

# 60<sup>o</sup> CONGRESSO NAZIONALE

NAPOLI 25-28 Novembre 2015

Venerdì 27 Novembre 2015

## **Simposio**

**INSUFFICIENZA CARDIACA CRONICA NELL'ANZIANO**

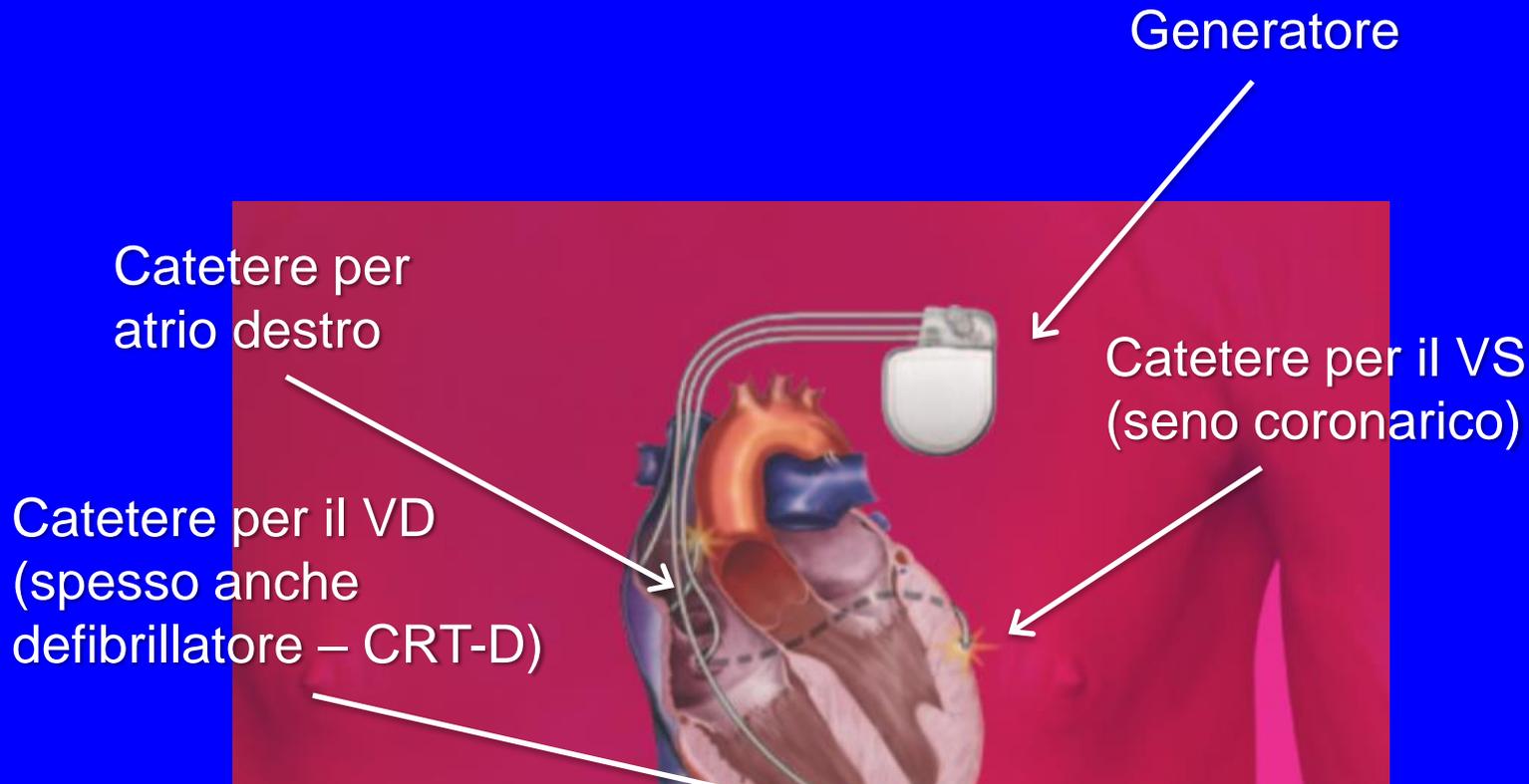
## **La terapia re-sincronizzante**

**Stefano Fumagalli**

Cardiologia e Medicina Geriatrica, AOU Careggi e Università di Firenze



# Terapia di resincronizzazione cardiaca - CRT



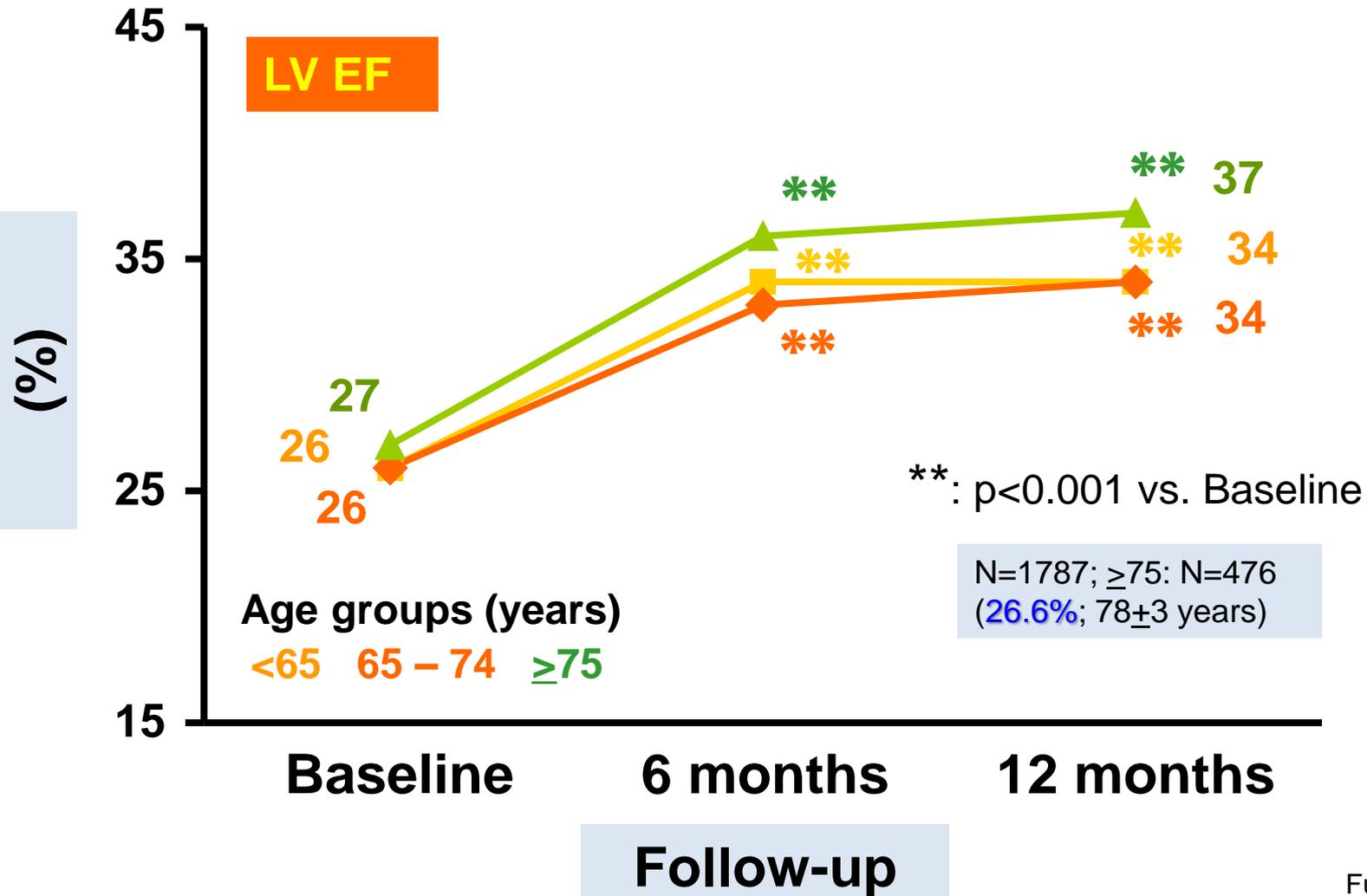
## 2013 ESC Guidelines on cardiac pacing and CRT

- ✓ There is strong evidence that CRT reduces mortality & hospitalizations and improves cardiac function /structure in patients with complete LBBB
- ✓ Further research is very unlikely to change our confidence in the estimate of the effect



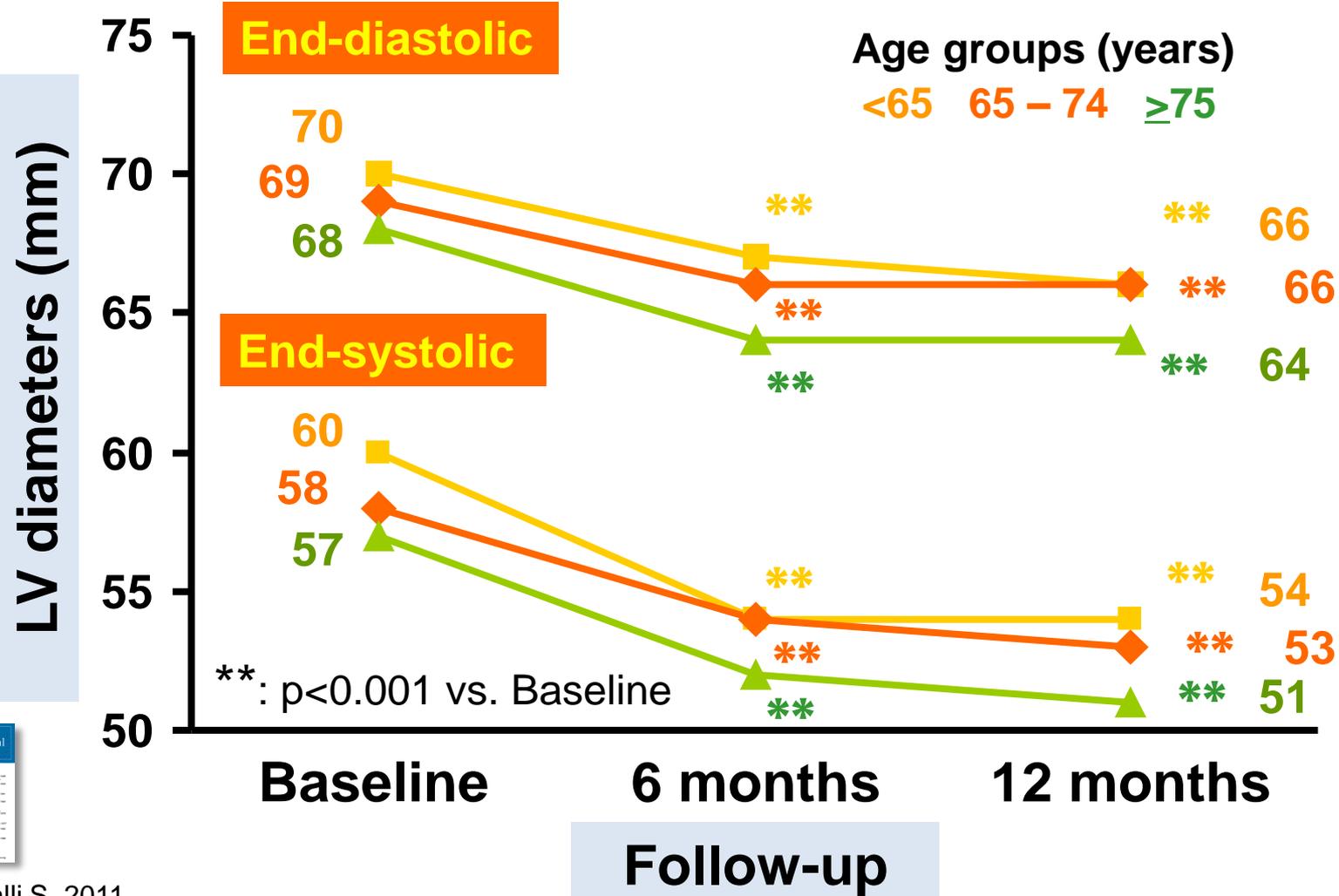
# Comparison of the Usefulness of Cardiac Resynchronization Therapy in Three Age-Groups (<65, 65-74 and ≥75 Years) (from the InSync/InSync ICD Italian Registry)

