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Karlheinz Seidl

Heart Center Ludwigshafen, Germany

Cardiac resynchronization therapy: State of play

ardiac resynchronization therapy (CRT) is currently an established therapy for heart failure patients. Increasing knowledge on implantation techniques for the left ventricular lead, advancement of device based technologies, clinical trial experience and increased knowledge of CRT indications has impacted on this evolving therapy in the last few years. This review will focus on the updated CRT guidelines and on clinical factors influencing the likelihood to respond to CRT therapy. The importance of electrical parameters like QRS duration and QRS morphology will be addressed. In addition the value of CRT in patients with narrow QRS and mechanical dyssychrony on echo will be discussed.

Atrial fibrillation is common in heart failure patients with a prevalence of up to 30%. AF appears to reduce the benefit of CRT. It is important to ensure a very high percentage of BIV pacing (>98.5%). Arrhythmia device counters may not accurately reflect the true % of BIV pacing. AVJ ablation may be necessary if rate control is insufficient. Despite the recommendation strength is low this review will focus on this important heart failure population with atrial fibrillation.

In addition potentially new indications for CRT such as patients with mild heart failure or patients with conventional pacing indication at a high percentage of RV pacing are discussed in this presentation. New approaches for placement of left ventricular leads, multisite LV pacing and the role of heart failure monitoring programs are addressed.

Biography

Karlheinz Seidl is a Chief, Division of Clinical Electrophysiology at the Department of Cardiology and Head of the Medical Clinic IV, Director of Cardiology/ Electrophysiology at the heart center of Ingolstadt, Germany. He did his Medical School and Hospitalization at the University of Heidelberg, Köln, Perth and Sydney during 1980-87. And also he did his Medical Diploma at the University of Heidelberg, Internship, residency and research fellow at the Heart Center Ludwigshafen during 1987–1994. He is a Member of Nukleus of Clusters Rhythmologie of German society for Cardiology, Working group, Heart pacemaker and Arrhythmie during 2003-2009. And also he acted as a Head of the Division Clinical Electrophysiology at the Department of Cardiology Heart Center Ludwigshafen during 1994–2007.

karlheinz.seidl@klinikum-ingolstadt.de