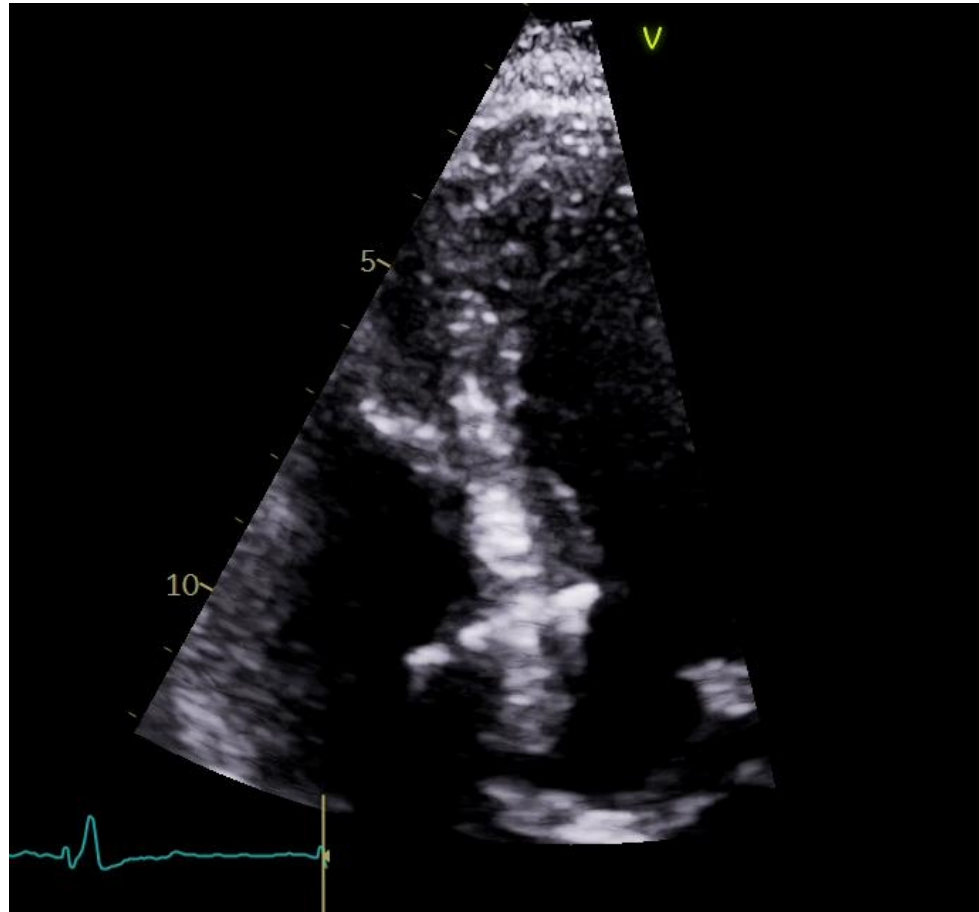
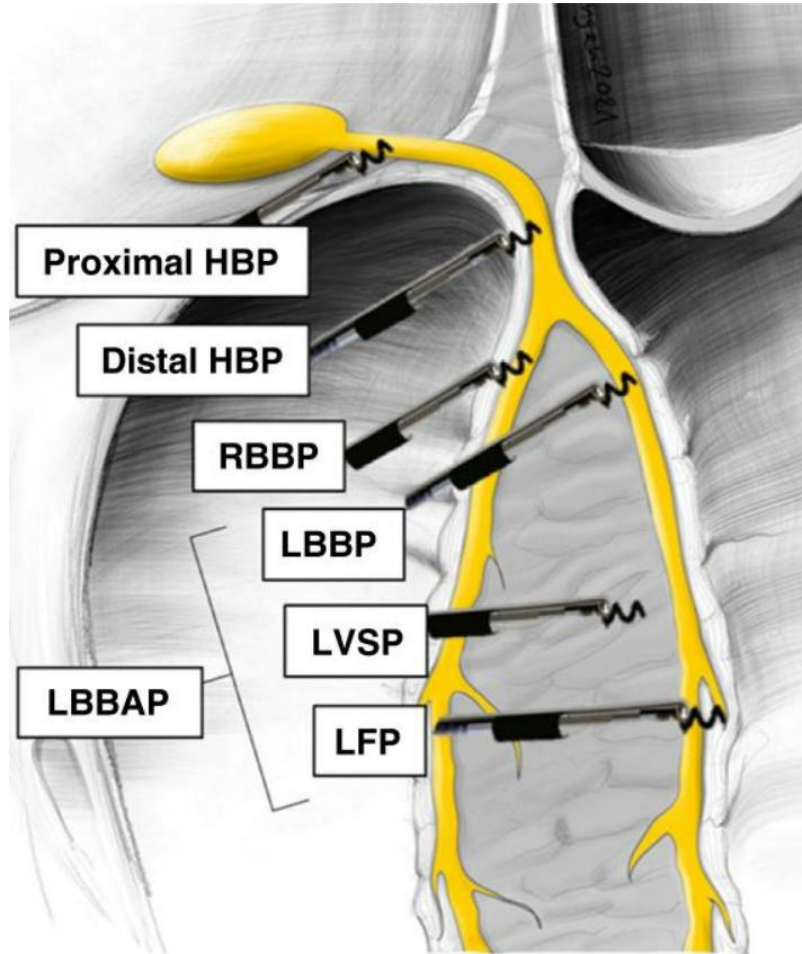


Resynchronizace pacientů s LBBB pomocí LBBAP vede k reverzní remodelaci LK a regresi komorové dyssynchronie a třídy NYHA



J. Mizner, T. Kníže, L. Povišer, M. Marish, L. Rademakers (Catharina Ziekenhuis, Eindhoven), K. Čurila

Úvod - Stimulace převodního systému a CRT



HBP = His bundle pacing
LBBP = Left bundle branch pacing
LVSP = Left ventricular septal pacing
LFP = Left fascicular pacing
LBBAP = Left bundle branch area
pacing
RBBP = Right bundle branch pacing