## CRT-induced changes of LV EF during the follow-up, by age



# Comparison of the Usefulness of Cardiac Resynchronization Therapy in Three Age-Groups (<65, 65-74 and ≥75 Years) (from the InSync/InSync ICD Italian Registry)

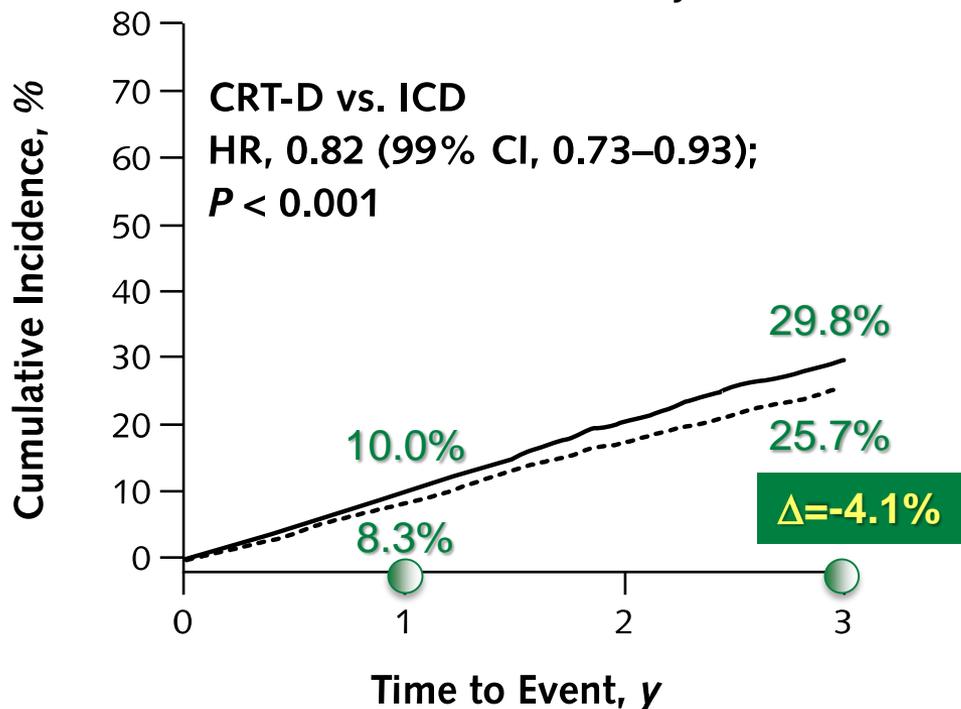
CRT-induced changes of LV diameters during the follow-up, by age



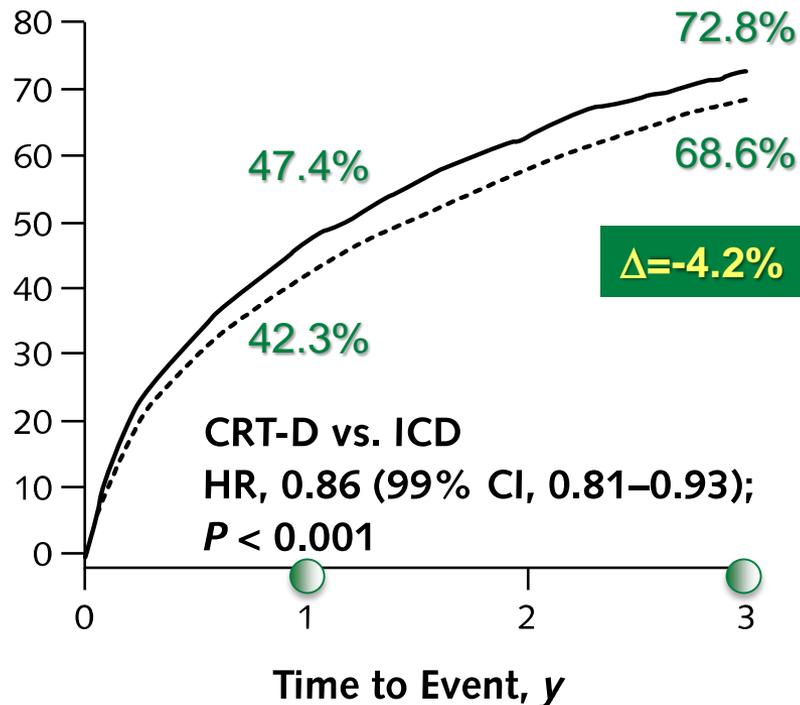
# Comparative Effectiveness of Cardiac Resynchronization Therapy With an Implantable Cardioverter-Defibrillator Versus Defibrillator Therapy Alone

Events in the National Cardiovascular Data Registry's ICD Registry (propensity-matched cohort; eligible - N=29777; 2006-9)

All-Cause Mortality



All-Cause Readmission



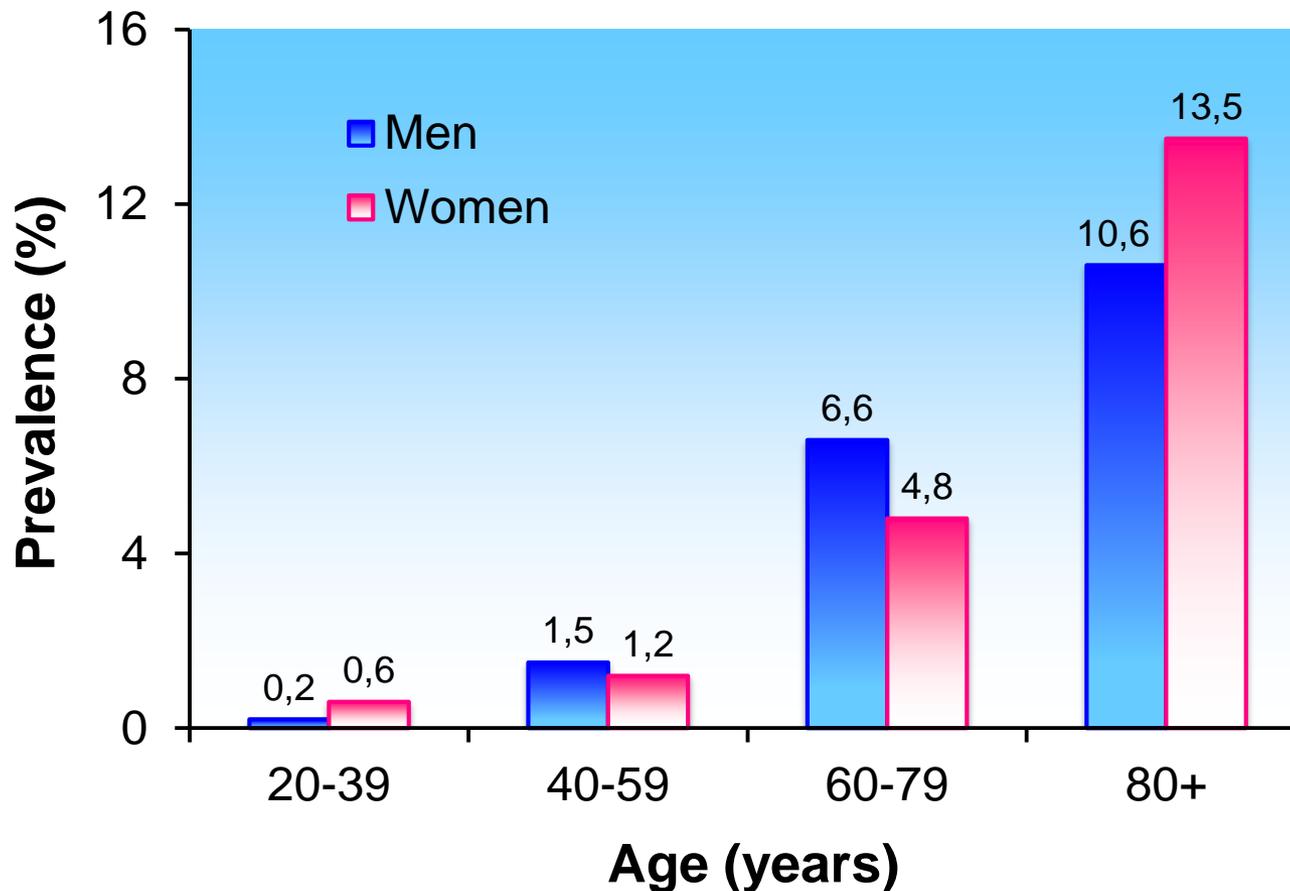
— ICD (N=3545) – Age: 74.9 y,  $\geq 80$  y: 23.9%, EF: 25%  
..... CRT-D (N=3545) - Age: 74.6 y,  $\geq 80$  y: 22.9%, EF: 25%

