

FYZIOLOGICKÁ STIMULÁCIA – SKÚSENOSTI A VÝZVY

Vašková

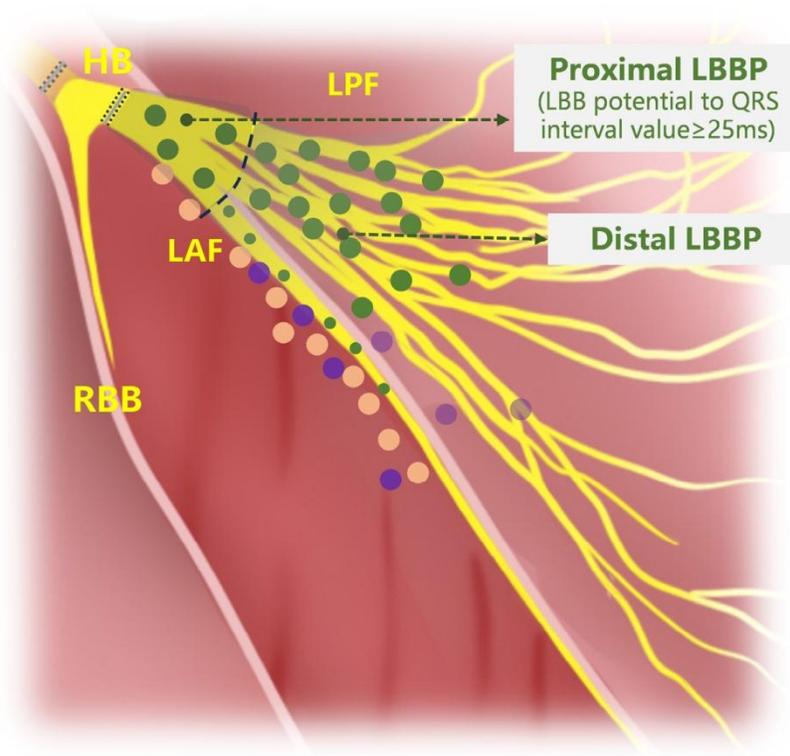
9.–11. listopadu 2025 | Clarion Hotel Olomouc

XXII.

České a slovenské
symposium o arytmiích
a kardiostimulaci



KLASIFIKÁCIA A DEFINÍCIA LBBaP



..... Possible sites of conduction block

Conventional signs to confirm LBB capture

- **LBBP**
 - **Selective LBBP:** A discrete component between the local ventricular electrogram and the pacing artifact.
 - **Transition signs:** Abrupt changes in S-LVAT, paced QRS morphology and other features
 - **Modified LVAT:** Based on the difference between S-LVAT and reference intervals like intrinsic LVAT, LBB potential-LVAT, HBP-LVAT, or RV peak time
 - **Predictors:** LBB potential especially with current of injury, fixation beat with RBBB pattern

- **LVSP:** Only capture the left septal myocardium

- **Unclassified LBBaP**
 - Uncertain LBB capture
 - No test for LBB capture



Canadian Journal of Cardiology
Volume 33, Issue 12, December 2017, Pages 1736.e1-1736.e3



Case Report

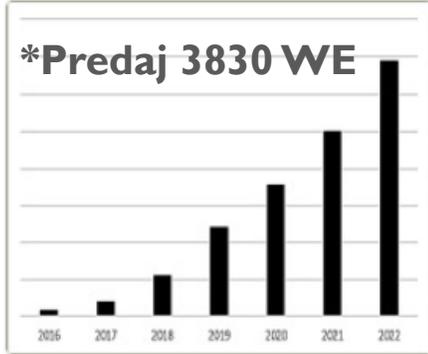
A Novel Pacing Strategy With Low and Stable Output: Pacing the Left Bundle Branch Immediately Beyond the Conduction Block

Weijian Huang MD, FHRSc, Lan Su MD, Shengjie Wu MD, Lei Xu MD, Fangyi Xiao MD, Xiaohong Zhou MD, Kenneth A. Ellenbogen MD, FHRSc

2016



2017



Circulation: Arrhythmia and Electrophysiology
Volume 9, Issue 3, March 2016; Page e003344
<https://doi.org/10.1161/CIRCEP.115.003344>

