





Ukraine, war and cardiac surgical practice: correspondence

Amnuay Keebayoon¹, Rujittika Mungmunpantipantip²  and Viroj Wiwanitkit³ 

¹Private Academic Consultant, Samroang, Cambodia; ²Private Academic Consultant, Bangkok, Thailand and ³Department of Community Medicine, Dr DY Patil University, Pune, India

Letter to the Editor

Cite this article: Keebayoon A, Mungmunpantipantip R, and Wiwanitkit V (2022) Ukraine, war and cardiac surgical practice: correspondence. *Cardiology in the Young* 32: 1191. doi: [10.1017/S1047951122001664](https://doi.org/10.1017/S1047951122001664)

Received: 26 April 2022
Revised: 9 May 2022
Accepted: 11 May 2022
First published online: 22 June 2022

Keywords:
War; Ukraine; cardiac

Author for correspondence:
Rujittika Mungmunpantipantip, Private Academic Consultant, 11 Bangkok 112, Bangkok 103300, Thailand. Tel: +6622564567 Ext 88; Fax: +6622564567 Ext 88; Email: rujittika@gmail.com

Dear Editor, we read the publication on “Ukraine: a cardiac surgical perspective.”¹ War is an unwanted occurrence that has the potential to wreak havoc on the healthcare system. According to Novick et al., “Lost in this pandemonium are children in need of immediate medical attention.”¹ “All military initiatives are tremendously resource-intensive, and the patients that we all live to aid, as well as their healthy contemporaries, are therefore severely disadvantaged.” It is feared that new health concerns, such as disease outbreaks, would emerge as a result of the present conflict in Ukraine, and that many people will suffer.² We would like to share some prior experiences from our area. A protracted, decades-long battle rages throughout Indochina. All medical facilities were destroyed during the war, and there was no standard surgical care. Despite the lack of data on paediatric sickness throughout the conflict, research among refugees reveals that it was a major concern. According to a study on paediatric refugees in the United States of America, Hmong boys and Cambodian and Hmong girls had higher mean diastolic blood pressures than blacks and whites of the same sexes.³ It has been suggested that hypertension and associated cardiovascular disease could become a major issue among Southeast Asian refugees.³ For refugees, access to health care is frequently a problem. The language barrier became the greatest challenge for paediatric refugees getting proper health treatment, according to an Australian study of Indochina war refugees.³ Some patients sought non-standard alternative care instead of standard care. The lessons learned from our experiences in Indochina can be used to emphasise the significance of having a plan in place to deal with any potential paediatric cardiovascular problems among the current Ukraine refugees. Last, we hope that peace will return to Ukraine soon

Acknowledgements. None.

Financial support. This research received no specific grant from any funding agency, commercial or not-for-profit sectors.

Conflict of interest. None.

References

1. Novick WM, Mavroudis C, Jacobs JP, Karl TR. Ukraine: a cardiac surgical perspective. *Cardiol Young* Apr 2022; 25: 1–513.
2. Mungmunpantipantip R, Wiwanitkit V. Science, war and current disease outbreak. *Science* Mar 2022; 375: 1071. DOI [10.1126/science.abp8817](https://doi.org/10.1126/science.abp8817)
3. Munger RG, Gomez-Marín O, Prineas RJ, Sinaiko AR. Elevated blood pressure among Southeast Asian refugee children in Minnesota. *Am J Epidemiol* 1991; 133: 1257–1265.