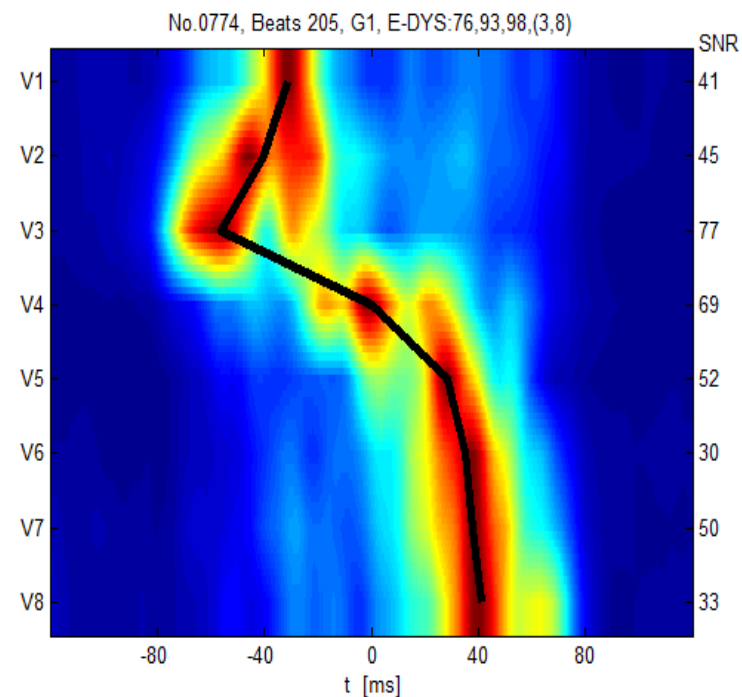
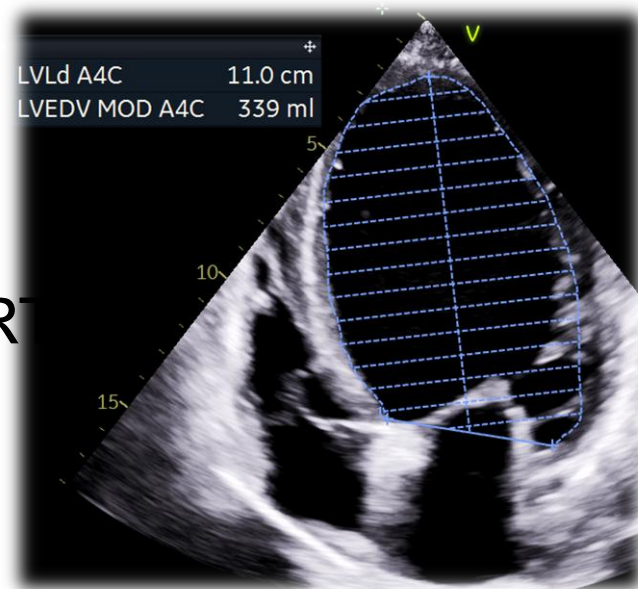
Burri et al. 2022, EP Europace

Cíle:

1. Zhodnocení reverzní remodelace LK při CRT pomocí LBBAP

1. Zhodnocení komorové dyssynchronie

2. Zhodnocení symptomů (NYHA)



Metodika – implantační centra

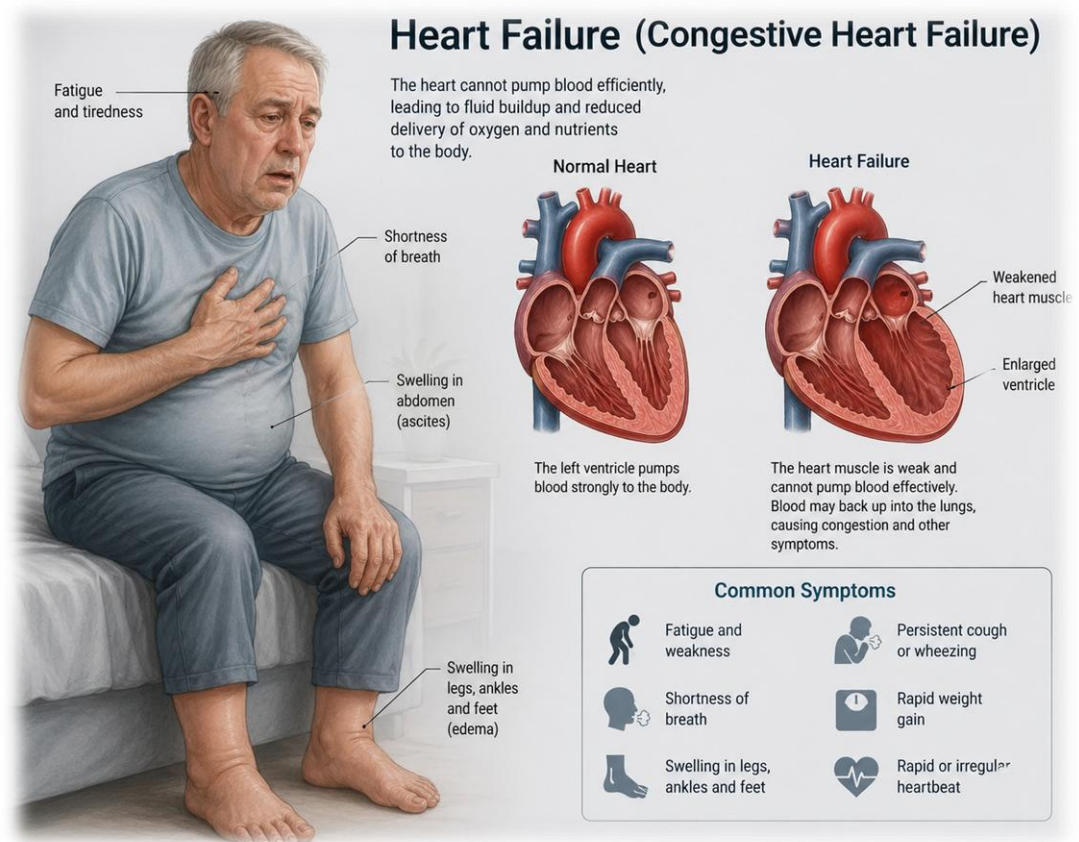


catharina
een santeon ziekenhuis

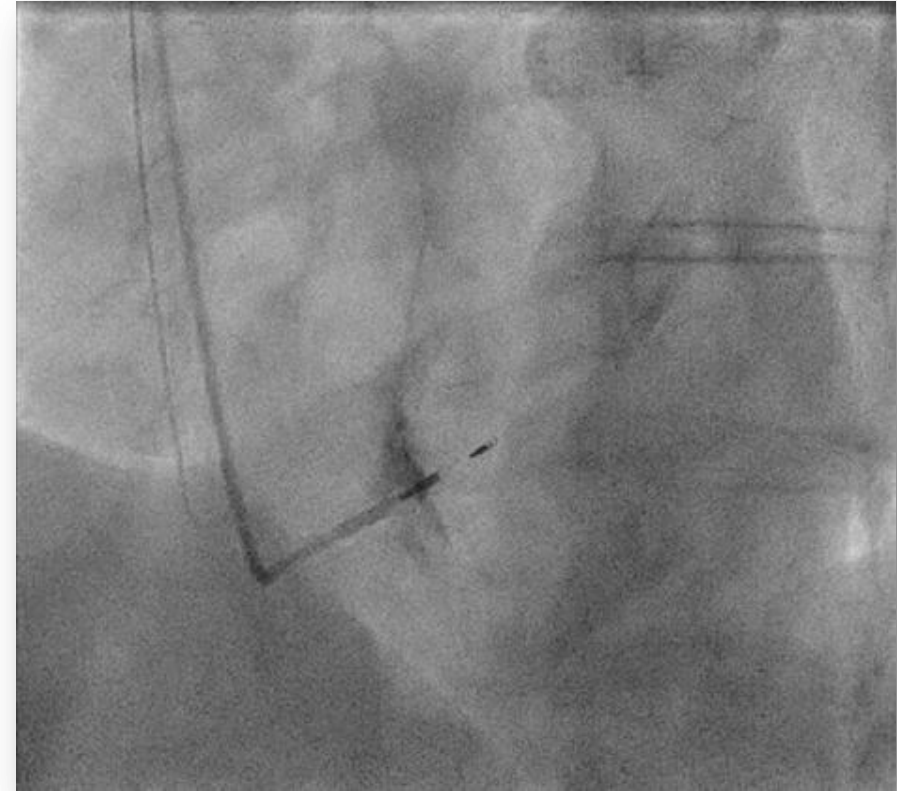
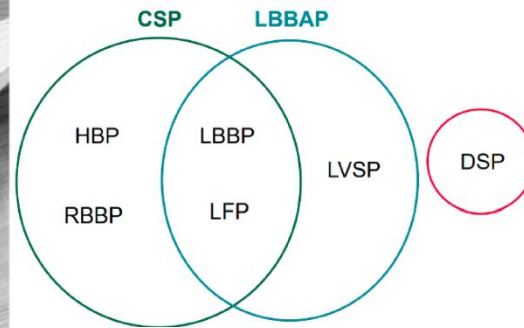
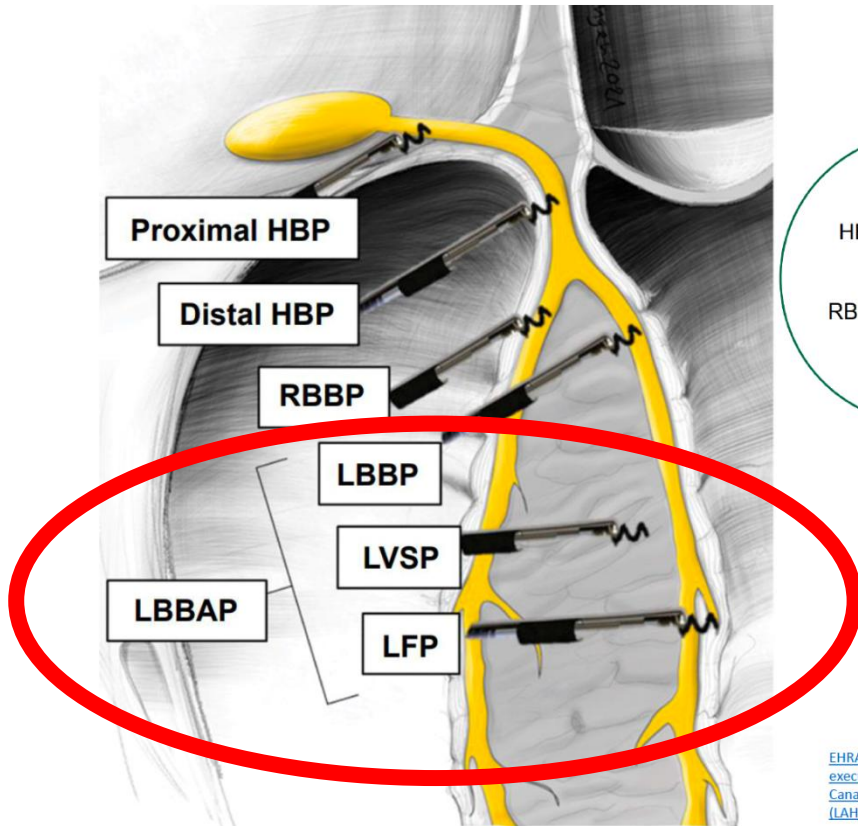


