

2<sup>nd</sup>  
**DAILY  
CARDIOLOGY  
SYMPOSIUM**

CONCISE, PRECISE, PRACTICAL

# LEARNING OBJECTIVES & CASE VIGNETTE



Device therapy in cardiovascular diseases  
Cardiac resynchronization therapy



# Learning Objectives

- CRT function and components
- CRT in Normal sinus rhythm
  - Evaluation before CRT implantation
  - Criteria for patient selection (Rationale and Indication)
  - Role of imaging

# Learning Objectives (continued)

- CRT in Atrial Fibrillation
  - Rationale and Indication
- Indication for referring patient with PPM to upgrade to CRT
- How to choose between CRT-P & CRT-D
- ECG diagnosis of normal CRT function

# Case Vignette

- 65 Y/O gentleman, S/P CABG 10 years ago, asymptomatic with good functional class
- just came for routine follow-up
- **PMH:**
  - T2D (20 years)
  - Hypertension (20 years)
- **DH:**
  - Aspirin, 80 mg OD
  - Rosuvastatin, 20 mg OD
  - Enalapril, 10 mg BID
  - Metformin/empagliflozin 500/5 mg BID
  - Bisoprolol 10 mg OD
  - Eplerenone 25 mg OD

# Case Vignette (continued)

## ○ Ph/Ex:

- BMI: 28.5 kg/m<sup>2</sup>
- BP: 100/61 mmHg, HR: 62 bpm
- Heart & lungs: Unremarkable

## ○ Lab tests:

- Hb: 14.9 mg/dl, Cr: 0.8 mg/dL, eGFR: 78 ml/min
- FPG: 120 mg/dL, HbA1c: 7.1%
- TC: 156 mg/dL, LDLc: 65 mg/dL, HDLc: 55 mg/dL, TG: 180 mg/dL
- ECG: NSR, RBBB (QRS=155ms), Anteroseptal Q wave
- Echo: Mild LV dilation, EF=35%, moderate MR, Anteroseptal wall akinesia

# Stay Tuned with Daily Cardiology Symposium 1401

Device therapy in cardiovascular diseases

Khordad 27<sup>th</sup>, 11:30-13:00

**Cardiac resynchronization therapy**

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