# Heart Disease and Stroke Statistics—2015 Update

## A Report From the American Heart Association

### Prevalence of heart failure by sex and age

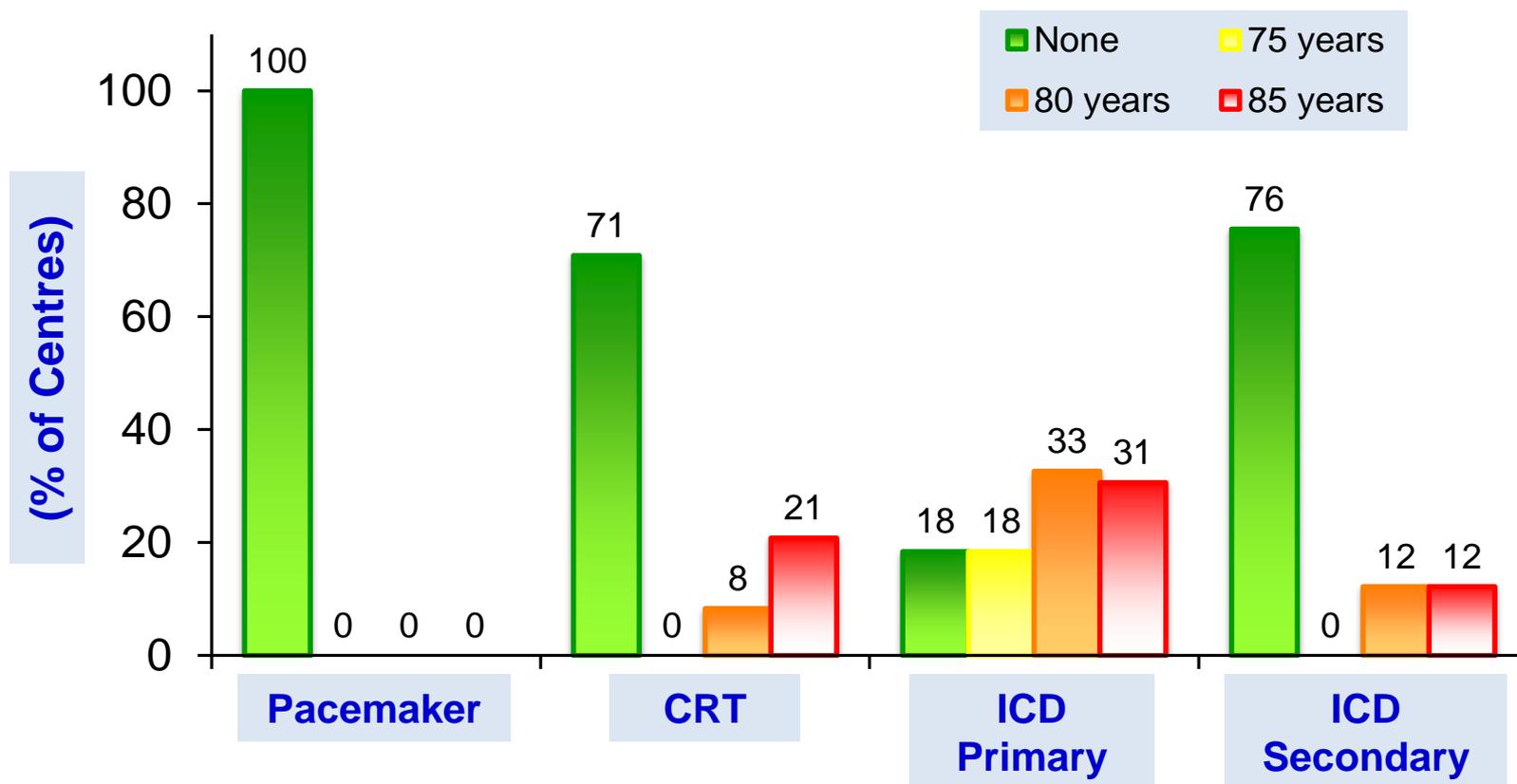
(National Health and Nutrition Examination Survey: 2009–2012)



# Clinical management of arrhythmias in elderly patients: results of the European Heart Rhythm Association survey



Age limits for different therapies in elderly patients  
(centres – N=50, 20 countries)

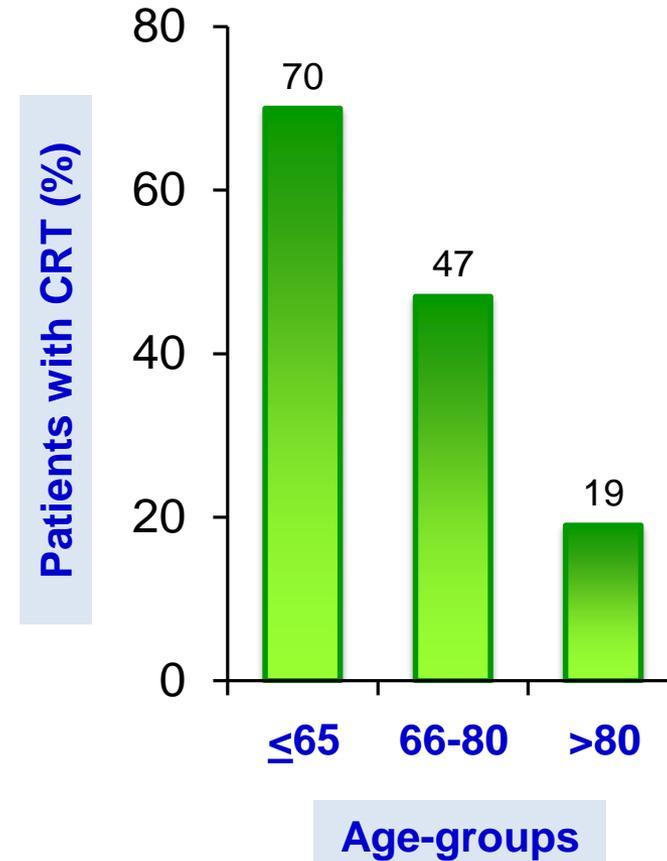
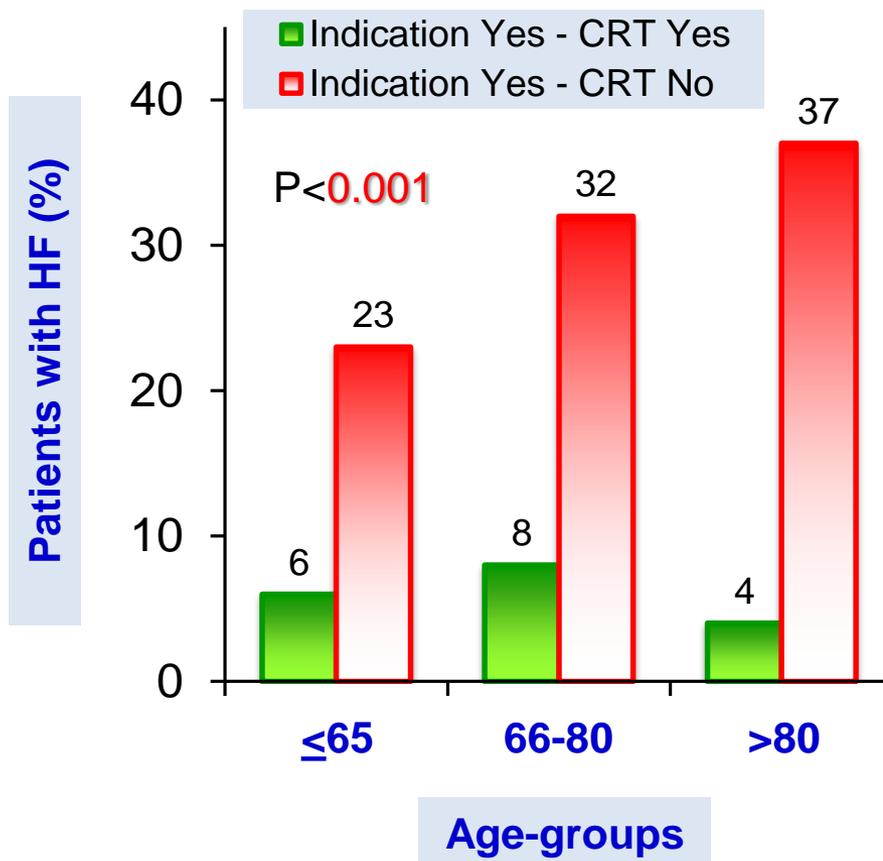


ICD Primary / Secondary –  
ICD for primary / secondary prevention

# Age, prognostic impact of QRS prolongation and left bundle branch block, and utilization of cardiac resynchronization therapy: findings from 14 713 patients in the Swedish Heart Failure Registry



Distribution of 14713 patients according to age and CRT (left), and ICD use in CRT recipients by age (right) in the Swedish Heart Failure Registry (2000-2013)

