exceed elective hospital admissions. There is a high burden of care for patient and healthcare provider with the traditional outpatient model. The Covid-19 pandemic necessitated provision of ambulatory care in a different way and should encourage development of a new more patient-centred approach to ambulatory care delivery in ACHD.

Conflict of Interest None

23 AUTO MACHINE LEARNING AND ENSEMBLE APPROACH FOR RIGHT HEART FAILURE SURVIVAL PREDICTIONS WITH PRIMARY PULMONARY HYPERTENSION

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Background Primary pulmonary hypertension (PPH) is an underlying cause of a significant proportion of mortalities attributed to cardiovascular diseases with right ventricular (RV) failure a universally recognized sequela. Various studies have demonstrated the importance of early diagnosis and subsequent initiation of guideline-directed medical therapy as a predictor of RV failure. Therefore, the current state-of-the-art (SOTA) among auto-machine learning (ML) platforms were explored to synthesize models that accurately predict RV failure in PPH.

Methods MLjar is the contemporary SOTA among auto ML platforms for classification tasks. It was incorporated with the ensemble approach (EA) to predict RV failure in a cohort of 516 PPH patients (79% women). The models were developed using the established classification algorithms (both with and without FUT) and compared in terms of F1, MCC, ACC, and AUROC.

Results Upon establishing the training parameters without FUT (model 1), an ensemble of NN and RF algorithms achieved the highest AUROC of 92%, training with FUT (model 2), an ensemble of Llr and RF algorithms demonstrated the highest AUROC of 90% while predicting RV failure. The contemporary models outperformed the model developed by Shad et al. in all aspects except the ACC score.

Conclusion The use of the auto ML algorithms and incorporating EA significantly enhances the accuracy and precision of ML models predicting post-PPH RV failure. These models can potentially be incorporated in PPH management protocols to achieve instantaneous risk stratification that could decrease the associated mortality.

Conflict of Interest None

24 AN EVALUATION INTO THE COMPLIANCE OF IRON TABLETS IN ADULTS WITH CONGENITAL HEARTS DISEASE AND IRON DEFICIENCY ANAEMIA

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Two patients had pulmonary atresia with ventricular septal defect, both had undergone biventricular repair, one following unifocalisation of major aorto-pulmonary collaterals and the others following shunt surgery. One patient had pulmonary atresia with intact ventricular septum and one had tricuspid and pulmonary atresia. Both were palliated with shunts alone.