ORIGINAL ARTICLE

Feasibility and Acute Hemodynamic Effect of Left Ventricular Septal Pacing by Transvenous Approach Through the Interventricular Septum

Masih Mafi-Rad, MD, Justin G.L.M. Luermans, MD, PhD, Yuri Blaauw, MD, PhD, Michel Janssen, BSc (MT), Harry J. Crijns, MD, PhD, Frits W. Prinzen, PhD, and Kevin Vernooij, MD, PhD

10/2022



Prvá implantácia
v KC Prešov

11/2022



JOURNAL ARTICLE

Left bundle branch area pacing outcomes: the multicentre European MELOS study

Marek Jastrzębski, Grzegorz Kielbasa, Oscar Cano, Karol Curila, Luuk Heckman, Jan De Pooter, Milan Chovanec, Leonard Rademakers, Wim Huybrechts, Domenico Grieco ... Show more

Author Notes

European Heart Journal, Volume 43, Issue 40, 21 October 2022, Pages 4161–4173,

2023



2023 HRS/APHRS/LAHRs guideline on cardiac physiologic pacing for the avoidance and mitigation of heart failure

Mina K. Chung, MD, FHRSc, Kristen K. Patton, MD, FHRSc, Chu-Pak Lau, MD, FHRSc, CCDS #3, Sarah Ann Worsnick, PAC, FHRSc, CEPS, CCDS #2, Wojciech Zareba, MD, PhD, Emily P. Zeitler, MD, MHS, FHRSc ... Show more

JOURNAL ARTICLE

European Society of Cardiology (ESC) clinical consensus statement on indications for conduction system pacing, with special contribution of the European Heart Rhythm Association of the ESC and endorsed by the Asia Pacific Heart Rhythm Society, the Canadian Heart Rhythm Society, the Heart Rhythm Society, and the Latin American Heart Rhythm Society

Michael Glikson, Haran Burri, Amr Abdin, Oscar Cano, Karol Curila, Jan De Pooter, Juan C Diaz, Inga Drossart, Weijian Huang, Carsten W Israel ... Show more

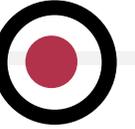
JOURNAL ARTICLE

EHRA clinical consensus statement on conduction system pacing implantation: endorsed by the Asia Pacific Heart Rhythm Society (APHRS), Canadian Heart Rhythm Society (CHRS), and Latin American Heart Rhythm Society (LAHRs)

Haran Burri, Marek Jastrzebski, Oscar Cano, Karol Curila, Jan de Pooter, Weijian Huang, Carsten Israel, Jacqueline Joza, Jorge Romero, Kevin Vernooij ... Show more