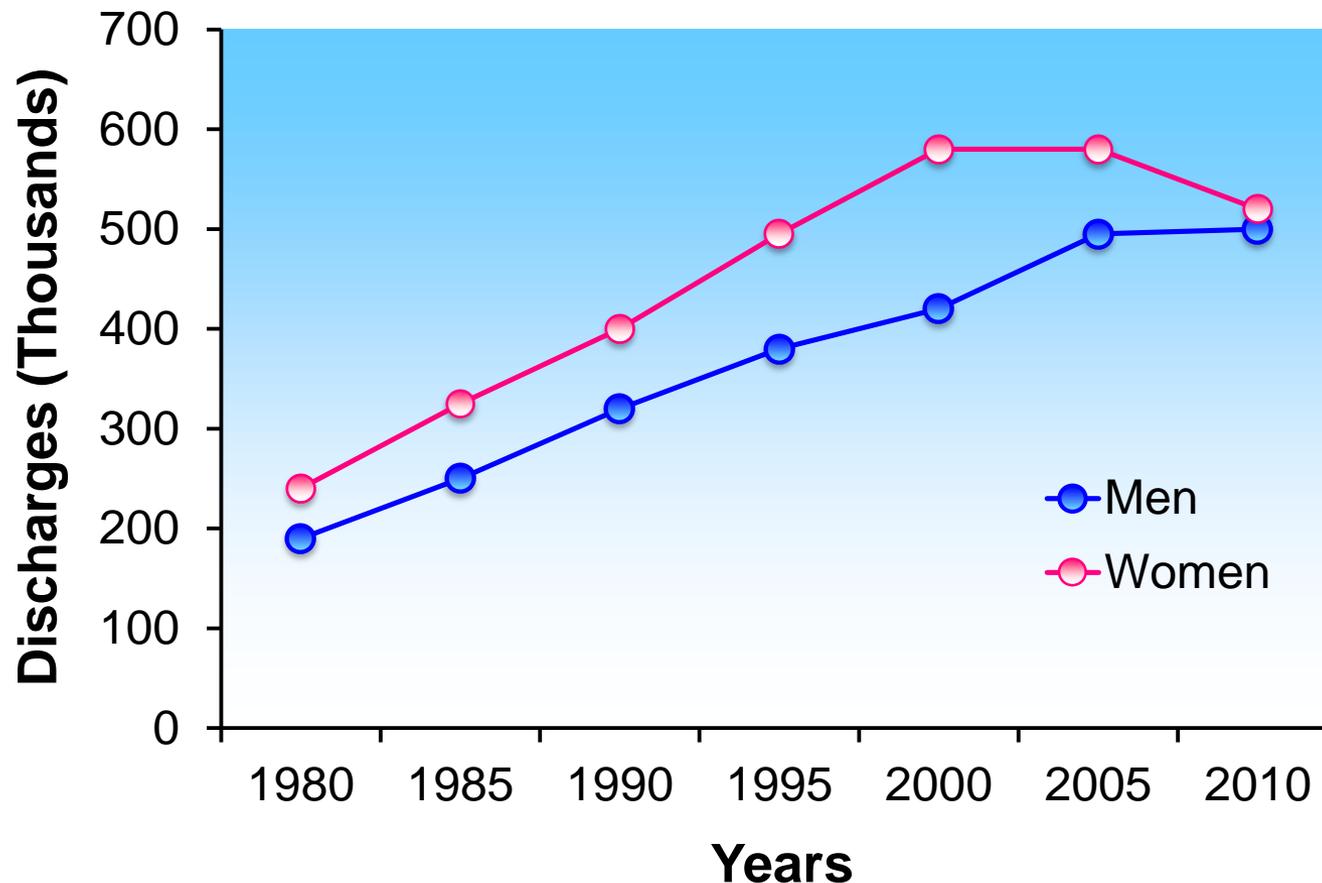


# Heart Disease and Stroke Statistics—2015 Update

## A Report From the American Heart Association

### Hospital discharges for HF by sex (US: 1980–2010)

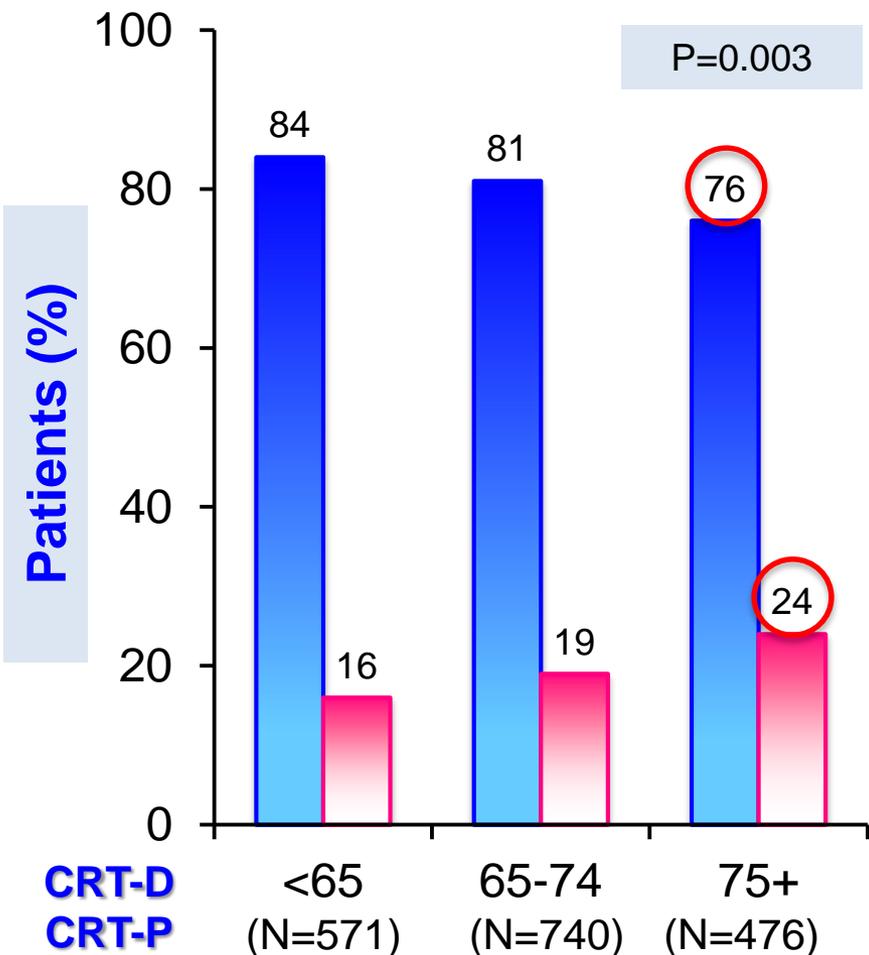
(Hospital discharges: people discharged alive, dead, status unknown)



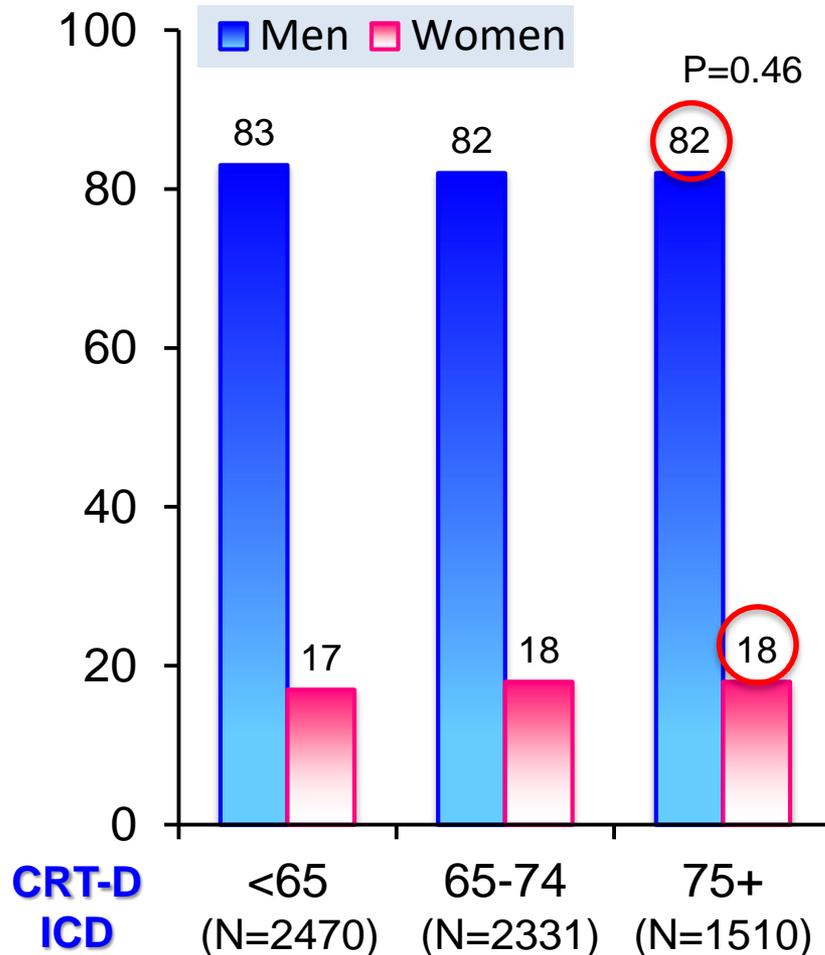
# Women and ICD: The Influence of Age and Clinical Characteristics on Survival; the Experience of the Italian Clinical Service Multicenter Observational Project

## Gender distribution by age in patients receiving CRT devices and ICD

The InSync / InSync ICD Italian Registry



The Italian Clinical Service Project

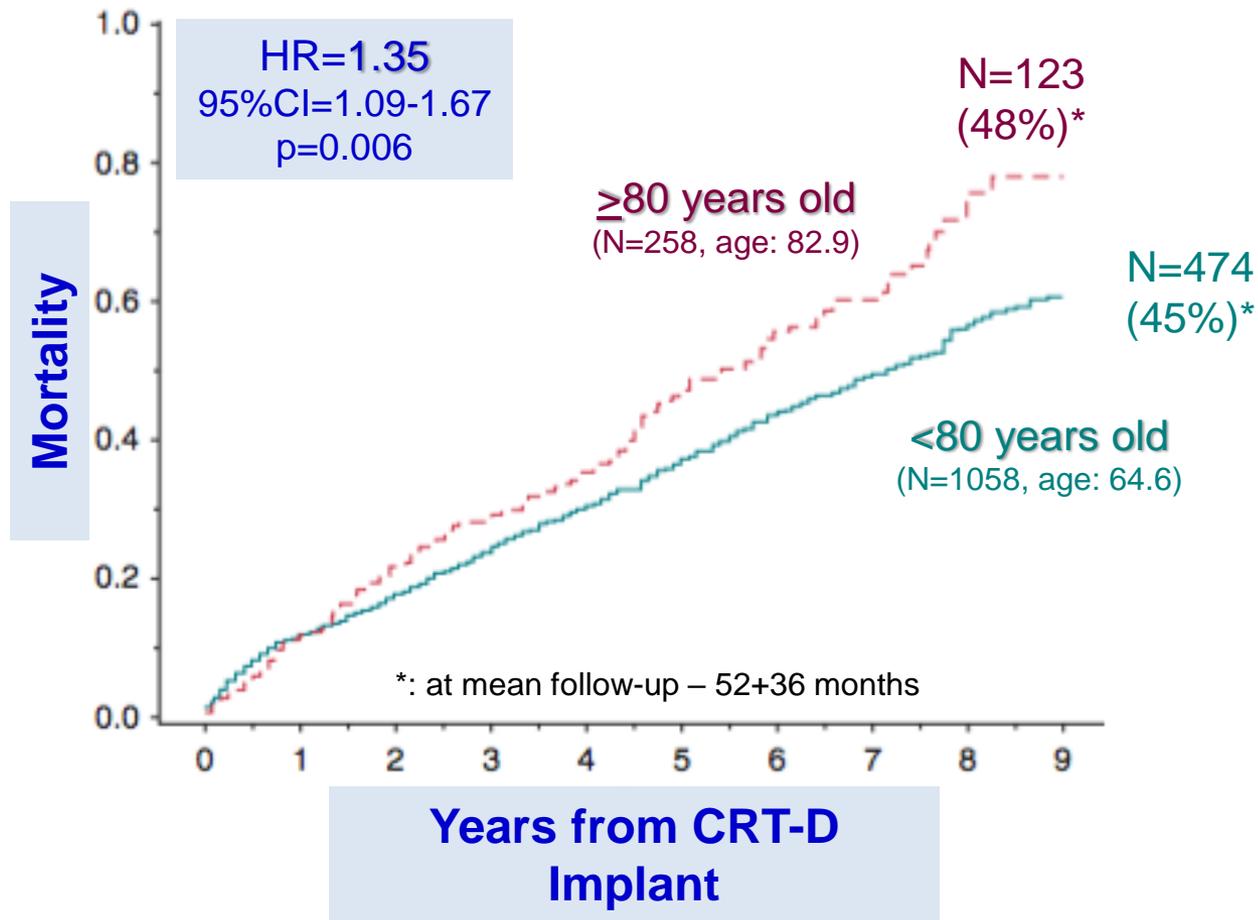


Age (years)

# Clinical outcomes in cardiac resynchronization therapy-defibrillator recipients 80 years of age and older



Overall mortality among patients  $\geq 80$  years old and patients  $< 80$  years old with CRT-Ds (University of Pittsburgh Medical Center, 1999-2015)

