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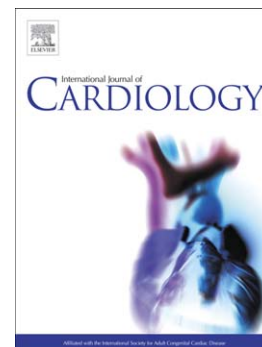
Non-responders to cardiac resynchronization therapy: insights from multi-modality imaging and electrocardiography. A brief review

Patrizia Carità, Egle Corrado, Gianluca Pontone, Antonio Curnis, Luca Bontempi, Giuseppina Novo, Marco Guglielmo, Gianfranco Ciaramitaro, Pasquale Assennato, Salvatore Novo, Giuseppe Coppola

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Non-responders to cardiac resynchronization therapy: insights from multimodality imaging and electrocardiography. A brief review

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ABSTRACT: cardiac resynchronization therapy (CRT) is a successful strategy for heart failure (HF) patients. The pre-requisite for the response is the evidence of electrical dyssynchrony on the surface electrocardiogram usually as left bundle branch block (LBBB). Non response to CRT is a significant problem in clinical practice. Patient selection, inadequate delivery and sub-optimal left ventricle lead position may be important causes. In a effort to improve CRT response multimodality imaging (especially echocardiography, computed tomography and cardiac magnetic resonance) could play a decisive role and extensive literature has been published on the matter. However, we are so far from routinary use in clinical practice. Electrocardiography (with respect of left ventricle capture and QRS narrowing) may represent a simple and low cost approach for early prediction of potential non-responder, with immediate practical implications. This brief review covers the current reccomendations for CRT in HF patients with particular attention to the potential benefits of multimodality imaging and electrocardiography in improving response rate.

Keyword: heart failure, cardiac resynchonitation therapy; response; multimodality imaging; electrocardiography.

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