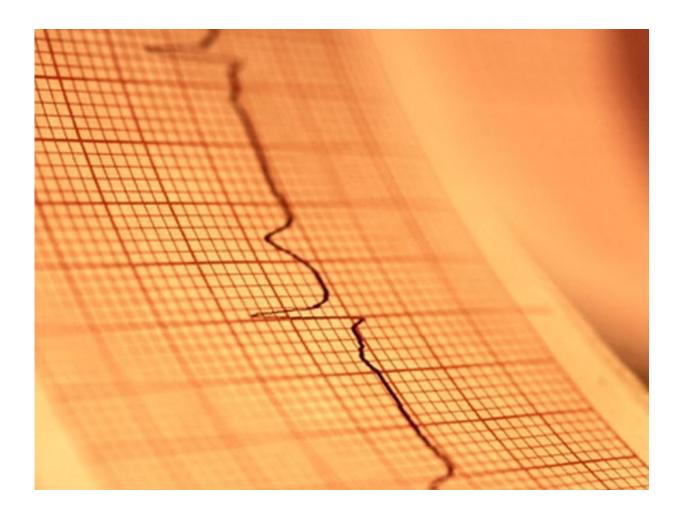


Left bundle branch block tied to left ventricular dysfunction

January 29 2018



(HealthDay)—Left bundle branch block (LBBB) is associated with a



smaller degree of left ventricular ejection fraction (LVEF) improvement compared with other QRS morphologies, according to a study published in the Jan. 23 issue of the *Journal of the American College of Cardiology*.

Edward Sze, M.D., from Duke University in Durham, N.C., and colleagues used data from the Duke Echocardiography Laboratory Database to identify patients with baseline electrocardiography and LVEF ≤35 percent with follow-up LVEF three to six months later. The authors sought to assess rates of LVEF improvement for patients with LBBB versus other QRS morphologies.

The researchers found that of the 659 included patients, 111 had LBBB, 59 had wide QRS duration ≥120 ms (but not LBBB), and 489 had narrow QRS duration. In the three groups, the adjusted mean increase in LVEF over three to six months was 2.03, 5.28, and 8.00 percent, respectively (P

"LBBB is associated with a smaller degree of LVEF improvement compared with other QRS morphologies, even with guideline-directed medical therapy," the authors write. "Some <u>patients</u> with LBBB may benefit from <u>cardiac resynchronization therapy</u> earlier than guidelines currently recommend."

Several authors report financial ties to the medical device industry.

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

Editorial (subscription or payment may be required)

Copyright © 2018 HealthDay. All rights reserved.

Citation: Left bundle branch block tied to left ventricular dysfunction (2018, January 29)



retrieved 1 May 2024 from https://medicalxpress.com/news/2018-01-left-bundle-block-tied-ventricular.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.