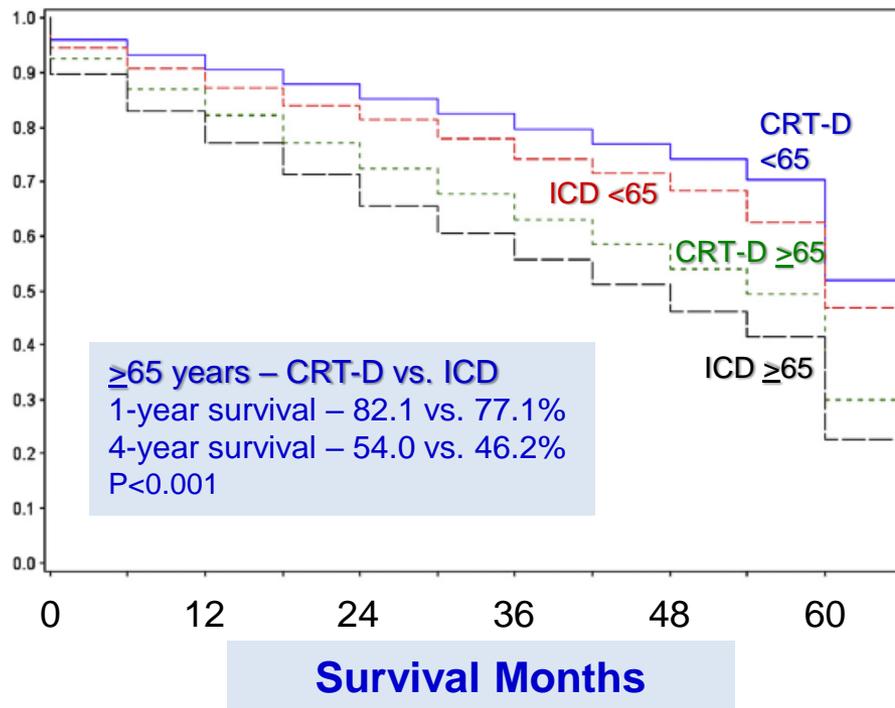


# Does Age Influence Cardiac Resynchronization Therapy Use and Outcome?

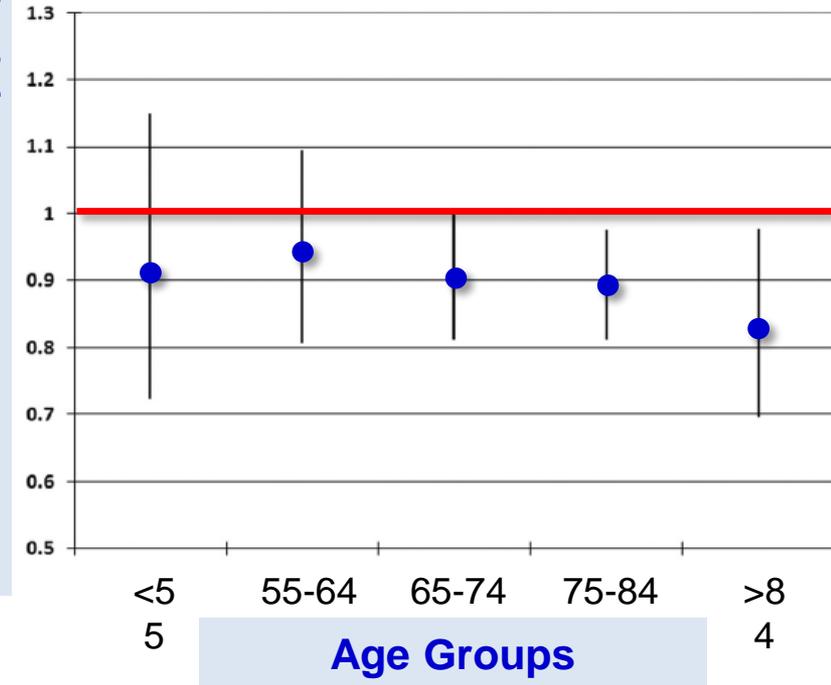


Unadjusted Survival for Patient Groups Based on Age ( $\geq$  or  $<65$  Years) and Use of CRT (left), and Survival Hazard Ratios for CRT vs. ICD Use for Different Age Groups (right)  
 (the NCDR ICD registry: 2006-2009, N=70854, Age: 69 years, Men: 69%)

Proportion Alive



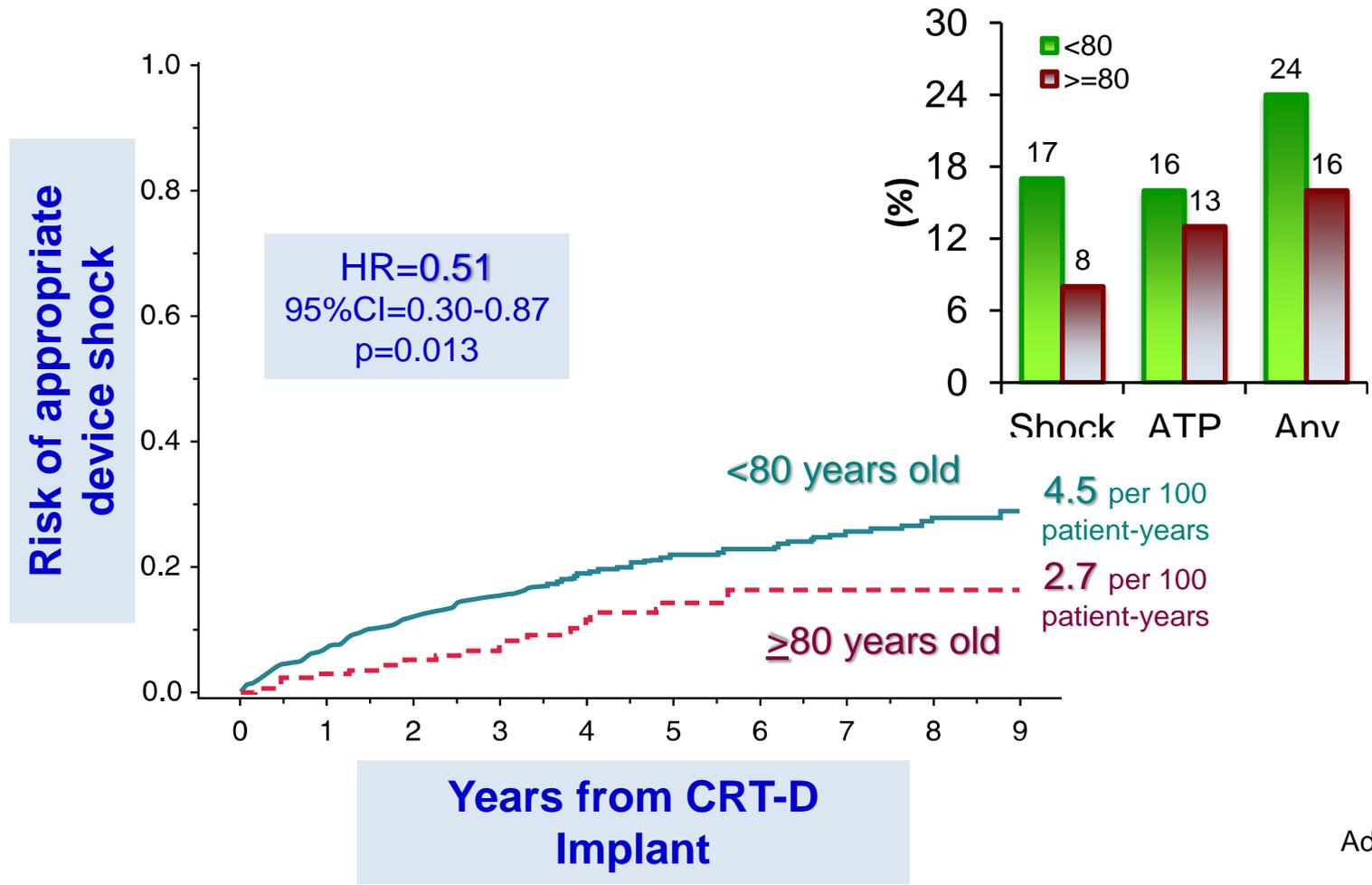
CRT vs. ICD 1-Year Mortality (HR)



# Clinical outcomes in cardiac resynchronization therapy-defibrillator recipients 80 years of age and older



## Time to first device shock in CRT-D patients ≥80 and <80 years old



# Cardiac Resynchronization Therapy in the Autumn of Life\*

Sana M. Al-Khatib, MD, MHS

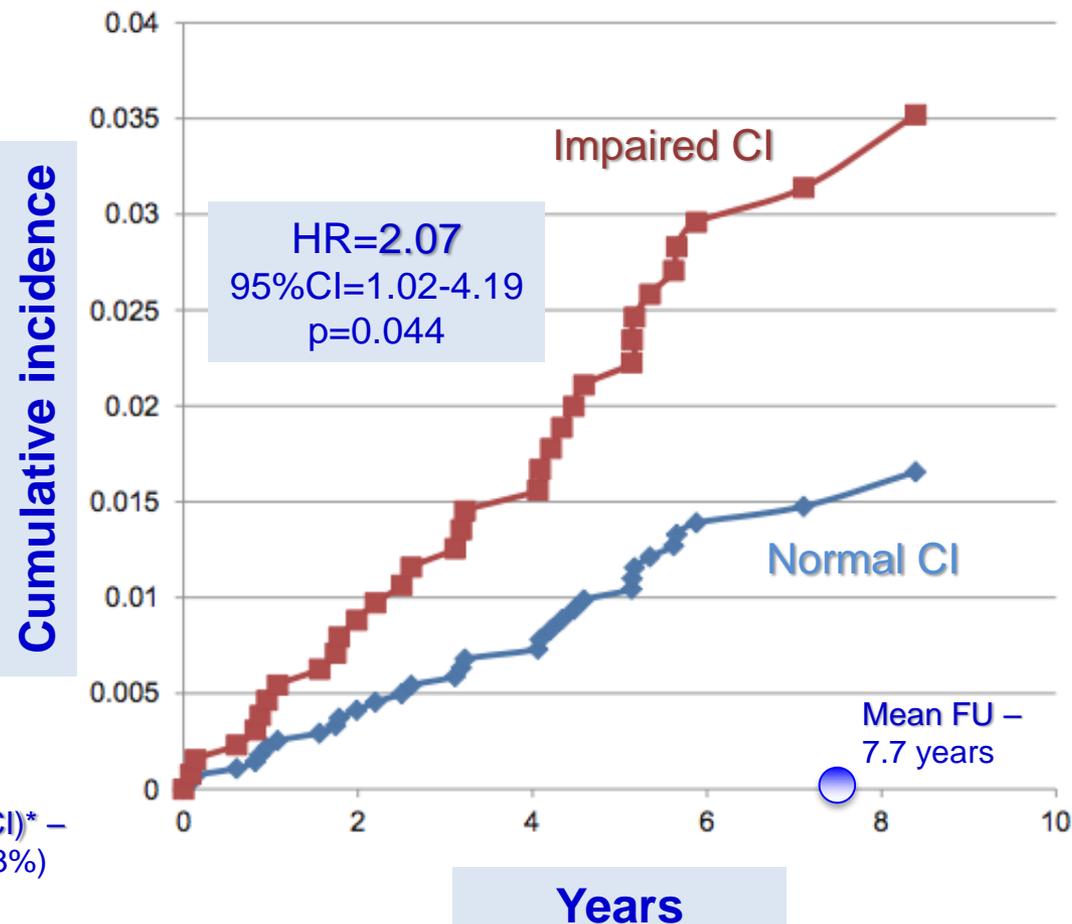


- *To implant or not to implant* a primary prevention **ICD** in older patients is a question that has challenged clinicians for years
- The ICD is a highly effective therapy ... On the other hand, there are no definitive data regarding the benefit of the ICD in **older patients**
- When the ICD is coupled with **CRT**, there is potential for improved HRQL and reduced HF hospitalizations, two important goals ...
- In the main randomized clinical trials of CRT, the relatively **young age** of patients is noticeable (range: 64 - 68 years)
- What about **other important endpoints** like ... **complications**, appropriate / inappropriate **ICD shocks**; and most important, **patient-centered outcomes** (i.e., functional status and HRQL)?

