

presenting with therapy-refractory circulatory failure in emergency situations, joint efforts are warranted to analyze the results of mobile ECLS emergency support in a variety of different settings in order to improve existing facilities and guide the implementation of future mobile ECLS programs.

Hug Aubin, MD

\*Artur Lichtenberg, MD

Alexander Albert, MD

\*Department of Cardiovascular Surgery

Heinrich-Heine-University Düsseldorf

Moorenstrasse 5

40225 Düsseldorf, Germany

E-mail: [artur.lichtenberg@med.uni-duesseldorf.de](mailto:artur.lichtenberg@med.uni-duesseldorf.de)

<http://dx.doi.org/10.1016/j.jchf.2016.07.010>

Please note: The authors have reported that they have no relationships relevant to the contents of this paper to disclose.

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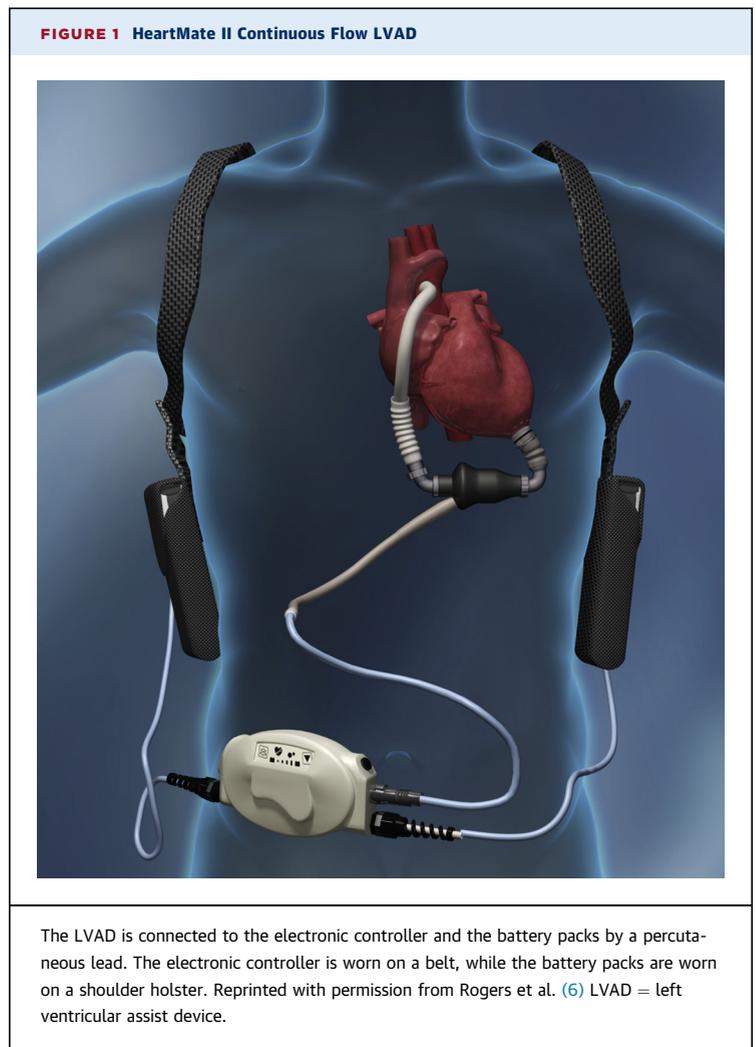
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## Redesigning Ventricular Assist Devices to Protect Ethnic Minorities



### Changing Design With Changing Times

Approximately 5.7 million adults in the United States are living with heart failure (1). For patients with advanced heart failure who are too ill to wait for a donor or who are not eligible for a heart transplant because of age or other medical problems, ventricular assist devices (VADs) offer life-saving therapy (2,3). VADs were initially designed as a temporary support to bridge patients to heart transplantation, but in recent times, these devices are increasingly being used as lifetime support or destination therapy (4). With continual improvements in device design along



with advances in medical and surgical management, VAD patients can now return home, to work, and to their communities with fairly good quality of life. The durable VADs have battery pockets and a control unit (Figure 1), which needs to be carried around by the patient at all times. Recently, during an encounter with a VAD patient of African American ethnicity, the patient expressed some unique concerns.

When asked “Mr. X how are you doing today?” he replied “I’m doing well, but there is something I need to tell you—recently while I was at a restaurant, people were staring at me from their tables, which has never happened before. My friend pointed out that my VAD equipment looked like a shoulder holster.”

Mr. X went on to say, “In the light of recent shootings of African Americans, I personally feel unsafe wearing this device.”

One could sense his fear of being mistaken for wearing an armed device rather than a life-saving one. As physicians, we strive to improve the longevity and quality of life of our patients. In light of the unfortunate events that have happened recently in the nation, the patient's concerns were real and valid. In a recent report by the *Washington Post*, it was stated that African Americans account for 24% of those fatally shot and killed by the police, despite being just 13% of the U.S. population. Moreover, approximately 13% of all black people who have been fatally shot by police since January 2015 were unarmed, compared with 7% of all white people (5). It might be time to appeal to major VAD companies like Abiomed (Danvers, Massachusetts), HeartWare International (Framingham, Massachusetts), Thoratec (St. Jude Medical, St. Paul, Minnesota), and Berlin Heart (Berlin, Germany) to redesign their models to be less obvious, keeping current social situations in mind.

\*Shahnawaz M. Amdani, MD

\*Division of Cardiology

Carman and Ann Adams Department of Pediatrics  
Children's Hospital of Michigan  
Wayne State University School of Medicine

3901 Beaubien Boulevard  
Detroit, Michigan, 48201-2119

E-mail: [samdani@dmc.org](mailto:samdani@dmc.org)

<http://dx.doi.org/10.1016/j.jchf.2016.07.011>

Please note: Dr. Amdani has reported that he has no relationships relevant to the contents of this paper to disclose.

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