EP Europace, Volume 25, Issue 4, April 2023, Pages 1208–1236,

2025



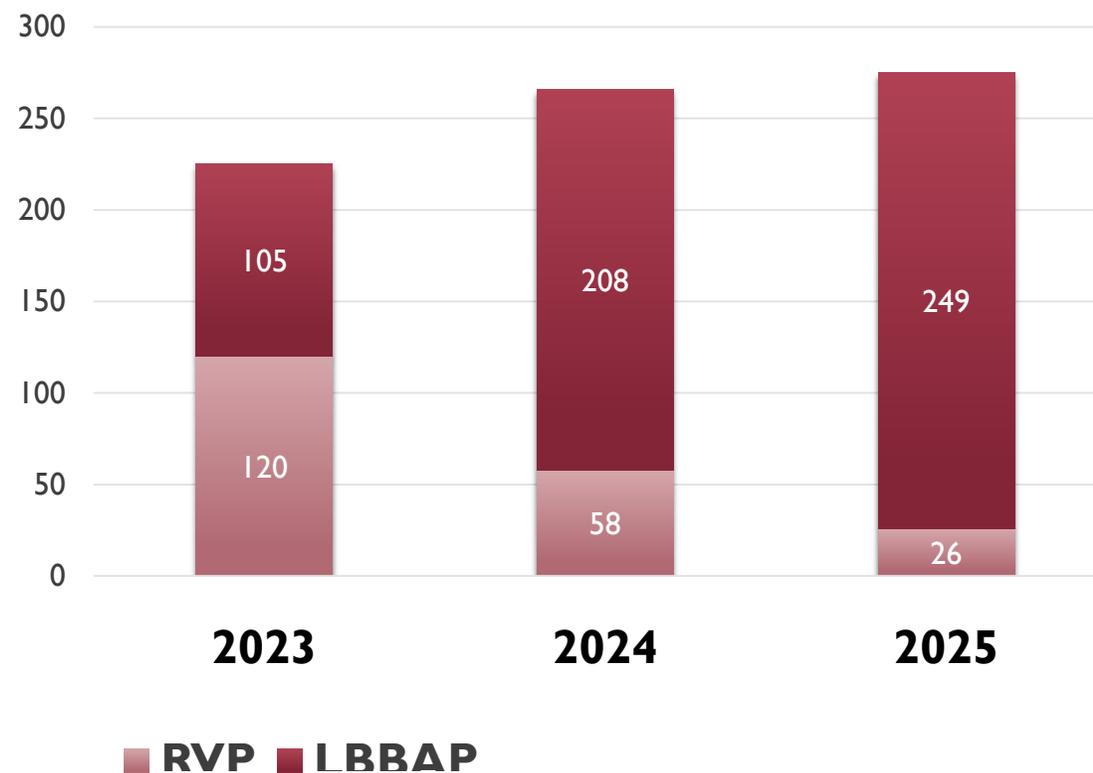
LBBaP v KC Prešov



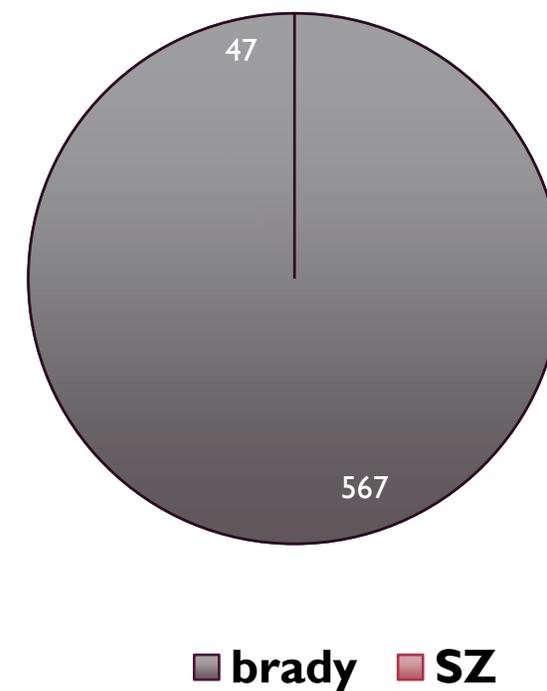
Základné info

- 29.11.2022
- 614 pts do 31.10
- 50 SDL (8%) vs 564 LLL
- 47 SZ (8,3%)
- Od 07/2025 UHF mapovanie