# Low Cardiac Index Is Associated With Incident Dementia and Alzheimer Disease

## The Framingham Heart Study

Incidence of dementia between individuals with normal and impaired cardiac index (*The Framingham Offspring Study, 1998-2001; Age: 69±6; N=32/1039*)

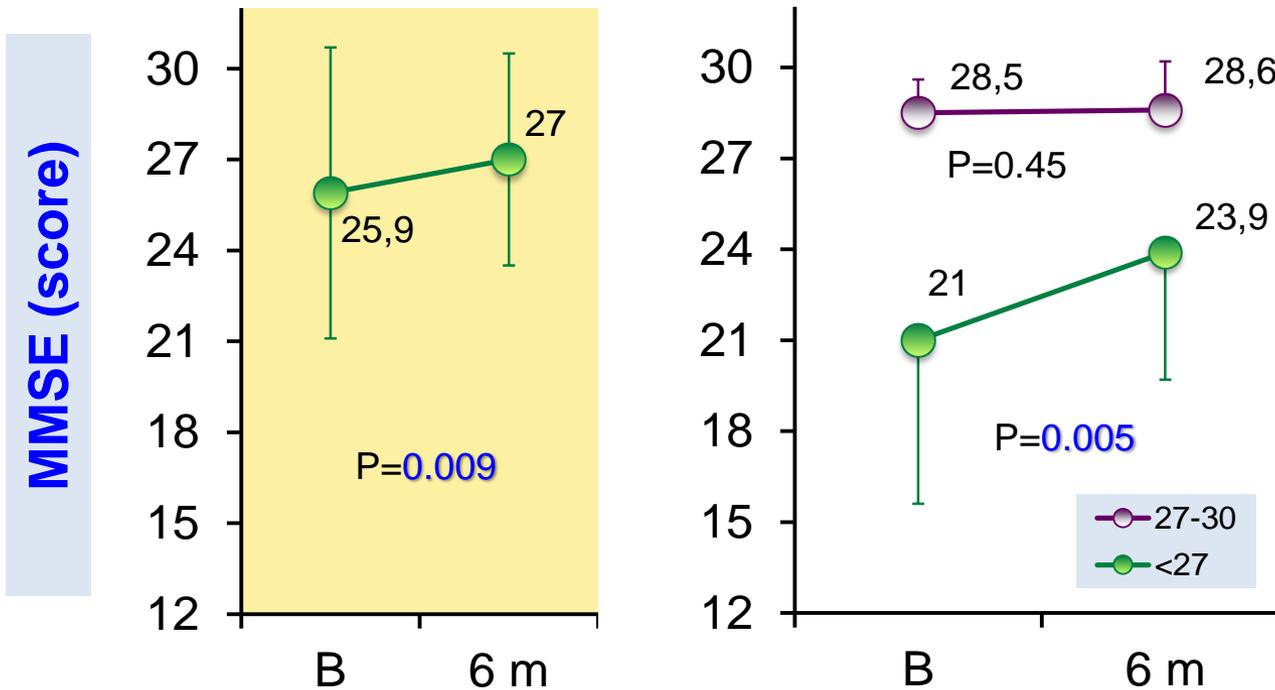


Impaired cardiac index (CI)\* –  
<2.5 L/min/m<sup>2</sup>; N=341 (33%)  
\* Cardiac MRI



# Changes of Mini-Mental State Examination (MMSE) between baseline and the 6-month evaluation after CRT implantation

N=50; mean age:  $67 \pm 10$  years; LVEF:  $28 \pm 5\%$   
(participating centers: Firenze, Bergamo, Caserta)



Evaluation

B – baseline  
6 m – six months



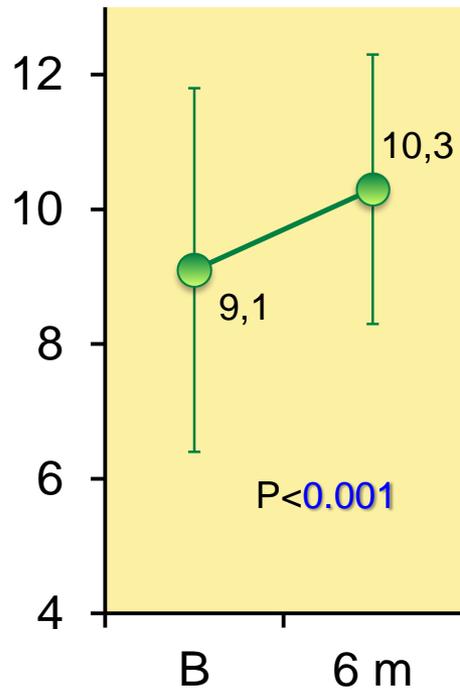
Beltrami M,  
Fumagalli S,  
2015

# Changes of Short Physical Performance Battery (SPPB) between baseline and the 6-month evaluation after CRT implantation

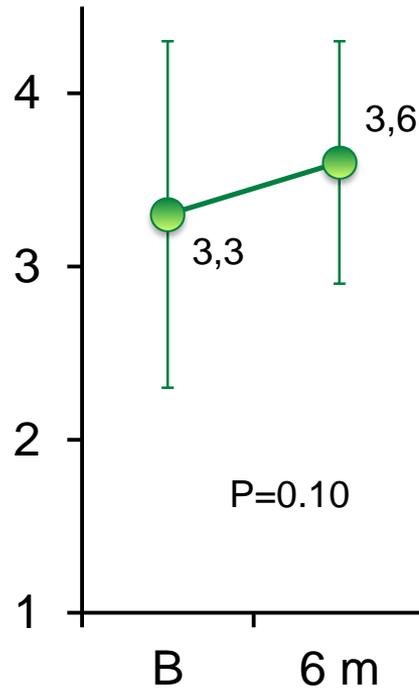
N=50; mean age:  $67 \pm 10$  years; LVEF:  $28 \pm 5\%$   
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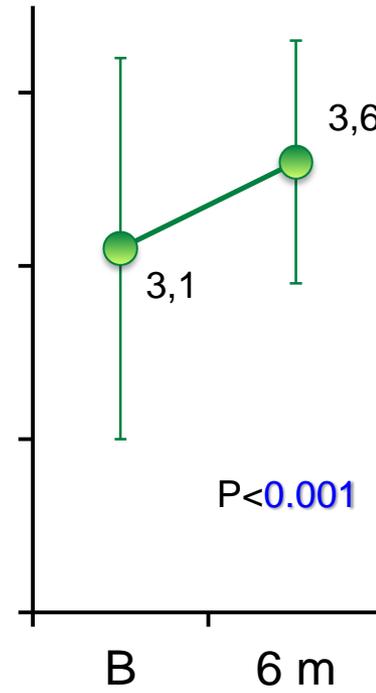
## SPPB



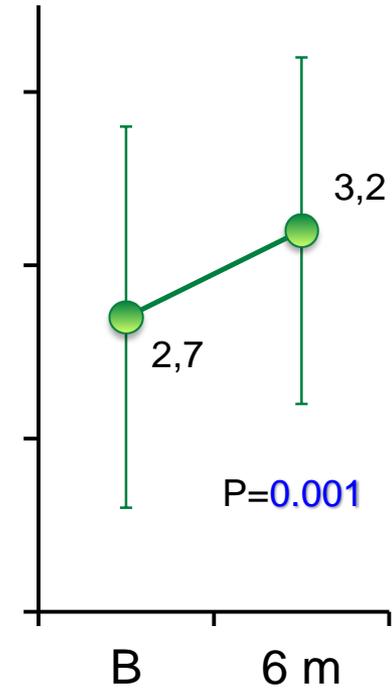
## Balance Test



## Gait Speed Test

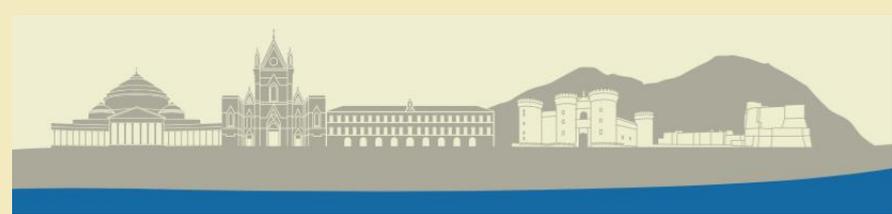


## Chair Stand Test



B – baseline  
6 m – six months

## Evaluation

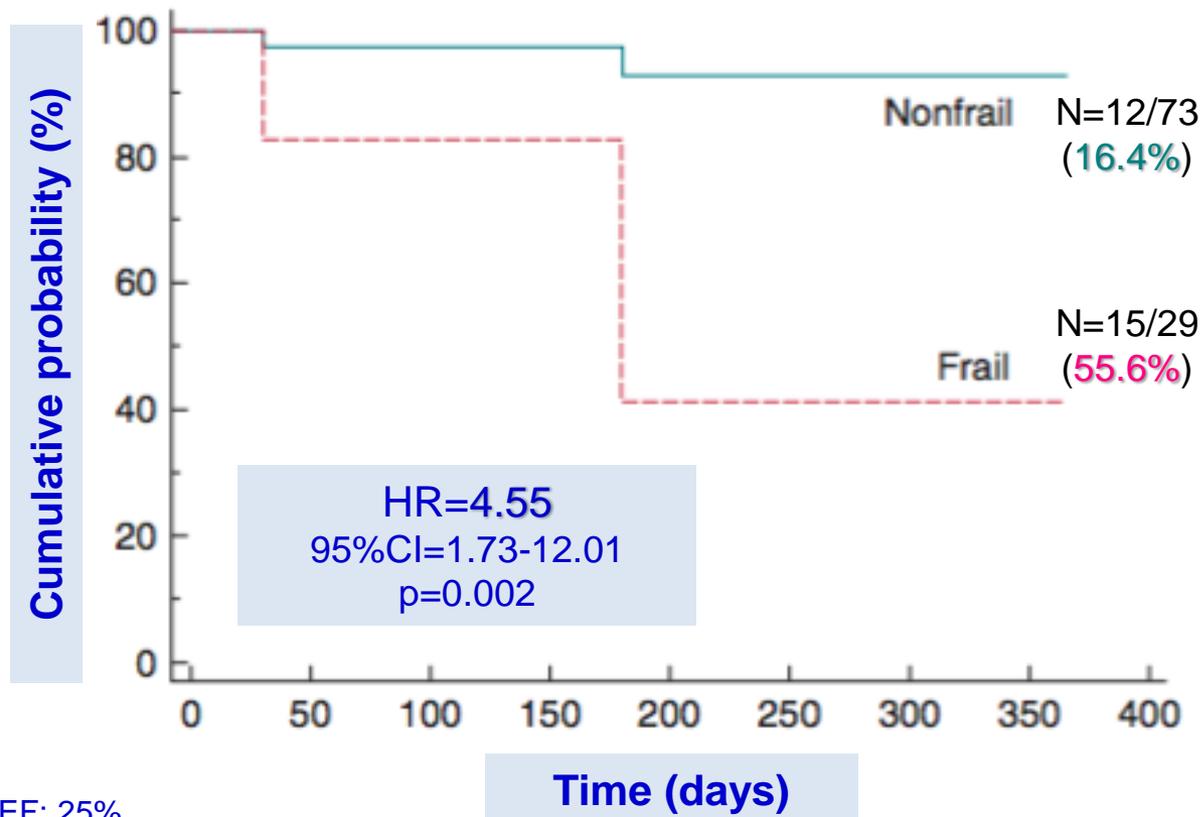


## Conclusioni

- ✓ La CRT migliora geometria e funzione sistolica del VS e riduce mortalità e ricoveri anche nei pazienti di età avanzata
- ✓ Dati del “mondo reale” evidenziano tuttavia un importante undertreatment correlato ad età e genere
- ✓ La miglior performance sistolica del VS potrebbe spiegare come siano evidenti - dopo soltanto 6 mesi di trattamento – risposte significative in area cognitiva e funzionale
- ✓ Il ridotto “burden” aritmico nei pazienti anziani scompensati potrebbe indirizzare a valutare l’efficacia della sola CRT (vs. CRT-D) in soggetti di età avanzata

