

## **Episodes 1 and 2: Taking the Lead**

Recorded in front of a live audience in New Orleans, Louisiana Sunday, May 21, 2023



## Today's Hosts:



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THE LEAD
PODCAST

### Disclosures—Hosts

#### Jason T. Jacobson, MD, FHRS

- Research: Abbott, Philips
- Stock Ownership: Atlas 5D
- Speaking and Teaching, Honoraria: American College of Cardiology, Zoll Medical Corporation

#### Danesh Kella, MBBS, FHRS

Nothing to disclose.



## Disclosures—Contributors

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Nothing to disclose.

#### Apoor Patel, MD

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#### Roderick Tung, MD, FHRS

 Honoraria, Speaking and Consulting: Abbott, AtriCure, Biontrik, Boston Scientific, Medtronik



# **Episode 1: A Discussion of Left Bundle Branch Versus Biventricular Pacing...**

Article for Discussion: Left Bundle Branch Versus Biventricular Pacing as the Initial Implant Strategy for Cardiac Resynchronization Therapy

Heart Rhythm 2023 Abstract Authors: Juan Carlos Diaz, MD;a William H. Sauer MD, FHRS Mauricio Duque, MD, FHRS;a 5 Bruce A. Koplan, MD, MPH, FHRS;b Eric D. Braunstein, MD;c Jorge Eduardo Marín, 6 MD;d Julian Aristizabal, MD;d Cesar Daniel Niño, MD;e Oriana Bastidas, MD;a Juan 7 Manuel Martinez, MD;d Carolina Hoyos, MD;b Carlos D. Matos, MD;b Nestor Lopez8 Cabanillas, MD;f Nathaniel A. Steiger, MD;b Sunil Kapur, MD;b Thomas M. Tadros, 9 MD;b David T. Martin, MD;b Paul C. Zei, MD, PhD, FHRS;b Usha B. Tedrow, MD, MS, 10 FHRS;b Jorge E. Romero MD, FHRS





Left Bundle Branch Area Pacing
Versus Biventricular Pacing as the
Initial Implant Strategy for Cardiac
Resynchronization Therapy - Results
from the SYNCHRONY
Collaborative Group



#### Hosts

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#### Guests

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## **Synopsis**

**Objective:** Left bundle Area Pacing vs. Biventricular pacing as an initial strategy in patients requiring CRT (LBBB EF  $\leq$  35% or RV pacing > 40%)

**Methods:** Prospective multicenter non-randomized registry *Primary end-point:* Composite (HF hospitalization and all-cause mortality)

#### **Results:**

Total n=371	LBBAP n=128	BiVP n=243	P-value
Procedural Success	108 (84.4%)	230 (94.7%)	<0.01
Primary Endpoint	n=31 (24.2%)	n=103 (42.4%)	0.02
HF –hospitalizations	n=28 (22.6%)	n=96 (39.5%)	0.02
Fluoroscopy Time (mins)	12	21.7	<0.001
Procedural Time (mins)	95	129	<0.001
QRS duration (ms)	123.7	149.3	<0.001
Long-term complications	12 (9.4%)	37 (15.2%)	0.146

Conclusion: LBBAP may be used as an initial implant strategy for CRT





## Thank you!