The mortality of oesophageal atresia: Results from 726 patients (1970-2013)

S King¹,²,³, A Hawley¹,³, J Brooks¹,³, M Nightingale¹, E McLeod¹, T Clarnette¹, R Taylor¹, J Crameri¹ and A Pellicano⁴

Background
The majority of oesophageal atresia patients survive through to adulthood. However, a significant minority will die, either early post-natally or later in childhood (often unexpectedly).

Aim
To establish the rate of mortality in our oesophageal atresia cohort, with emphasis upon associated factors that may predict patient demise.

Method
• Prospectively maintained databases were used to determine the rate and associations of mortality in patients born with oesophageal atresia after 1969.
• Two cohorts (historical [1970-89], contemporary [1990-2013]) were further analysed.

Results
• 726 patients were studied, of which 135 (19%) died during the 44-year period.
• The two cohorts were similar with regard to gestational age at birth and birth weight.
• The association between VACTERL and mortality was identical in the two cohorts (historical 31/84 [37%], contemporary 19/51 [37%]). (p = 1.00)
• The mortality rate of the contemporary cohort (51/396, 13%) was half of that in the historical cohort (84/330, 25%). (p < 0.0001)

Conclusions
• The mortality rate in patients with oesophageal atresia is higher than previously reported.
• Historically patients were more often palliated, commonly in the setting of an associated syndrome.

References

Oesophageal Atresia Research Auxiliary
Raising funds to ensure continued research OA/TGF including maintenance of the Nate Myers OA Database, the availability of specialty nurses and other patient and parent support initiatives. For full details see http://oara.org.au/