Porovnanie zastúpenia RVP a LBBaP



Podiel SZ

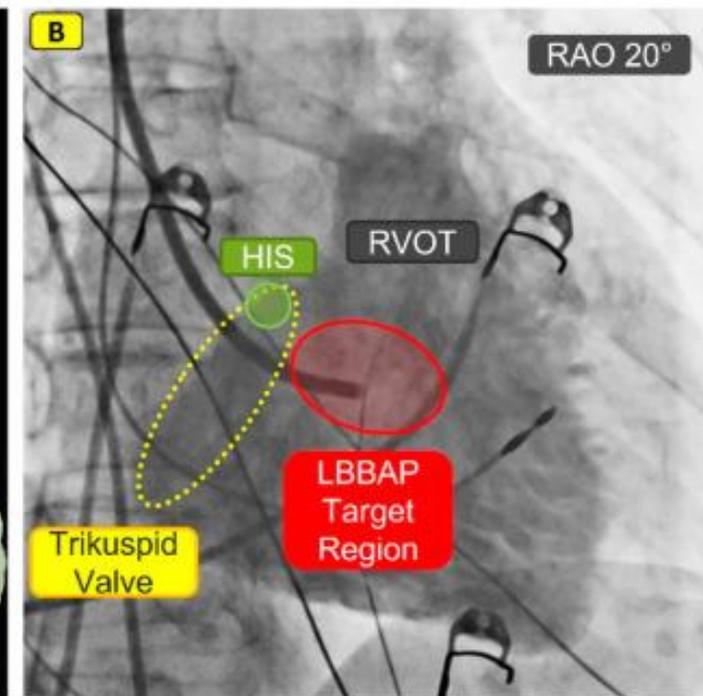
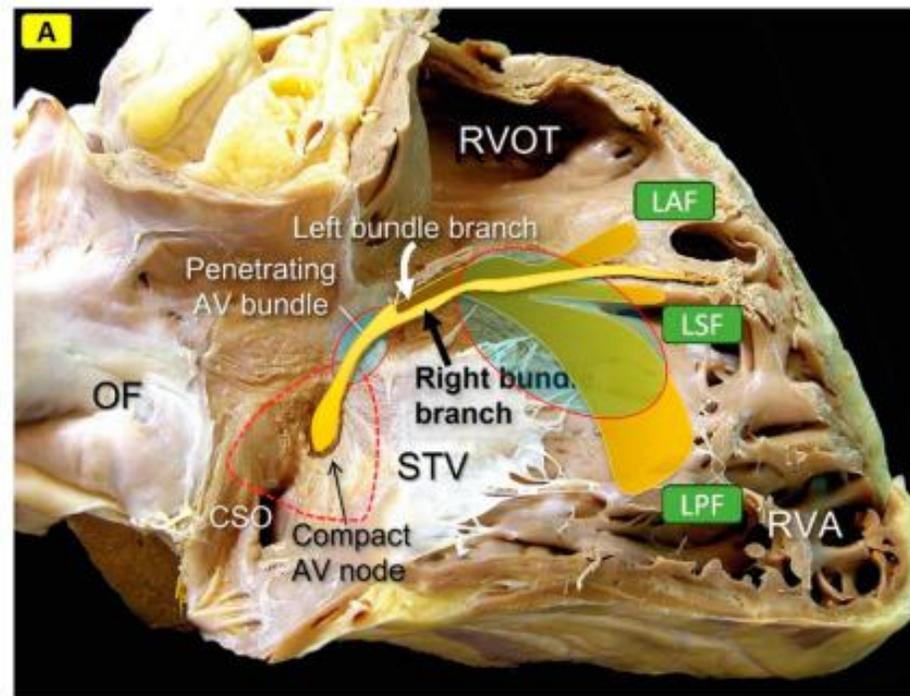
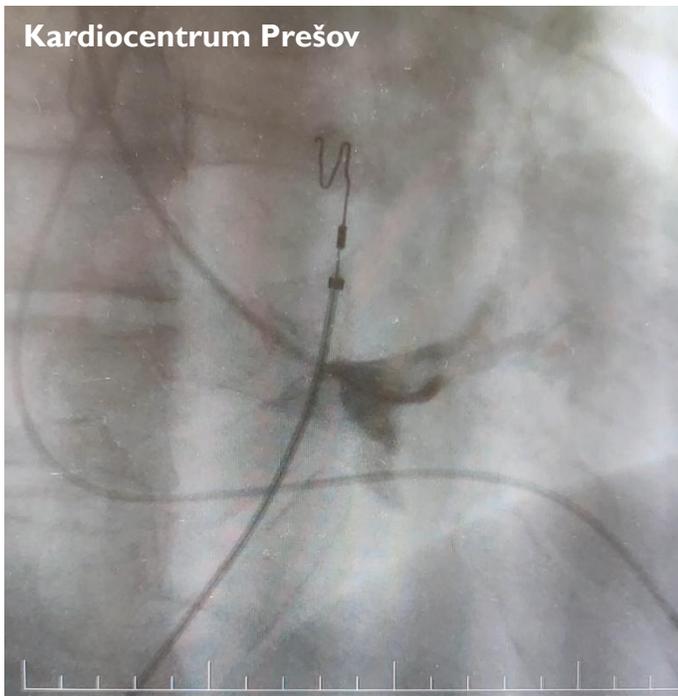