Vstupní kritéria

- Srdeční selhání
- LVEF < 40 %
- LBBB morfologie
- Úspěšná LBBAP

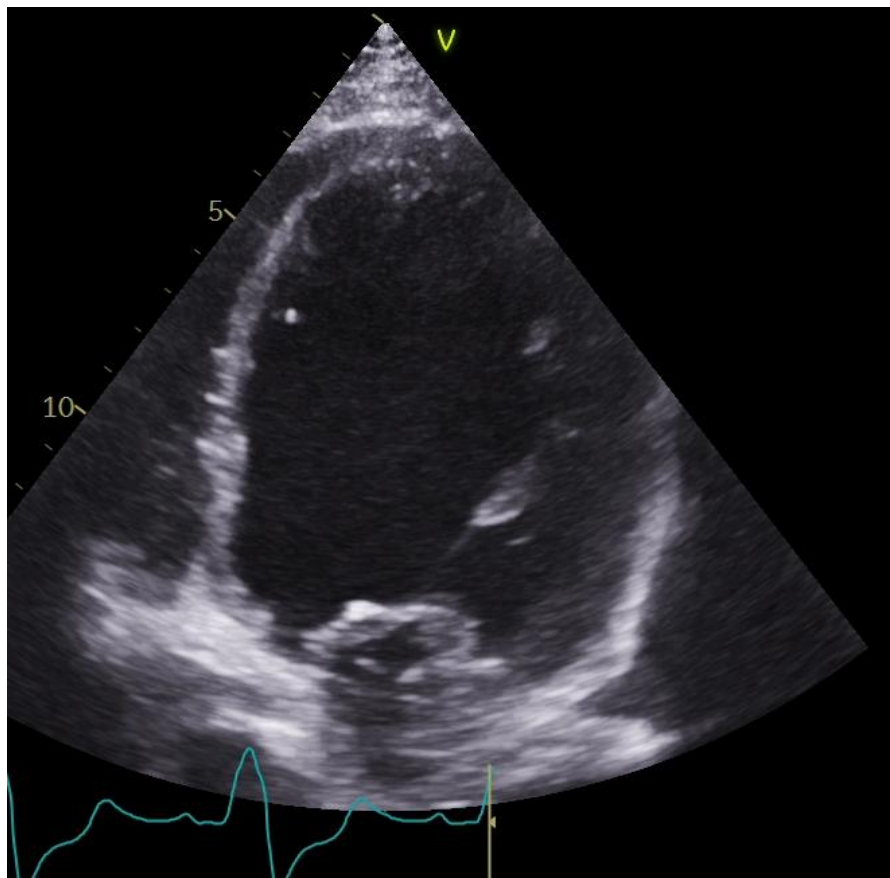


Metodika – implantační techniky

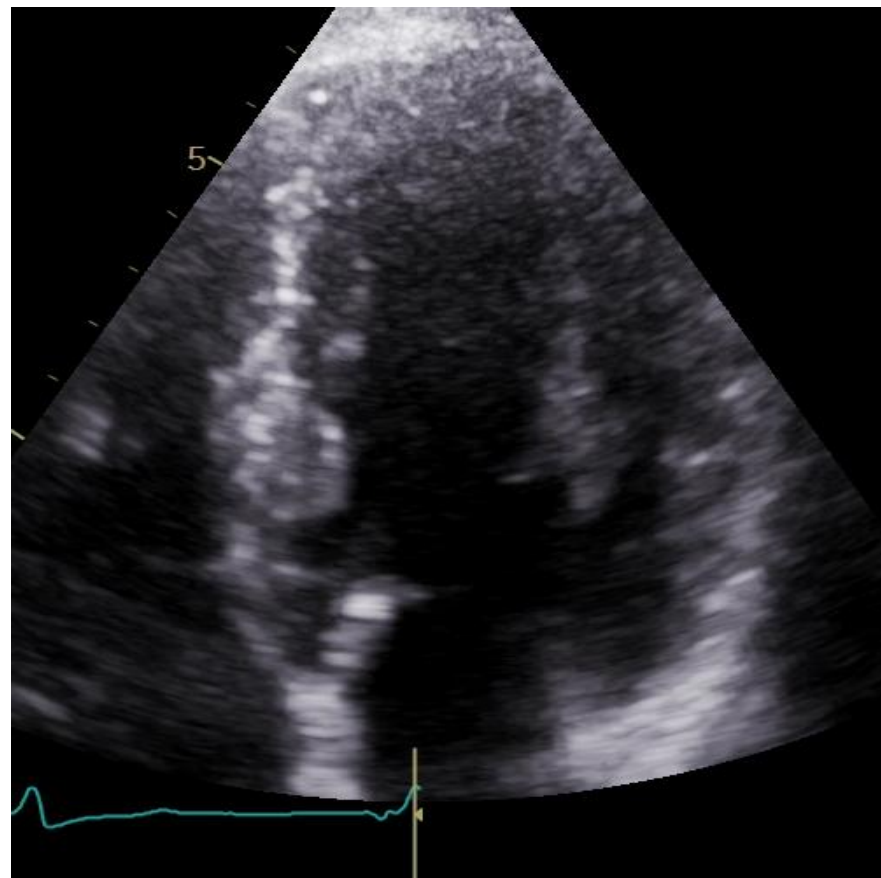


[EHRA clinical consensus statement on conduction system pacing implantation; executive summary. Endorsed by the Asia-Pacific Heart Rhythm Society \(APHRS\), Canadian Heart Rhythm Society \(CHRS\) and Latin-American Heart Rhythm Society \(LAHRS\) | EP Europace | Oxford Academic \(oup.com\)](#)

