

PR interval prognostic of cardiac resynchronization Tx outcome

February 15 2017



(HealthDay)—For patients with advanced systolic heart failure, the



impact of cardiac resynchronization therapy with defibrillation (CRT-D) varies according to PR interval, according to research published in the February issue of the *Journal of Cardiovascular Electrophysiology*.

Jeffrey Lin, M.D., from the University of Wisconsin School of Medicine and Public Health in Madison, and colleagues stratified 308 patients enrolled in the optimal pharmacologic therapy (OPT) and 595 patients in the CRT-D arms of the Comparison of Medical Therapy, Pacing, and Defibrillation in Heart Failure trial according to normal (\leq 230 ms) or prolonged (>230 ms) PR interval.

The researchers found that, compared with OPT, CRT-D treatment correlated with reduced hospitalization or all-cause mortality (ACM) and ACM (P = 0.002 and 0.003, respectively). In patients with longer baseline PR intervals, CRT-D was increasingly more effective in reducing ACM hazard (P = 0.002), irrespective of left bundle branch block (LBBB) status. ACM was reduced with CRT-D versus OPT (P = 0.001) in the prolonged baseline PR interval subgroup, with little evidence of a reduction in ACM in the normal PR subgroup (P = 0.07).

"In <u>patients</u> with advanced <u>systolic heart failure</u>, wide QRS complexes, and prolonged PR intervals, restoration of atrioventricular mechanical coupling with CRT-D may improve survival regardless of LBBB status," the authors write.

More information: <u>Full Text (subscription or payment may be</u> <u>required)</u>

Copyright © 2017 HealthDay. All rights reserved.

Citation: PR interval prognostic of cardiac resynchronization Tx outcome (2017, February 15) retrieved 3 May 2024 from



https://medicalxpress.com/news/2017-02-pr-interval-prognostic-cardiac-resynchronization.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.