

### [Body mass index in adult congenital heart disease.](#)

Brida M, Dimopoulos K, Kempny A, Liodakis E, Alonso-Gonzalez R, Swan L, Uebing A, Baumgartner H, Gatzoulis MA, Diller GP.

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#### **Take Home Points:**

- ACHD patients with a higher BMI experienced a lower mortality.
- The association with BMI and mortality is more pronounced in symptomatic patient with complex defects, suggesting that cardiac cachexia may be contributing.
- Weight loss in complex ACHD patients is linked to higher mortality.

#### **Commentary from Dr. Tabitha Moe (Phoenix), section editor of ACHD Journal Watch:**

This is a nice study from groups in the UK and Germany evaluating their cohort of ACHD patients, and they evaluated 3,069 patients with a median age of 32.6 years. These patients were evaluated between 2000-2015. In their cohort 6.2% of the patients were classified as underweight, and 14.6% were obese. By univariable Cox analysis higher BMI values were associated with lower all-cause mortality. This effect continued despite adjustment for age, complexity of defect, cyanosis, and objective exercise capacity. This article did not highlight the previously documented associations between congenital heart disease and diabetes or the relationship with an increasing BMI. There are other additional challenges with high BMI patients including poor wound healing during post-procedural and post-operative states, and difficulty with testing such as table weight limits and magnet diameter limits on cardiac MRI procedure tables. This study lends itself nicely to additional investigations to determine correlations between congenital heart disease and weight related comorbidities as documented in the noncongenital cohort.