Metodika – hodnocení reverzní remodelace



Pre-CRT



6Mo Post-CRT

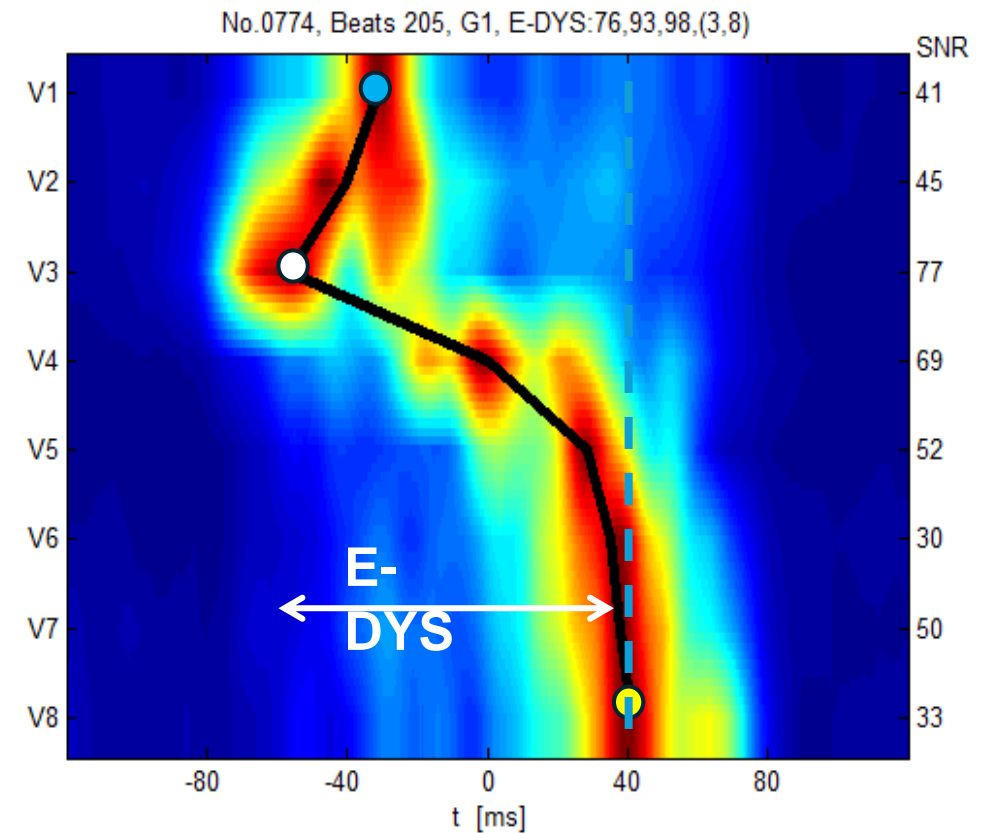




Metodika - dyssynchronie – UHF-ECG a auto QRSd



VDI Scientific
Ultra-High-Frequency ECG

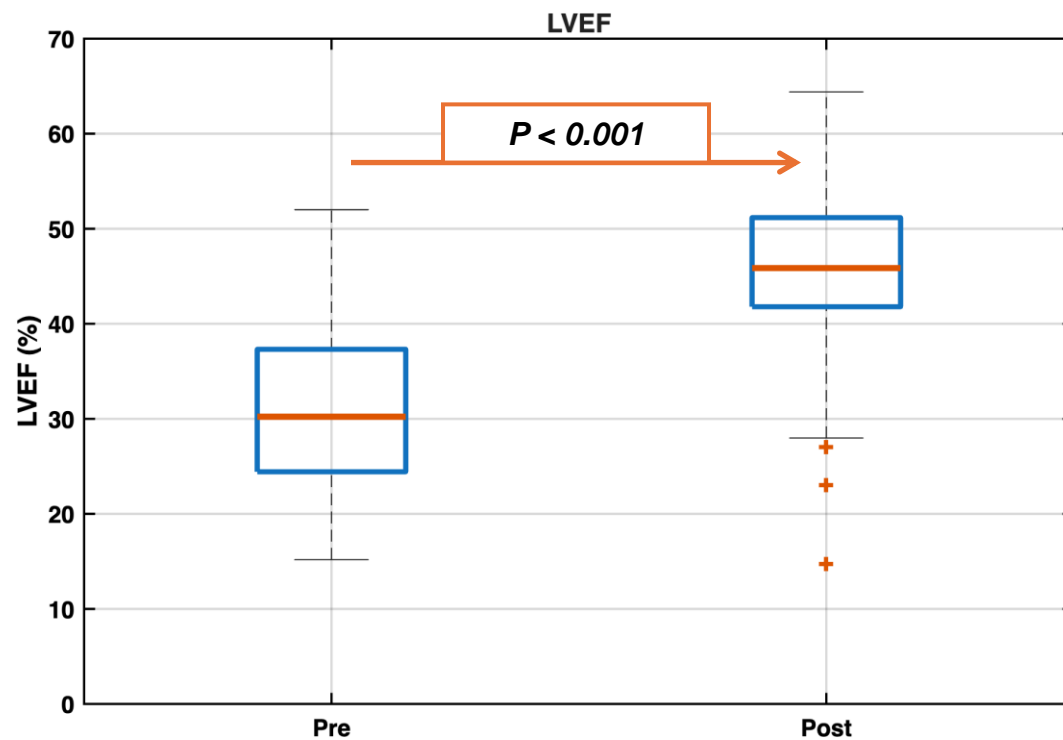
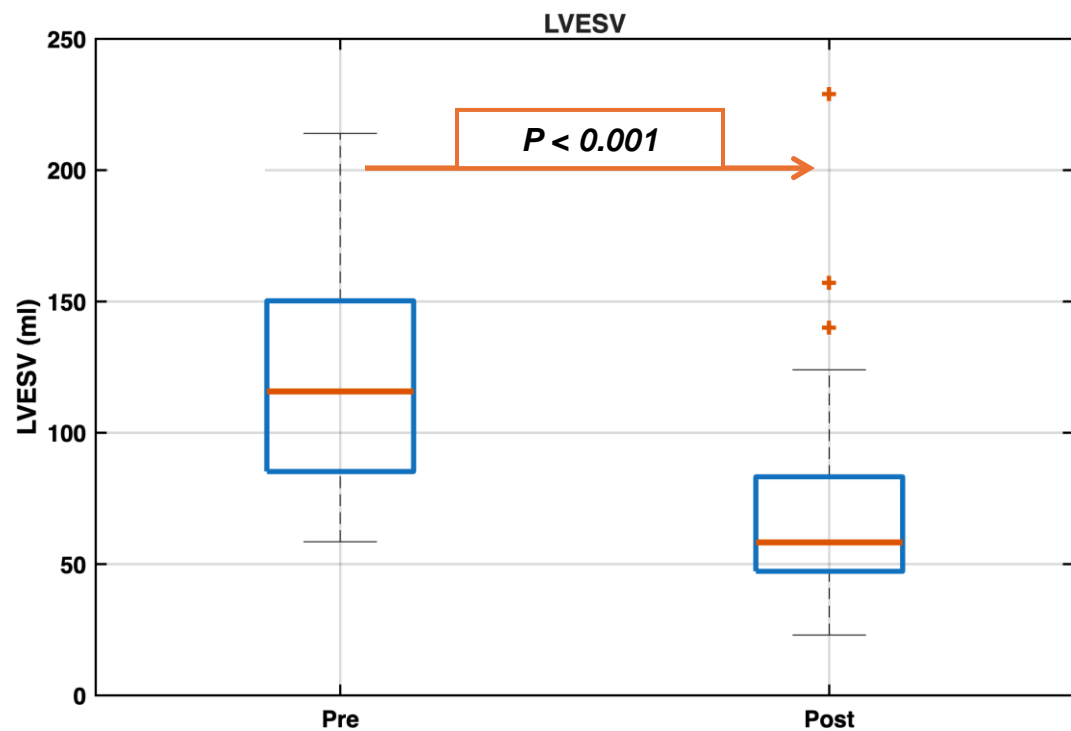


