scan, cardiac MR, catheterization, electrophysiological studies
- Pre-participation screening
- Evaluation of exercise capacity in athletes with heart disease (assessment and counselling)
- Specific care and treatment of cardiovascular disease in professional and amateur athletes
- Second opinion





MINIMALLY INVASIVE CARDIAC SURGERY

Minimally Invasive Mitral Repair

The Hospital Clinic of Barcelona was one of the first centers in Europe to initiate a program of minimally invasive mitral valve surgery back in 1997. Since 2012 we started the program of advanced minimally invasive mitral repair and currently we are able to offer a minimally invasive repair to the vast majority of patients requiring a surgical intervention on their mitral valve with state-of -the-art technology and results. We are able to perform this type of repair even in the most difficult subsets of indications such as elderly patients, reoperations, endocarditis and Barlow's disease.



Activity

Our Hospital is a leading institution in mitral valve repair, both nationally and internationally, and has been appointed by the Spanish Ministry of Health as a nationwide center of reference for complex mitral repair uninterruptedly since 2010 when this recognition was first created, with our results being audited yearly to renew this certification. (https://www.msssi.gob.es/profesionales/CentrosDeReferencia/CentrosCSUR.htm).



Minimally Invasive Mitral Repair





DEGENERATIVE MITRAL REGURGITATION OR MITRAL PROLAPSE

- Includes fibroelastic deficiency, mitral prolapse and Barlow's disease
- It's the most common valve disease and the n°1 indication for mitral repair in Europe
- Near 100% repair chance in our institution.



RHEUMATIC MITRAL DISEASE

- As a consequence on rheumatic fever many years before mitral dysfunction appears
- May cause mitral stenosis (narrowing), regurgitation or both
- Most frequently requires valve replacement with a prosthesis: mechanical or biological



FUNCTIONAL AND ISCHEMIC MITRAL REGURGITATION

- As a consequence of a diseased cardiac muscle, most commonly after a myocardial infarction
- In most cases the valve can be repaired



Our strategy involves a multidisciplinary team approach focused in treating this pathology to assure we achieve the best possible individual outcomes. All patients are treated by a multidisciplinary team including surgeons, anesthesiologists, cardiologists, physiotherapists and nurses, combining their knowledge and skills to provide the best possible care.

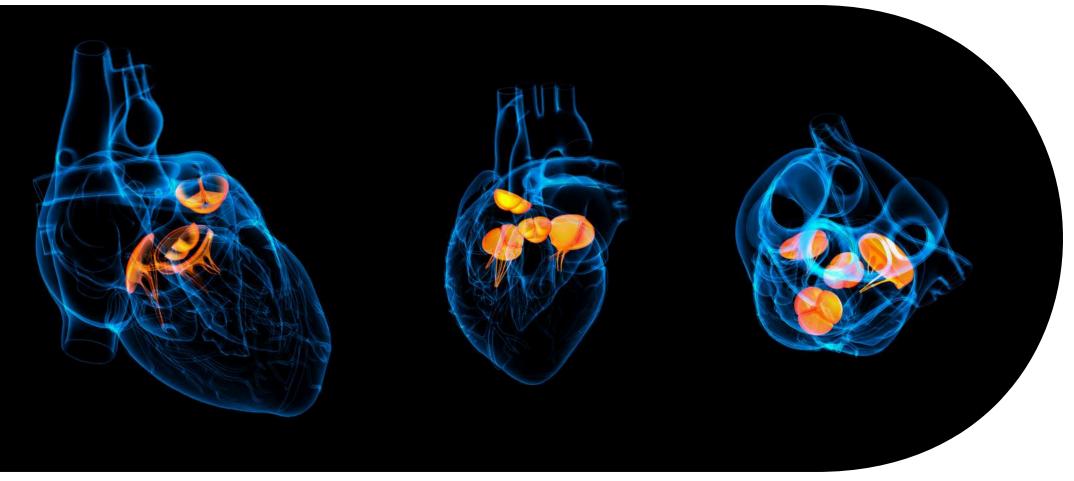




Resources

Mitral repair is an open-heart operation performed under cardiopulmonary bypass (with a heart-lung machine) and the heart arrested.

The cardiac surgery department has its own postoperative intensive care unit exclusive for cardiac surgery patients and run by our cardiac surgery staff. This way we can provide continuous surgical care 24/7 to all of our patients, including emergency establishment of extracorporeal life support.