# The impact of frailty in older patients with non-ischaemic cardiomyopathy after implantation of cardiac resynchronization therapy defibrillator

12-months decompensated HF in patients with non-ischaemic cardiomyopathy by frailty condition after CRT-D device implantation



Frail\* – Age: 74 y; EF: 25%  
Non Frail – Age: 73 y; EF: 24%  
\*  $\geq 3/5$  Fried and Walston criteria

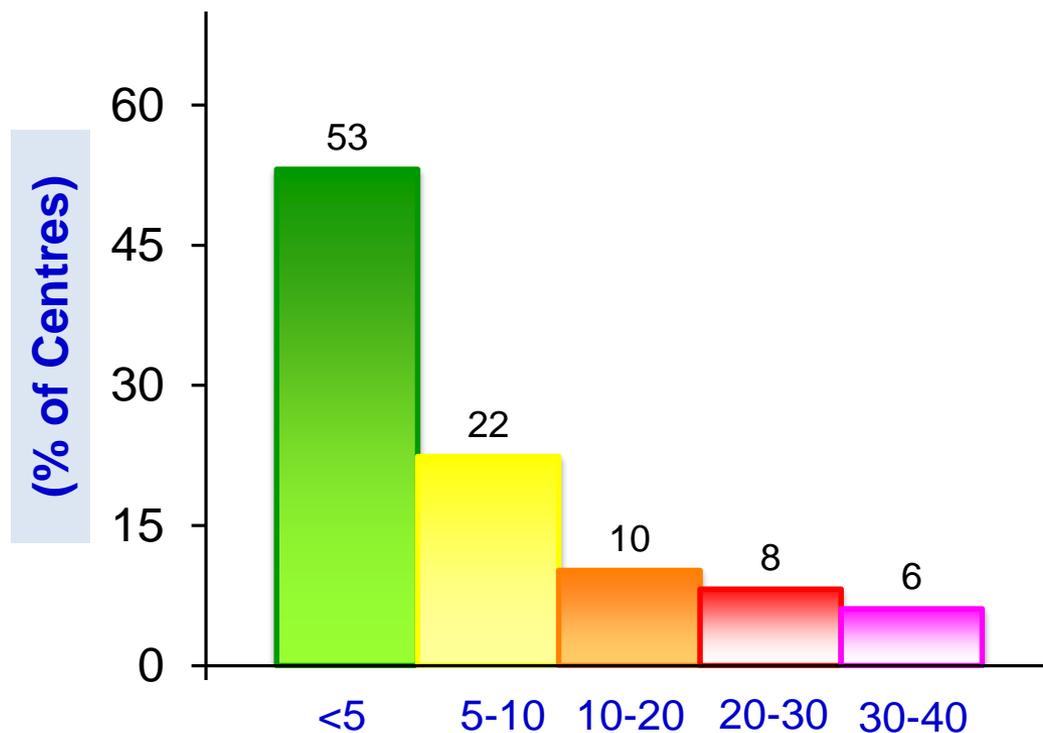


Dominguez-Rodriguez A,  
2015

# Clinical management of arrhythmias in elderly patients: results of the European Heart Rhythm Association survey



Proportions of elderly patients not receiving the indicated CRT device

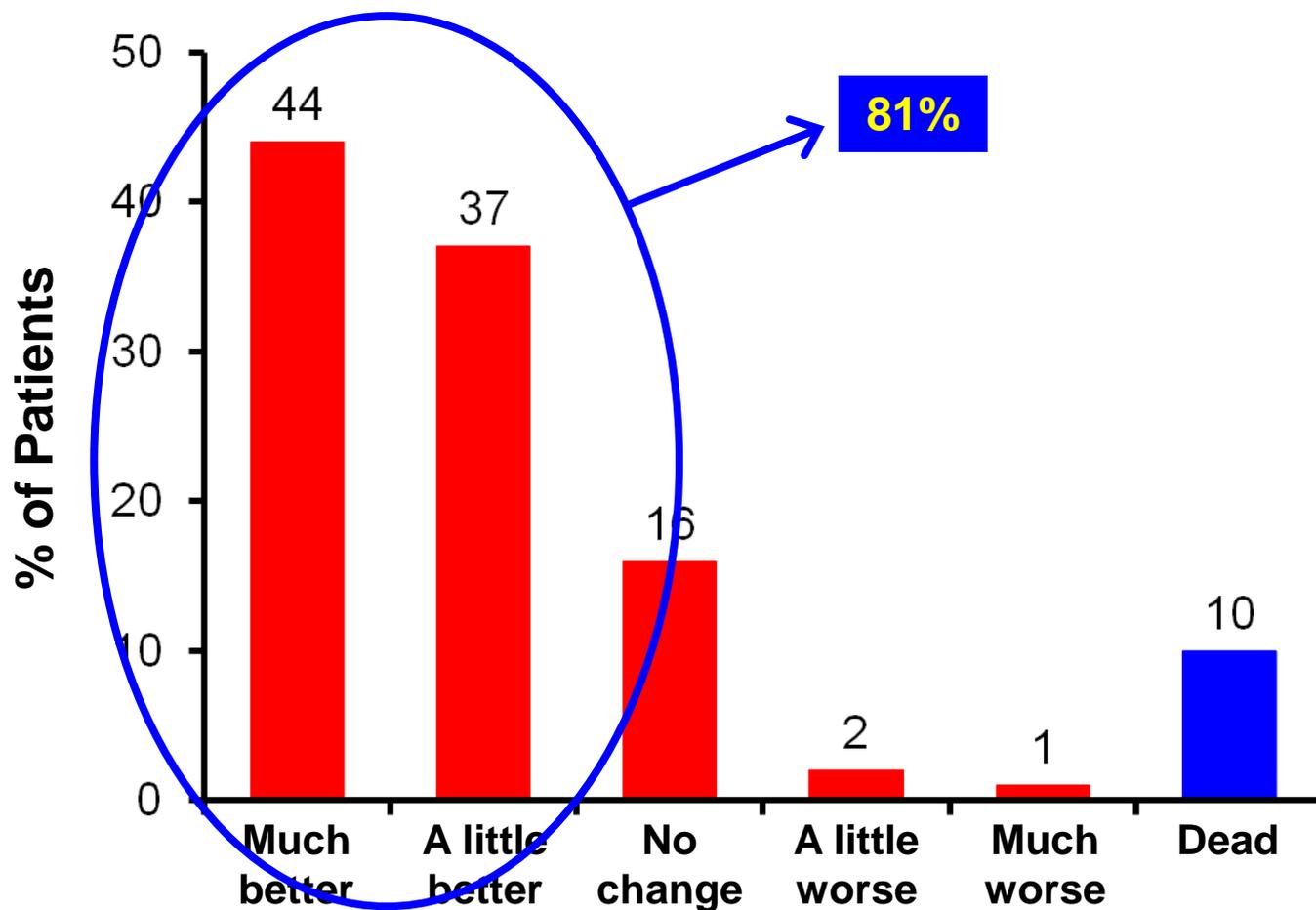


Elderly Patients Not Receiving CRT (%)

# The European CRT Survey: 1 year (9–15 months) follow-up results



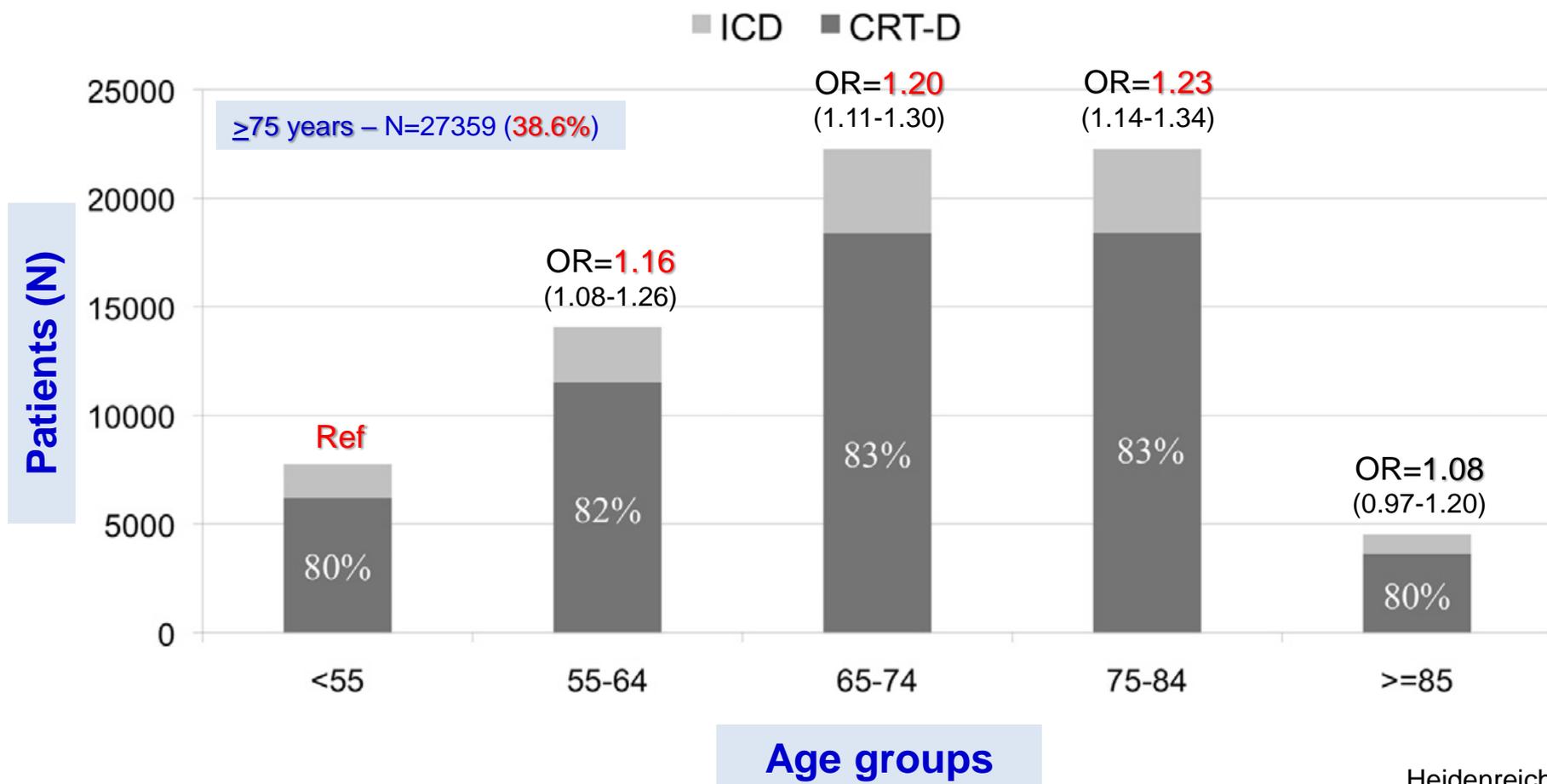
Patient self-reported global assessment and rate of death during follow-up