electrical e-Dys

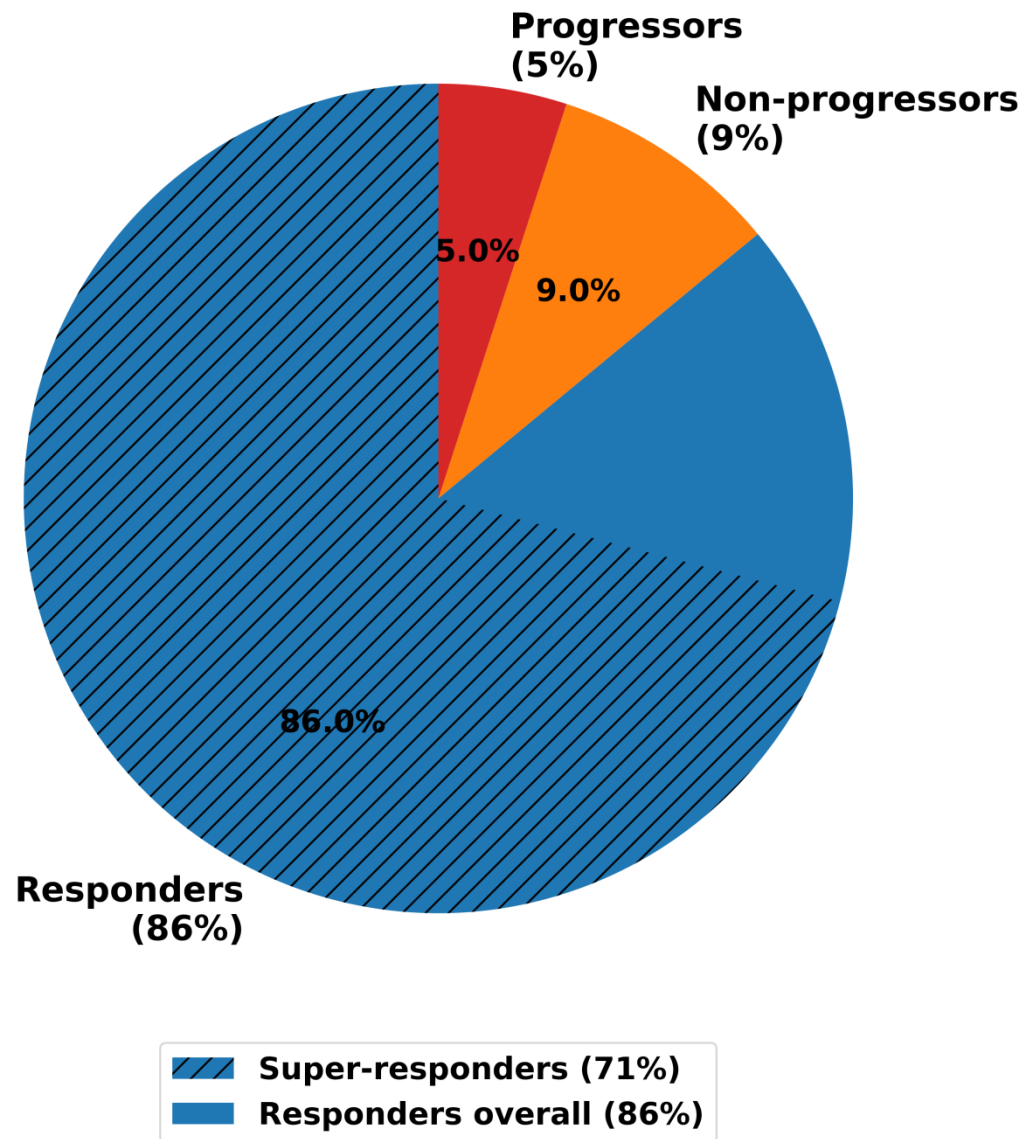
Charakteristika souboru

<u>Characteristic</u>	<u>Number (%)</u>
Number of Patients	100
Age	69 ± 11 years
Male	62 (62)
Female	38 (38)
Mean BMI	27 ± 6
Arterial Hypertension	71 (71)
Coronary Artery Disease	37 (37)
Diabetes Mellitus	35 (35)
Chronic Kidney Disease	9 (9)
Severe Valvular Disease	22 (22)
Atrial Fibrillation	36 (36)
Strauss LBBB	84 (84)
Mean Septal Thickness	11 ± 2 mm
Mean Baseline QRS Duration	172 ± 17 ms