TECHNICKÉ ASPEKTY

- **Target area na pravej strane**
- **Prechod cez septum**
- **Dôkaz stimulácie prevodového systému**
- **Stabilita**

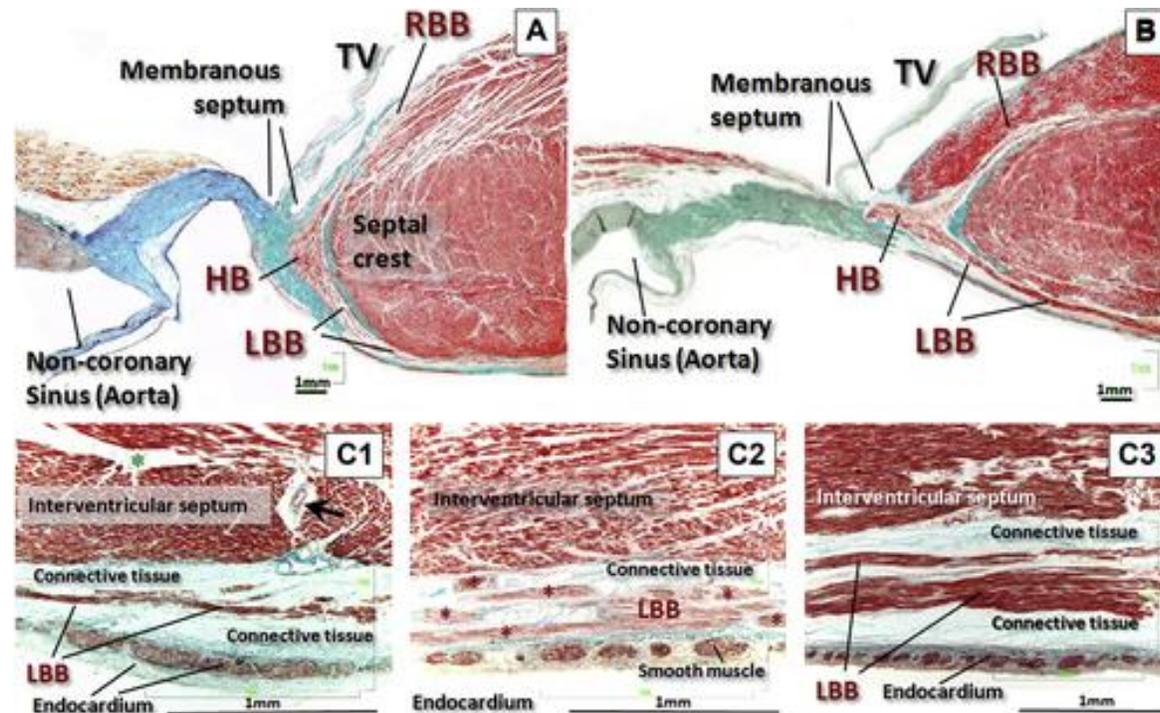
PROCEDURÁLNE VÝZVY

- kontrast
- správne identifikovať „target areu“: midseptálna pozícia na pravej strane septa



