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15:00 - 15:15

SALA ROSSA 1

ARGOMENTI DI ARITMOLOGIA CLINICA

HIS PACING IMPROVES CARDIAC FUNCTION ON LONG TERM FOLLOW-UP IN LOW EJECTION FRACTION PATIENTS

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Background: His bundle pacing (HBP) has recently emerged as a novel therapy to avoid the detrimental effects of RV apical pacing especially in pts with depressed EF at implant without a clear indication for CRT.

Objective: to compare the EF in the long term follow-up in a patient population implanted with HBP, splitting the implanted population in two groups 1) group with depressed EF considering an arbitrary cut-off of less than 45% 2) group of pts with EF more than 45%

Methods: From 2004 to 2016 all consecutive pts implanted with a PM and a lead screwed in His and at least a follow up duration of 1 year have been considered for this analysis. Pts with CRT indication were excluded. Intracardiac intervals, QRS duration, NYHA functional class, EF and lead performance were measured at baseline and at follow-up.

Results: HBP was successfully implanted in 305 pts (mean age 75.5 ± 8.1 ; 58% males; mean QRS duration 126 ± 29 ms) with standard pacemaker indications. The mean follow up duration was 6.2 ± 3.2 years. On the whole population, the mean EF was $56.9 \pm 11.0\%$ and 45 (14.8%) pts were included in group 1. Considering only the pts in group 1 (EF < 45%), at baseline the 51% of pts had EF in the range between 40% and 45%, the 20% of pts between 35-40% and the 29% of pts < 35%. At the last follow up the percentage of pts with EF in the range 40%-45% was increased to 69%, while the percentage of pts with EF < 35% was decreased to 13.3 % (p=0.004), as shown in the figure. Conversely, considering the pts in group 2 (EF>45%), the 97.7% of pts maintains the EF >45% in the follow up, and only 0.8% reduced the EF to < 35% (P=0.2)

Conclusion: Permanent HBP significantly improved EF in long term follow-up in pts with baseline reduced EF

