

AHA: Pacing Two Sides of Heart Better Than One

Chris Kaiser

Heart failure patients with an electrical problem that requires a single-lead pacemaker do better when both ventricles are paced, a randomized trial found.

Patients who underwent biventricular pacing had a 26% reduction in the combined endpoint of mortality, heart failure-related urgent care, and worsening heart function, according to Anne Curtis, MD, of the University of Buffalo School of Medicine in N.Y., and colleagues.

These patients with both a right and left ventricular pacing lead also had a 27% relative risk reduction in the composite endpoint of heart failure urgent care and all-cause mortality, Curtis reported here at the annual meeting of the American Heart Association.

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