

Cardiology Science Lunch Berlin

a weekly exchange of insights and ideas in cardiovascular medicine

The wearable-cardioverter-defibrillator- a useful tool to improve risk stratification for more beneficial ICD therapy

Prof. Helmut U. Klein

University of Rochester Medical Center

Heart Research Follow up Program

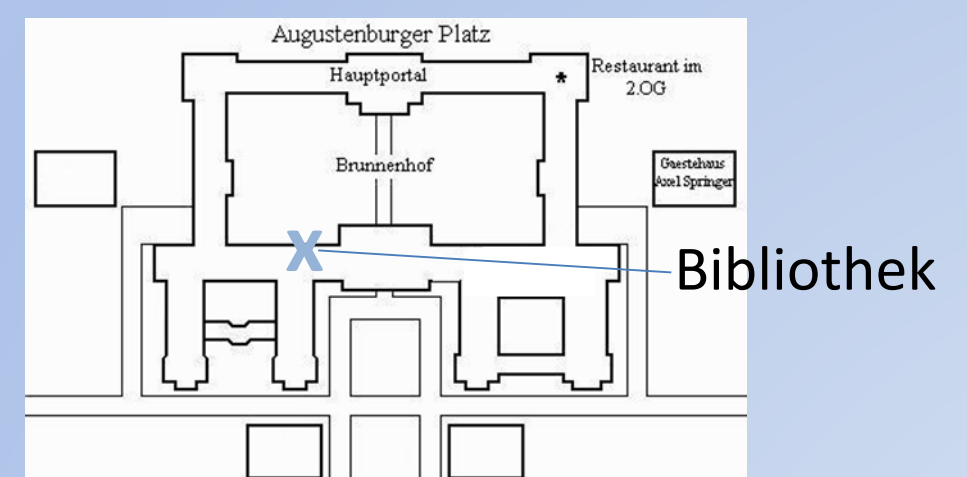
The implantable cardioverter-defibrillator (ICD) is the most effective approach to prevent sudden arrhythmic death (SCD). Current clinical guidelines for ICD implantation are based on 10-15 years old randomized ICD trials that used reduced left ventricular ejection fraction (LVEF) as the only risk parameter for ICD indication. In recent years we learned that better risk stratification beyond LVEF is warranted to increase long-term ICD benefit. The wearable cardioverter-defibrillator (WCD) protects the patient with a presumed risk of life-threatening ventricular tachyarrhythmias and SCD during a necessary time of risk assessment until a permanent risk of SCD may be confirmed and ICD implantation is indicated or the arrhythmic risk can be ignored and ICD therapy may be deferred, avoiding unnecessary and potentially harmful ICD implantation. Prof. Klein has more than 15 year experience with WCD use and will discuss the various clinical settings and results of WCD application

Wednesday, 09.11.2016

12:00 – 13:00h

Bibliothek at DHZB

Augustenburger Platz 1, Berlin



The Cardiology Science Lunch Team

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The following CSLB
is on 16.11.2016

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