1. Heart transplant in adults with congenital heart disease (ACHD) has increased 41% since 1999.

2. More adults are now being seen with late complications (heart failure [HF], for example) because of advances in medical and surgical care of children with CHD.

3. This scientific statement is an update on heart transplant and mechanical circulatory support for CHD.

4. There have been more adult CHD HF admissions in recent years, and for survivors CHD complexity has increased.

5. The surgical procedure of choice for those eligible patients with severe advanced HF continues to be heart transplantation.

6. A growing number of heart transplant recipients are ACHD patients. The wait list time (and mortality) while on the wait list is longer for CHD patients.

7. Those ACHD patients on waiting lists die from cardiovascular causes (sudden and due to HF) more often than adults with acquired HF.

8. “General indications for transplant in children with CHD overlap with other population groups and include chronic dependence on inotropic therapy, mechanical ventilation, or MCS; malignant arrhythmias unresponsive to therapy; severe HF symptoms despite optimal medical/surgical therapy; growth failure; or unacceptable quality of life from heart disease.”

9. “Although patients with CHD are at higher risk early post-transplant, long-term outcomes for CHD patients are superior to those patients transplanted for other etiologies. They need multi- and interdisciplinary evaluation and care, both pre- and post-transplant, and it is important that patients with CHD and HF be referred early for consideration of advanced therapies.”

10. The plan for all patients with end-stage CHD should include palliative care.