

The assessment of patients' perception of risk was subjective and qualitative, based on their understanding of the risks posed by the pandemic to their health, and active engagement in minimizing risk, predominantly by practicing strict social distancing, which has, nowadays, become one of the pillars of our fight against COVID-19. Categorization of risk was also empirical; yet, in the absence of data, it is the approach adopted by national and international ACHD societies, who have produced lists of conditions that could predispose patients to complications from COVID-19, which are based on expert consensus. Given the importance attributed to these preventive measures in the initial (and later) phases of the pandemic, we felt that patient risk perception, although poorly standardized, can play a significant role in shaping the outcomes and the impact of the disease on this population.

Conclusions

A relatively low COVID-19-related morbidity and mortality were observed at 6 weeks from the start of the outbreak in our Region, one of the hardest hit areas in Europe. Measures to protect the most complex and vulnerable individuals in our society, including many of our ACHD patients, are crucial, until a vaccine will be developed. All ACHD centers must provide support and care for their patients in this difficult time, educating them on the precautions necessary to minimize risk and the impact of this pandemic.

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