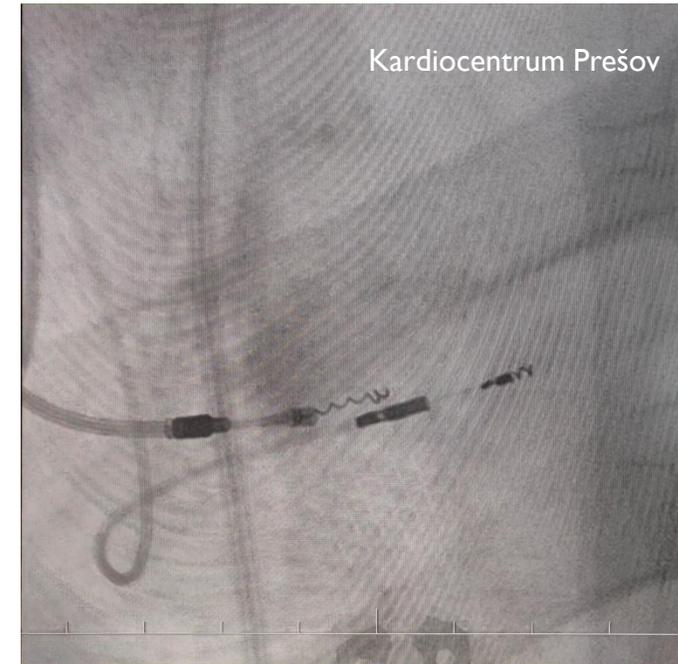
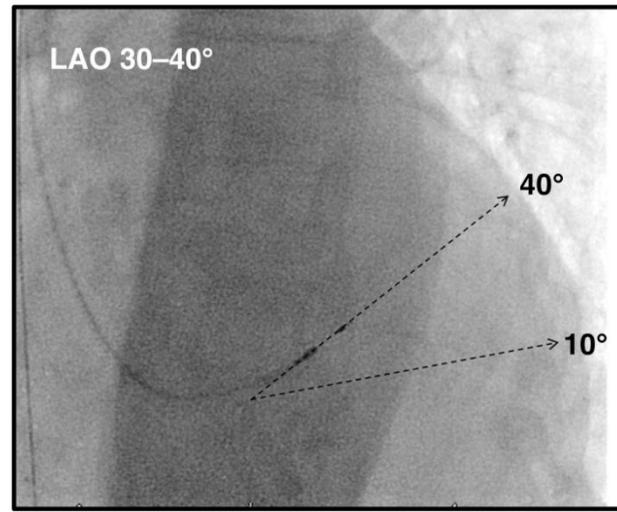
PROCEDURÁLNE VÝZVY

- transeptálna fixácia elektródy na ľavú stranu septa do LBBaP:
- ❖ Nemožnosť penetrovať cez septum: jazva/fibróza/tuhé septum, „namotávanie“ tkaniva na helix, poškodenie helixu, entanglement



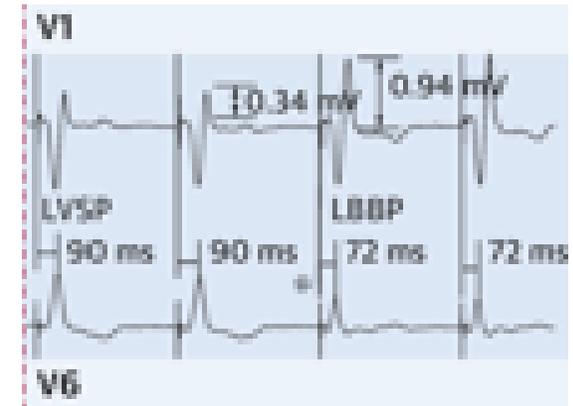
PROCEDURÁLNE VÝZVY

- transeptálna fixácia elektródy na ľavú stranu septa do LBBaP:
- ❖ deformácia sheathu, **zlá opora v sheathe, pozícia kolmo na septum**