Minimally Invasive Mitral Repair

OUR BASIC APPROACH



3-4cm incision between ribs / periareolar



No rib retraction needed (less postoperative pain)



High-Definition thoracoscopic video assistance



Cardiopulmonary bypass stablished through the femoral vessels using a 2-3cm incision in the groin



Continuous intraoperative transeshopagueal 3D echocardiography



Patients are extubated in the OR immediately after the operation



THORACOSCOPIC VISUALIZATION

- High definition intracardiac imaging (3D)
- Provides the greatest anatomical detail
- Greater surgical precision

Minimally Invasive Mitral Repair



BENEFITS

- Better cosmesis (nearly invisible in women, below breast incision)
- M
- Shorter mechanical ventilation and better respiratory function
- 45
- Less pain
- Faster return to normal activities and work
- Less blood loss and transfusions
- *
- Lesser incidence of wound infection
- No mediastinitis or sternal dehiscence



Estimated time frame



PREOPERATIVE EVALUATION

- Interview with cardiologist, anesthesiologist and the surgeon.
- Transthoracic or transesophagueal echocardiography
- Coronary angiogram (cardiac catheterization or CT-angiography)
- Thoraco-abdominal multi-slice CT



ICU STAY

2 days



HOSPITAL STAY

5 days



IN BARCELONA

10 days

Process



- Preoperative evaluation
- Surgical Consultation
- Interview with a cardiac anesthesiologist specialized in these procedures before the operation
- 4 Specifically designed and equipped operating theater
- 5 Strict postoperative follow-up at ICU and ward
- 6 Postoperative long-term follow-up of the patients in communication with the patient's local cardiologist

Our results



of our patients are complex (with anterior or bileaflet prolapse)

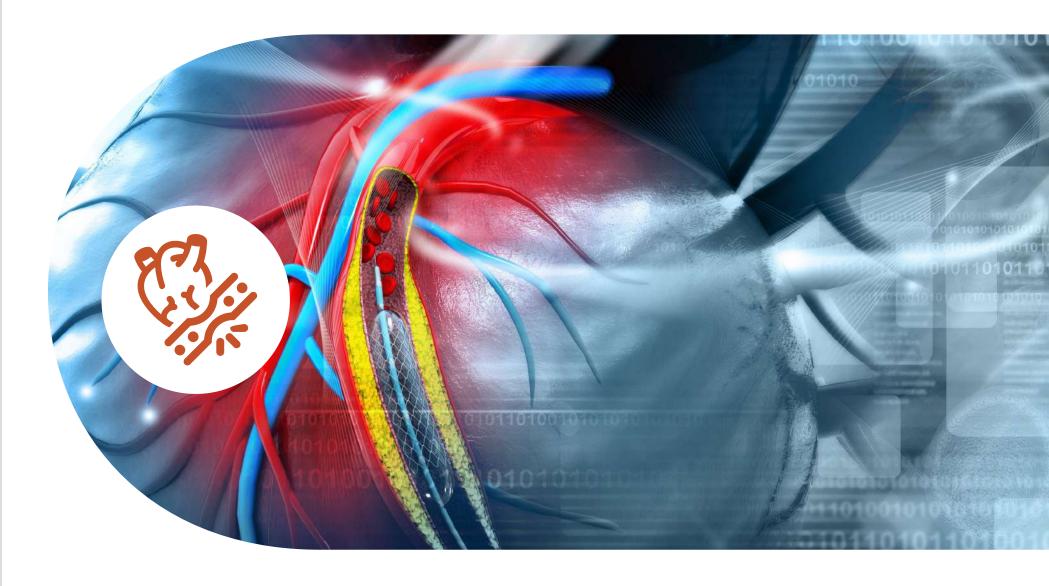






Cases with mitral prolapse

>90% freedom of recurrence 20 years after the surgery



INTERVENTIONAL CARDIOLOGY





Activity

- The treatment of cardiac structures other than coronary arteries has experienced a major development within the last 10 years. Transcatheter aortic valve implantation (TAVI), Mitral repair (Mitraclip), closure of residual para-valvular leaks after cardiac surgery and other interventions can be currently performed through catheters. Once again, our institution has led this field in Europe and offers all available techniques with a highly experience medical team.
- The experience of one of the largest and best equipped University Medical Centres in Europe





Personnel

The department comprises a strong team of professionals from various cardiac subspecialties to treat all types of heart disease.

The medical team is 100% dedicated to Hospital and patient care. Our doctors are international opinion leaders in percutaneous cardiology interventional.

The medical team have extensive experience in the care of cardiac patients and committed to the intervention process but also to the post-procedural care.