# Does Age Influence Cardiac Resynchronization Therapy Use and Outcome?



Use of CRT-D and ICD by Age Group Among Candidates for CRT-D  
 (the NCDR ICD registry: 2006-2009, N=70854, Age: 69 years, Men: 69%)

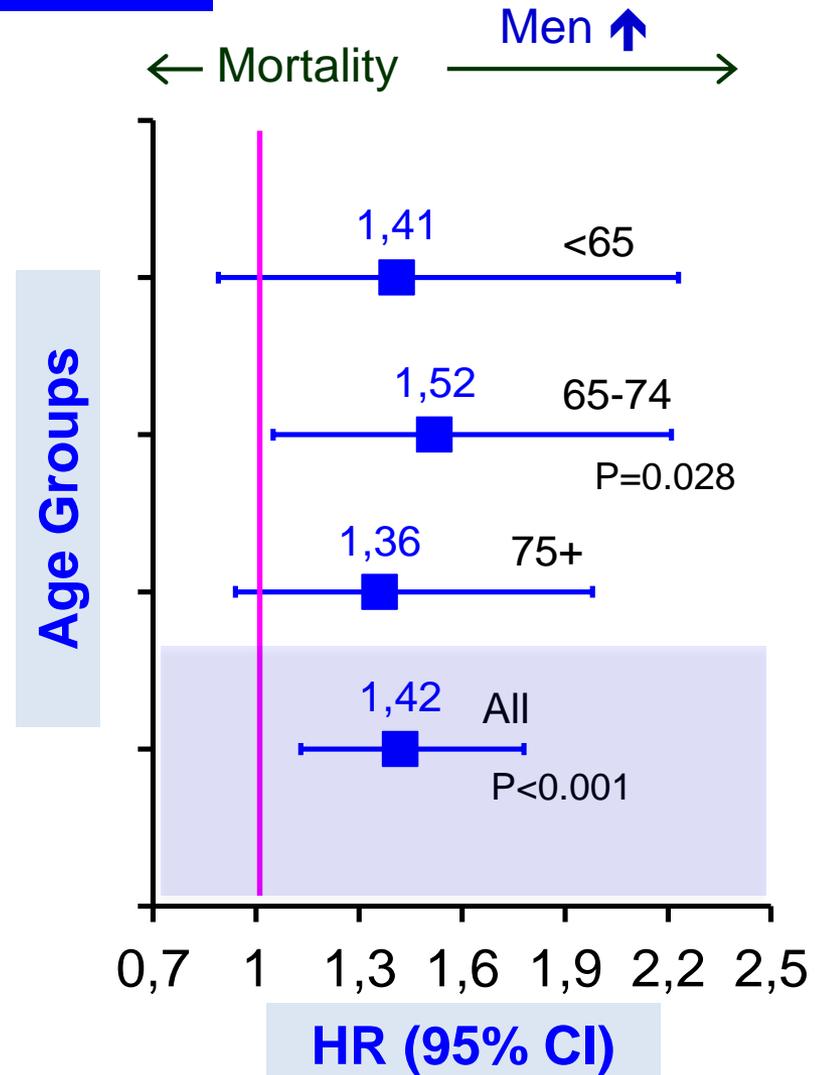
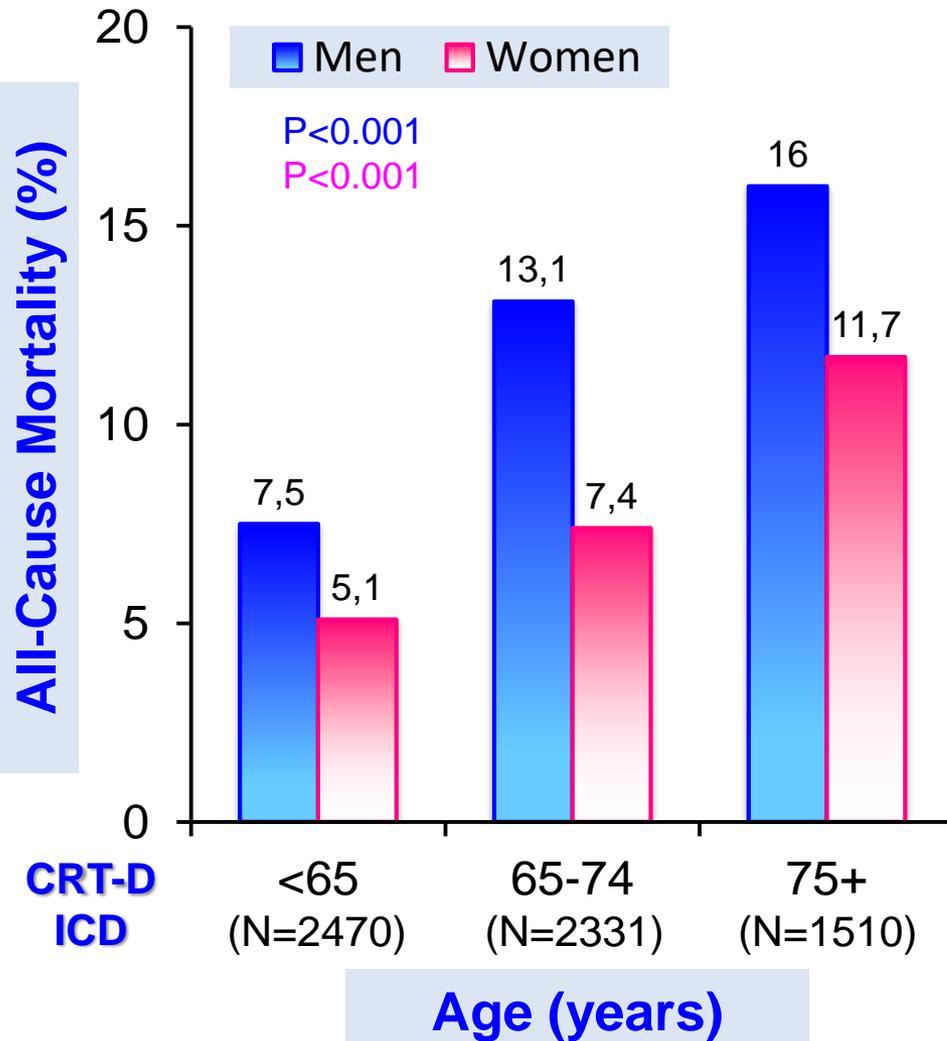


# Determinants of All-Cause Mortality in Different Age Groups in Patients With Severe Systolic Left Ventricular Dysfunction Receiving an Implantable Cardioverter Defibrillator (from the Italian ClinicalService Multicenter Observational Project)



Fumagalli S,  
Padeletti L, 2014

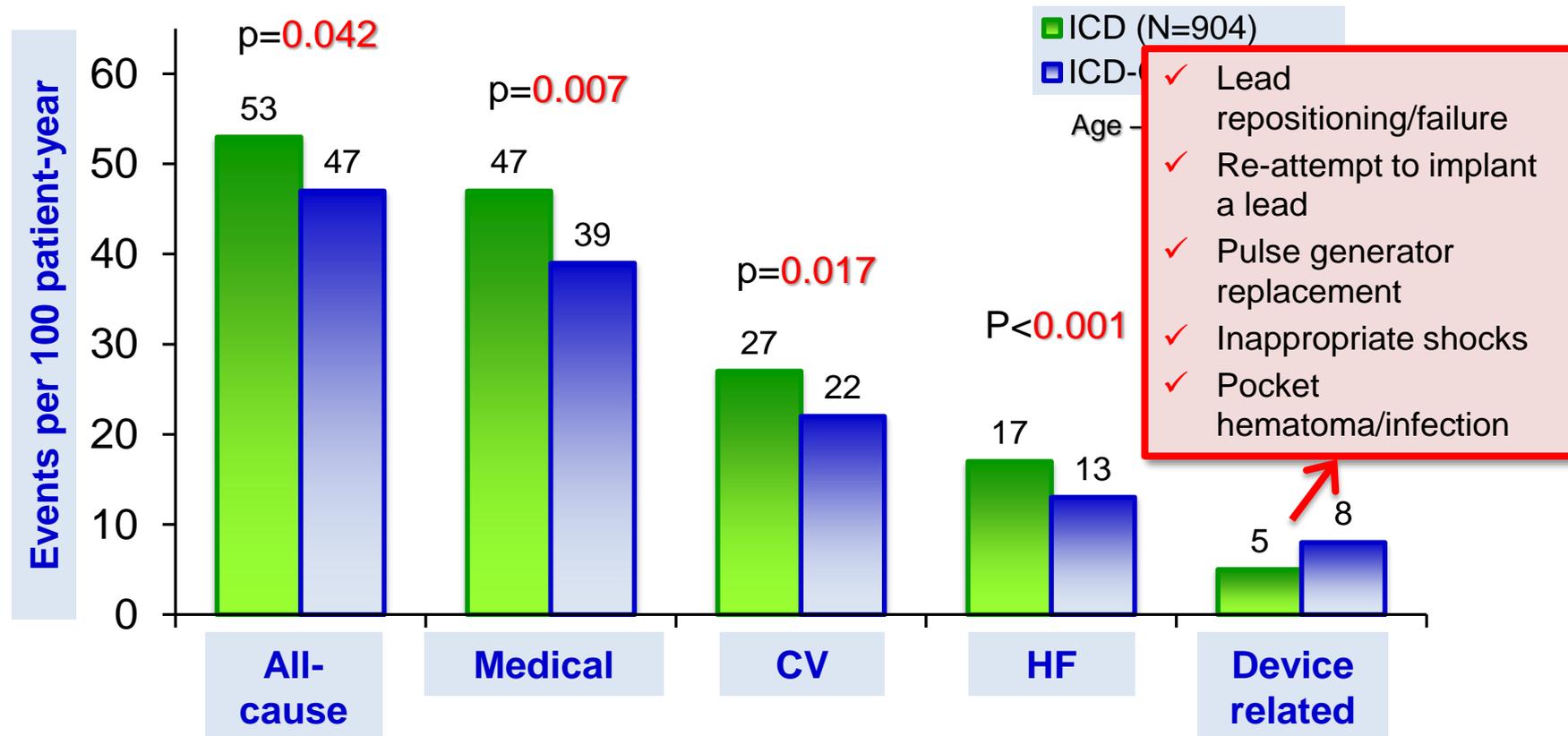
## All-cause mortality by age and gender



# Impact of Cardiac Resynchronization Therapy on Hospitalizations in the Resynchronization-Defibrillation for Ambulatory Heart Failure Trial



Hospitalizations within 18 months of randomization by treatment assignment to ICD or ICD-CRT in the Resynchronization-Defibrillation for Ambulatory Heart Failure Trial (RAFT)



CV – cardiovascular  
HF – heart failure