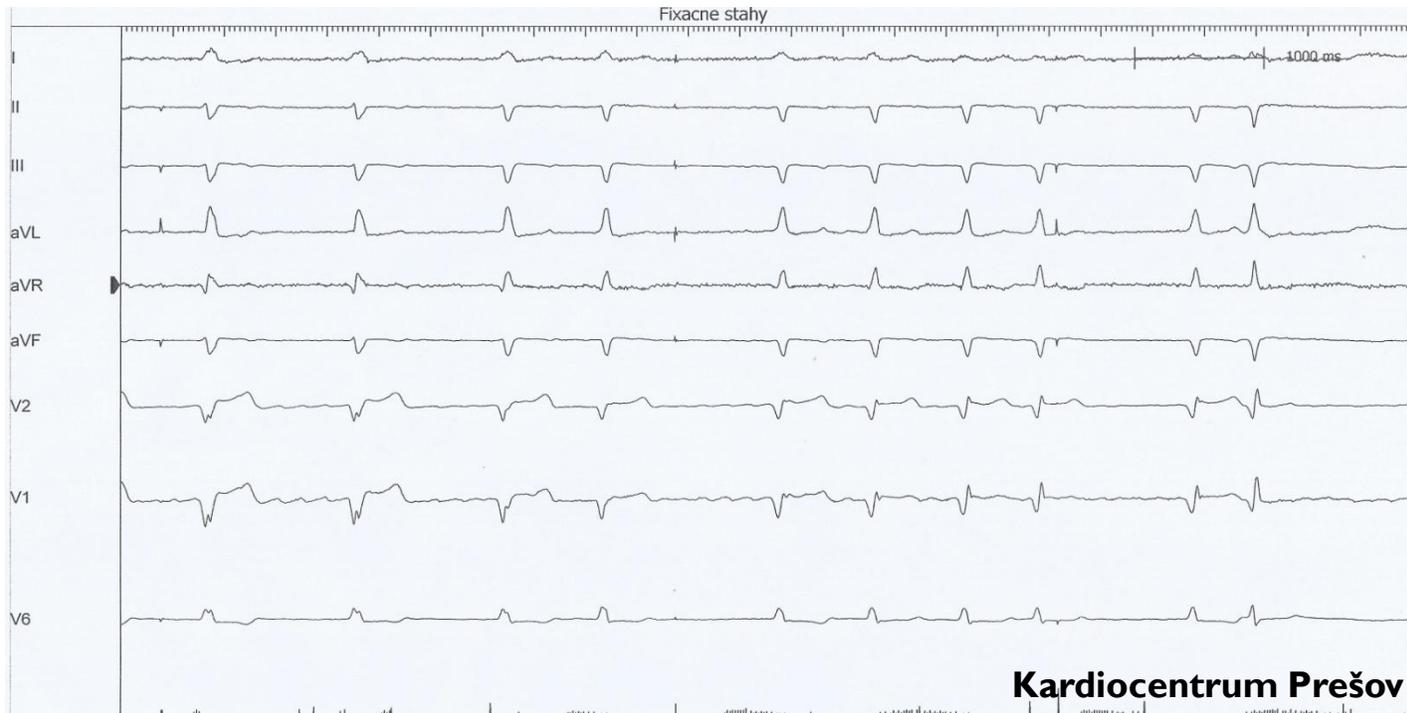
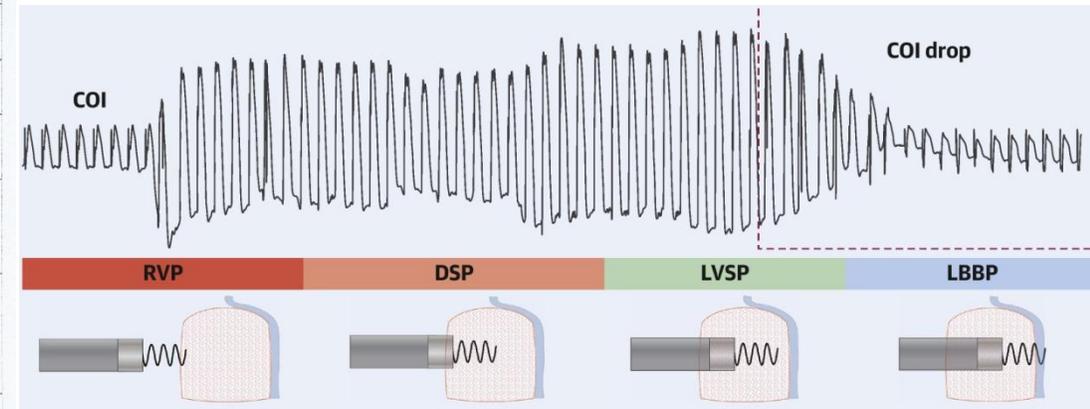


PROCEDURÁLNE VÝZVY

- transeptálna fixácia elektródy na ľavú stranu septa do LBBaP



9.5 ± 4.7 28.4 ± 9.3 27 ± 10.1 16.9 ± 1.5



Kardiocentrum Prešov



KRITÉRIÁ PRE POTVRDENIE LBBPc (capture) A ICH LIMITÁCIE

✓ prítomnosť terminálneho R' / r' V1

! uloženie elektród (príliš ↑)

! pomalá aktivácia cez LBB pri HF cez „chorý“ prevodový systém (functional DSP, LVSP)

! simultánna aktivácia pri rýchlej transeptálnej aktivácii, retrogr. HB a RBB prevod.