Výsledky – reverzní remodelace

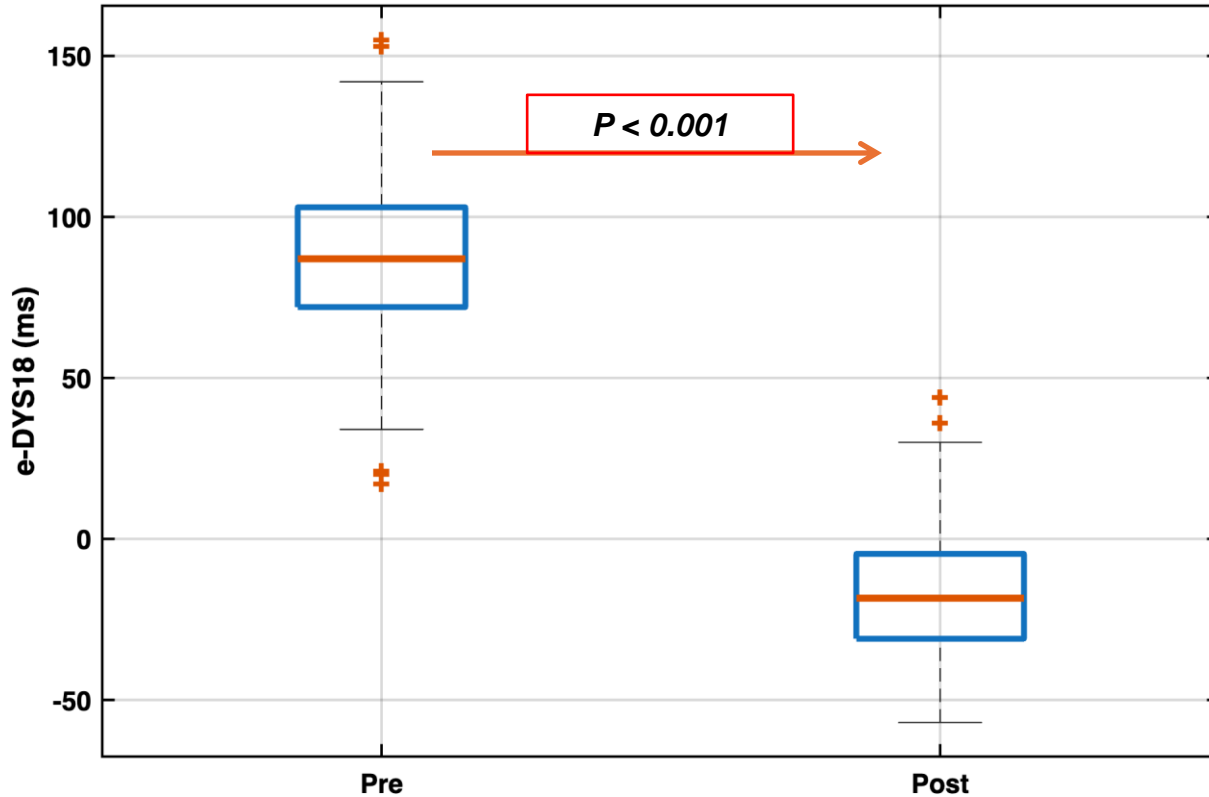


Výsledky – reverzní remodelace

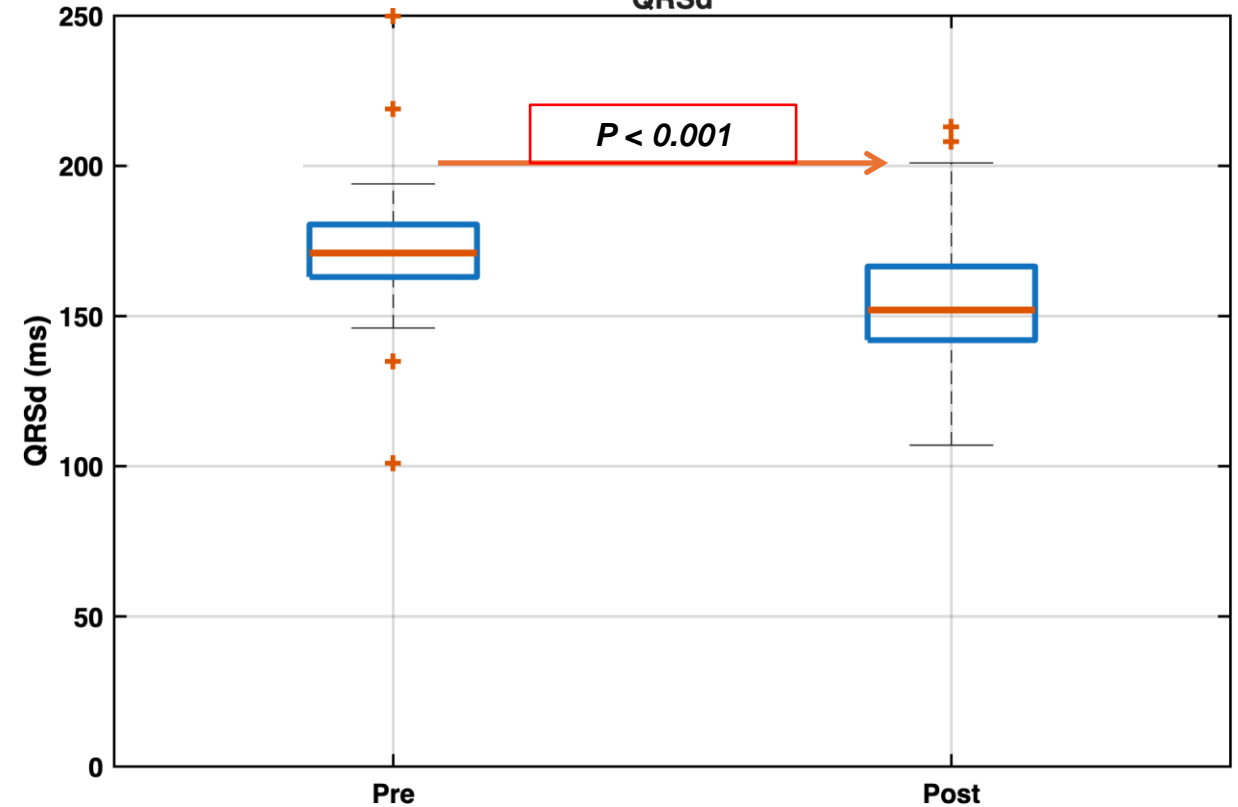


Výsledky – komorová dyssynchronie

UHF-ECG e-DYS18

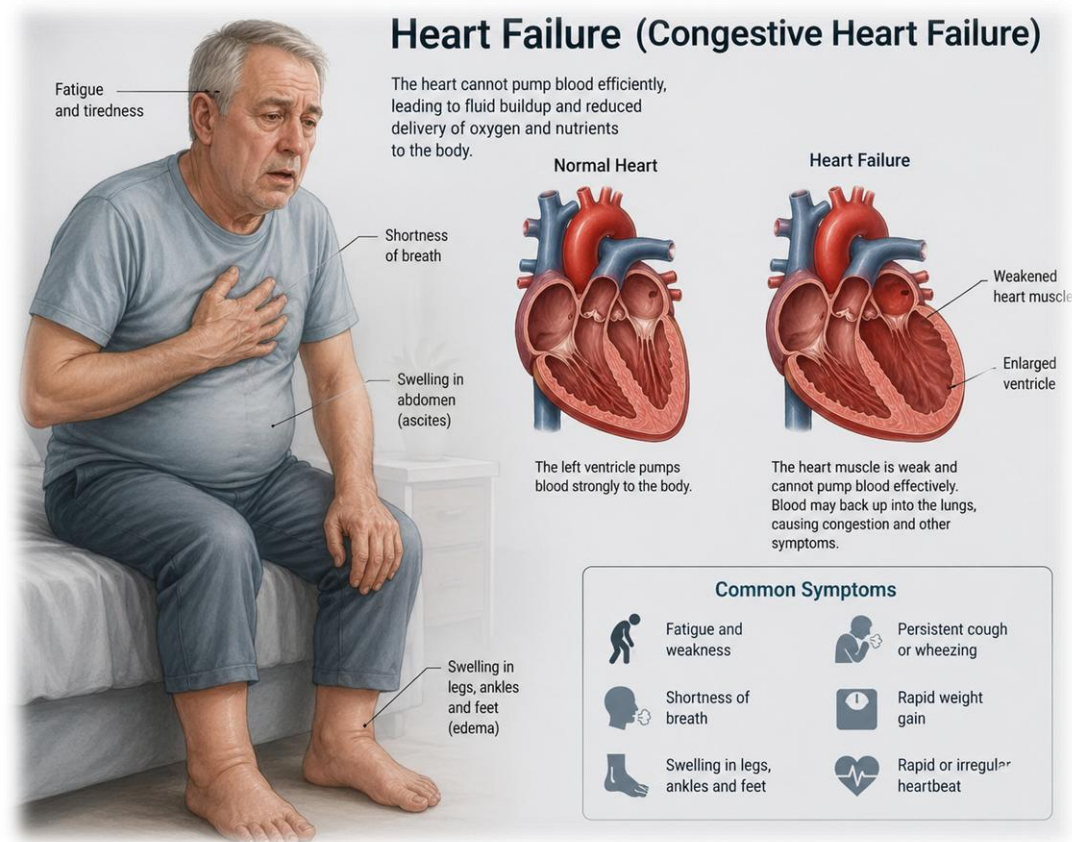


QRSd






Výsledky – symptomy

NYHA class 2.3 → 1.5



Diskuze

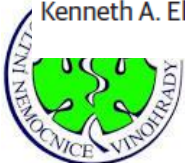
Left bundle branch area vs biventricular pacing for cardiac resynchronization therapy: the LEFT-BUNDLE-CRT trial

Óscar Cano ^{1,2,3,*}, Víctor Pérez-Roselló⁴, Andrea Di Marco ^{3,5,6},
Javier Ramos-Maqueda^{7,8}, Pablo Moríña⁹, Thomas Brouzet¹⁰,
Daniel Rodríguez-Muñoz^{11,12}, Víctor Castro¹³, Sebastian Giacomani¹⁴,
Pablo Peñafiel¹⁵, María Rodríguez-Serrano^{1,2,3}, and Manuel Molina-Lerma ^{16,17}

JAMA Cardiology | **Original Investigation**

Long-Term Outcomes of Left Bundle-Branch Pacing vs Biventricular Pacing in Heart Failure The HeartSync-LBBP Randomized Clinical Trial

Xueying Chen, MD; Xi Liu, MD; Ruogu Li, MD; Zhongkai Wang, MD; Yixiu Liang, MD; Lei Zhang, MD;
Wei Wang, MD; Jin Bai, MD; Jingfeng Wang, MD; Shengmei Qin, MD; Weiwei Zhang, MD;
Tianbao Yao, MD; Dong Huang, MD; Ting Chen, MD; Xianxian Zhao, MD, PHD; Dening Liao, MD, PHD;
Jingbo Li, MD, PHD; Jialiang Mao, MD, PHD; Mihail G. Chelu, MD, PHD; Yangang Su, MD, PHD;
