LONG TERM PROGNOSIS AFTER CARDIAC RESYNCHRONIZATION THERAPY IS RELATED TO THE EXTENT OF LEFT VENTRICULAR REVERSE REMODELING AT MIDTERM FOLLOW UP.

R. Ramírez Rodríguez 1, AM Ramírez Rodríguez 2, MA García Bello 1, A. García Quintana 1, A. Delgado Espinosa 1, M. Diaz Escofet 1, E. Caballero Dorta 1, A. Medina Fernández-Aceytuno 1. Dr. Negrín’s Hospital, Mateno- Insular Hospital, Las Palmas G. C. Spain

BACKGROUND: Despite the current selection criteria, individual response to Cardiac Resynchronization therapy (CRT) varies significantly. Furthermore, it has been suggested that reduction in left ventricular end-systolic diameter (LVESD) after CRT is related to outcome.

OBJECTIVE: To evaluate the relation between the extent of left ventricular (LV) reverse remodelling and clinical/echocardiographic improvement after 6 months of cardiac resynchronization therapy (CRT) as well as long term outcome.

METHODS: A total of 216 CRT candidates were included. Follow up: 45±19 months. Clinical status and echocardiographic evaluation were performed before implantation and after 6 months of CRT. Long term follow-up included all cause mortality and hospitalizations for heart failure.

RESULTS:
Super-Responders: Decrease in LVESD ≥30%
Responders: Decrease in LVESD 15 to 29%
Non-responders: Decrease in LVESD 0 to 14%
Negative-responders: Increase in LVESD

CONCLUSIONS: The extent of LV reverse remodeling at seven years of follow up is predictive for long-term outcome in CRT patients.