The most prestigious and devoted professionals, researchers and teachers in the Cardiovascular field Known to deliver a very professional, individualized and friendly nursing care to all patients



Lines of care



CORONARY ARTERY DISEASE

Cardiac ischemic disease is one of the leading causes of death in developed countries. The treatment of coronary narrowing/occlusions with catheters has become a first-line treatment in several situations. Our center has pioneered and led this field during the last 30 years offering last generation treatments for ischemic disease.



VALVE DISEASE (TAVI, MITRACLIP...)

The treatment of cardiac structures other than coronary arteries has experienced a major development within the last 10 years. Transcatheter aortic valve implantation (TAVI), Mitral repair (Mitraclip), closure of residual para-valvular leaks after cardiac surgery and other interventions can be currently performed through catheters. Once again, our institution has led this field in Europe and offers all available techniques with a highly experience medical team.



LEFT ATRIAL APPENDAGE OCCLUSION

Left atrial appendage occlusion is probably one of the interventional techniques with a higher expansion worldwide. This technique is mostly oriented to patients with atrial fibrillation in whom oral anticoagulation might produce or has already produced a health problem (mostly bleedings).



ADULT CONGENITAL DISORDERS

Our hospital has created a strategic alliance with the reference kids hospital Sant Joan de Déu. All congenital patients over 18 years are followed and treated in our institution. Medical cooperation between adult and pediatric interventionalists is a pivotal factor to achieve the excellence in this kind of procedures.



TEACHING / RESEARCH

- Course organization, International fellowship, Invited lectures.
- The Hospital Clinic of Barcelona has always shown by a major interest in research projects. Our medical staff has contributed and published in several national and international medical journals in all aforementioned fields.
- >100 research manuscripts published in national/international journals per year.

Equipment



HOSPITAL ROOMS



DAY HOSPITAL



SPECIFICALLY
ORIENTED INTENSIVE
CARE UNIT



HIGHLY TRAINED INTERVENTIONAL CARDIOLOGY TEAM



LAST GENERATION CATHETERIZATION LABS



STATE OF THE ART IMAGING MODALITIES:
3D echocardiography,

3D echocardiography, cardiac tomography and magnetic resonance.



24 HOURS HEART TEAM:

Surgeons, anesthesiologists, imaging experts and clinical cardiologists.







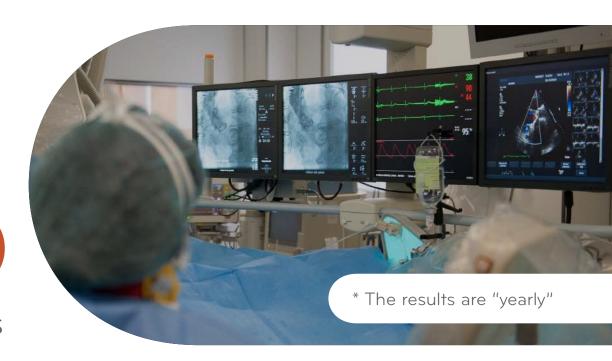
- A Clinical Evaluation
- B Complete pre-procedural test/ imaging
- Non-invasive cardiac intervention
- Strict post-operative follow-up with the safest surveillance protocols depending on the type of intervention

Coronary Artery Disease:



3.500

Diagnostic catheterizations





1.500

percutaneous coronary interventions



550

primary angioplasties in acute myocardial infarction

Structural Heart Disease:





1st

Percutaneous tricuspid valve repair in Spain



1st

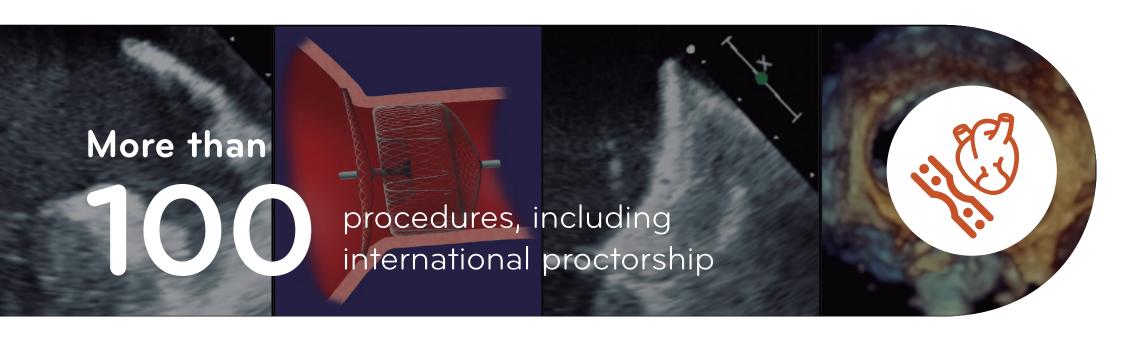
Mitraclip implantation in Catalonia



Leading

structural program in Spain

Left atrial appendage occlusion:





100% of procedural success



<1% pericardial effusion



0% in-hospital mortality

Adult Congenital Disorders

More than



procedures last year



* The results are "yearly"



0%

in-hospital mortality



Reference center

for adult congenital disorders for all Spain (CSUR)



0%

complications



Enhanced safety

Combined staff of adult and pediatric interventional cardiologists



SPORTS CARDIOLOGY

Since the creation of the Group of sports cardiology at the Hospital Clinic in 2009 to present, its clinical, teaching and research activity has become one of the European references and opinion leader in this area. The approach of a joint evaluation by a multidisciplinary team makes our experience unique. The multidisciplinary team include sports physicians, non-invasive cardiologists mastering the area of cardiac imaging and invasive cardiologists whith internationally renown expertise in the field of arrhythmia. Additionally, the back of the whole team at the Cardiovascular Institute provides all the potential therapies currently available such as percutaneous or minimally invasive surgery for congenital heart disease, arrhythmia ablation or valve disease treament.

Our team addresses not only the prevention of heart disease in athletes by our preparticipative screening programmes but also, the personalized treatment of cardiac disease in athletes, a subset of subject who deserve and specific and tailores approach adapted to their needs.





Activity

Our group has evaluated more than 6,000 competitive and amateur athletes during the last 6 years, from all nacionalities and etnies. Our partnership with the Catalan Council for Sports (Catalan Government) and FC Barcelona has provided the opportunity to quickly be imbedded in the world of high performance sport.

A regular and routine screening is performed at the corresponding sportive centers and whenever an abnormality is detected, the subject is transferred to our Cardiobvascular Institute where a second line of tests and specific treatments can be provided.





Lines of care



PRE-PARTICIPATION SCREENING

The assessment of each athlete by a cardiac evaluation including interview, physical exam, 12-lead ECG, echocardiogram and stress test; this comprehensive evaluation rules out most of the diseases that cause sudden death in athletes. Our group has extensive experience in this area.



TREATMENT OF HEART DISEASE IN ATHLETES

Our Unit has extensive experience in the treatment of heart diseases in athletes taking into account the special characteristics of this group and always considering the equilibrium between willingness of continuing sport practice and the safety of the athlete:

- Arrhythmias
- Valve Disease
- Congenital heart Disease
- Cardiomyopathy



TEACHING

- Course organization
- Fellowship
- Dissemination activities among sports physician and exercise physicist



RESEARCH

- · Adaptation of the heart to exercise
- Pre-participation screening; utility, teaching and safety
- Potential harm on the heart:
 - Atrial fibrillation pathogenesis; research in animal model (marathon rat) and athletes
 - Ventricular fibrosis

Equipment



ECHOCARDIOGRAPHY
WITH STATE OF THE
ART MODALITIES: 3D,
strain imaging, Tissue
Doppler Imaging



EXERCISE ECHOCARDIOGRAPHY



TREADMILL STRESS
TESTCARDIAC
MAGNETIC RESONANCE



CARDIAC TOMOGRAPHY

Non invasive

coronariography



ELECTROPHYSIOLOGICAL
STUDY
Diagnosis & treatment

Diagnosis & treatmen[.] arrhythmyas



AMBULATORY CONTINUOUS ECG MONITORING



CORONARY ANGIOGRAPHY



CARDIAC SURGERY AND PERCUTANEOUS THERAPY OR



Process



- ONE STOP CLINIC FOR PRE-PARTICIPATIVE SCREENING 1 HOUR EVALUATION
 - Focused clinical interview and physical examination
 - 12-lead ECG
 - Echocardiography
 - Stress test
- 2ND LINE (WHENEVER ABNORMALITIES ARE FOUND IN STEP 1) 1 WEEK
 - Cardiac magnetic resonace
 - Cardiac Tomography
 - Electrophysological study
 - · Ambulatory continuous ECG monitoring
- C EXPERT OPINION

Our results





GLOBALLY



investigation

Requires 2° line of



1 of 160

Requires specific treatment for continuing sport practice



1 of 350

Had a severe heart disease and was disqualified for sport practice





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