Kenneth A. Ellenbogen, MD; Junbo Ge, MD, PHD



ami, je však překvapující tak vysoká míra

JAMA Cardiology | **Original Investigation**

Conduction System vs Biventricular Pacing in Heart Failure The PhysioSync-HF Randomized Clinical Trial

André Zimerman, MD, PhD; Alexander dal Forno, MD; Luis E. Rohde, MD, PhD; Caique M. Ternes, MD, PhD;
Fernanda D. Alves, PhD; Lucas P. Damiani, PhD; Martino Martinelli-Filho, MD, PhD; Roberto Costa, MD, PhD;
Alexsandro A. Fagundes, MD; Rodrigo M. Barbosa, MD; Eduardo B. Gadelha, MD; Carlos Eduardo Lima, MD, PhD;
Márcio A. Silva, MD; Jaime A. Maldonado, MD; Julio César de Oliveira, MD, PhD; Fabricio Mallmann, MD;
José M. Baggio Júnior, MD; Carlos E. Duarte, MD; Liliane A. de Souza, PhD; Juliana S. Santos, BSc;
Anderson D. Silveira, MD, PhD; Sérgio R. R. Decker, MD, PhD; Leandro I. Zimerman, MD, PhD;
Carisi A. Polanczyk, MD, PhD; André d'Avila, MD, PhD



Závěr

- LBBAP u pacientů s LBBB redukuje dyssynchronii, vede k vysoké míře respondérství i super-respondérství a redukuje symptomy srdečního selhání.
- Naše výsledky korelují s recentně publikovanými studiemi srovnávajícími BiV CRT a LBBAP avšak ukazují vyšší procento super-respondérství.

Děkuji za
pozornost!

MUDr. Jan Mizner, Ph.D.

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