

BIOPACE TRIAL PRELIMINARY RESULTS

Biventricular Pacing for Atr<u>i</u>o-ventricular Bl<u>o</u>ck to <u>P</u>revent C<u>a</u>rdia<u>c</u> D<u>e</u>synchronization

BioPace Trial Investigators and Coordinators

DISCLOSURE

St. Jude Medical : consultant



BACKGROUND

- Atrio-Ventricular Block (AVB) is a common disease currently treated with Right Ventricular (RV) pacing.
- However numerous trials (DAVID, MOST...) have shown that RV pacing may have deleterious long-term effects on Left Ventricular (LV) function and clinical outcome.



STUDY PURPOSE AND ENDPOINTS

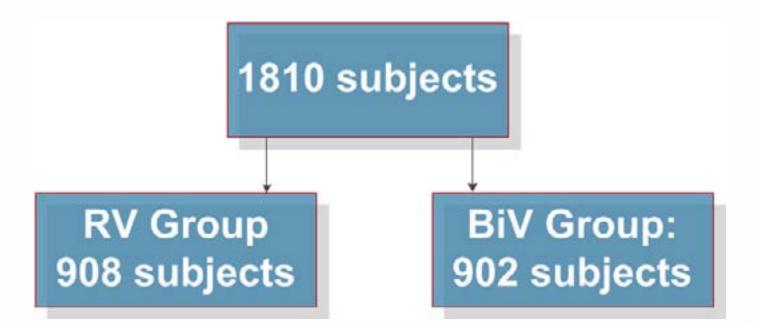
• PURPOSE

- BiV pacing is superior to RV pacing in patients with AVB who require permanent ventricular pacing
- PRIMARY ENDPOINT
 - Combination of time-to-death or first hospitalization due to Heart Failure (HF)



STUDY FLOW CHART

Enrollment period from May 2003 to September 2007

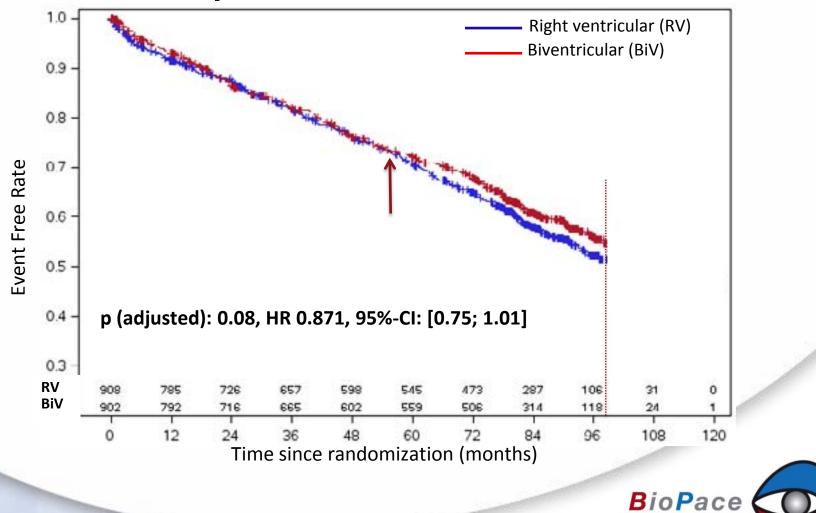


Mean FU: 5.6 years 688 combined events

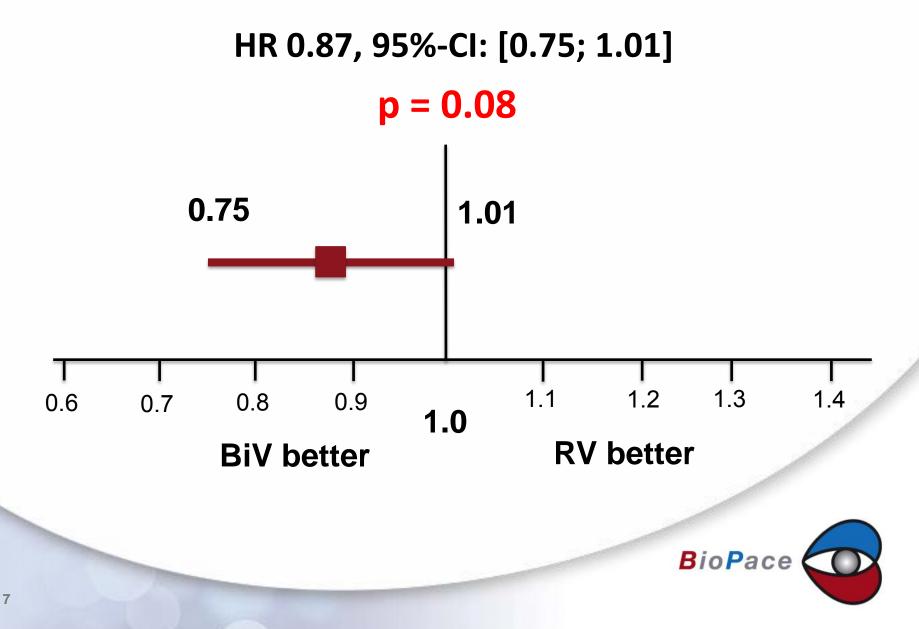


MORTALITY/HF HOSPITALIZATION

1810 patients / LVEF 55.4±12.2%



MORTALITY/HF HOSPITALIZATION





 In patients with AVB who need implantation of a permanent pacemaker there is a non statistically significant trend in favor of BiV over RV pacing mode.

 Additional analyses will perhaps identify subgroups for which BiV confers a clear benefit.