! anodal stimulácia, fusion pacing

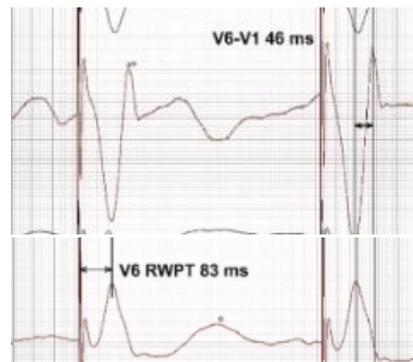
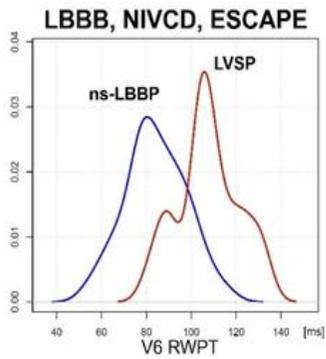
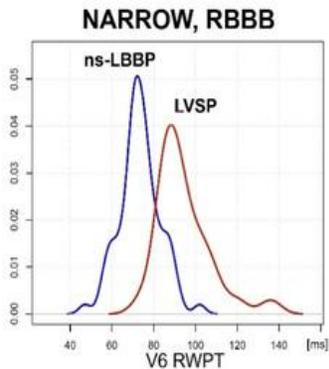
! aj pri RVSP

✓ V6RWPT (LVAT) < 75ms (80ms)

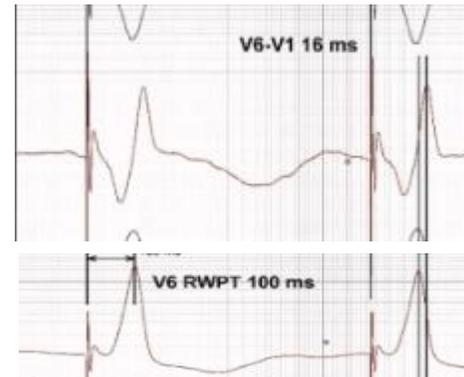
! apikálna/inferiorna pozícia elektródy

! dilatované odd, spomalené vedenie prevodovým systémom

✓ V6-V1 interpeak > 44ms (33ms)

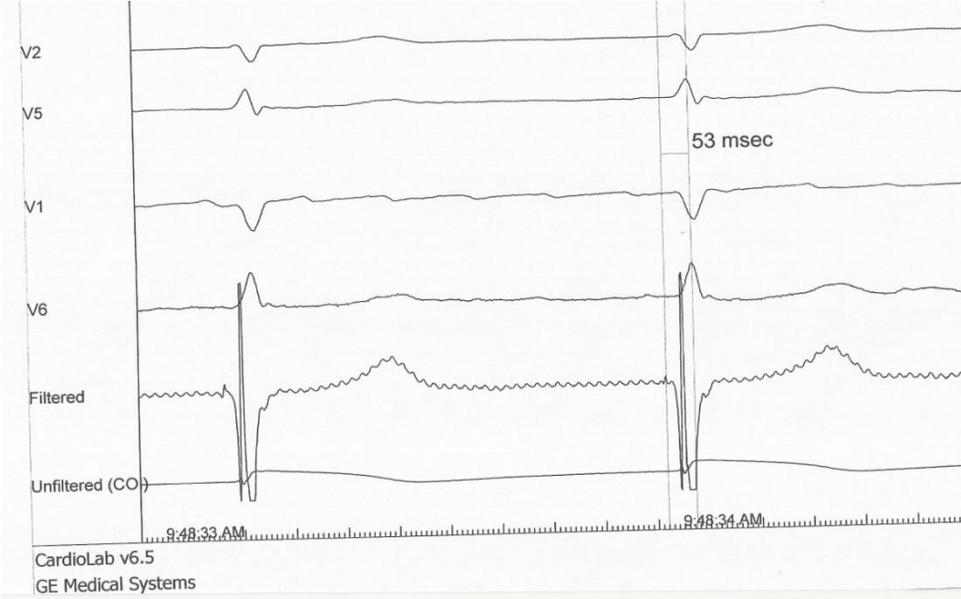
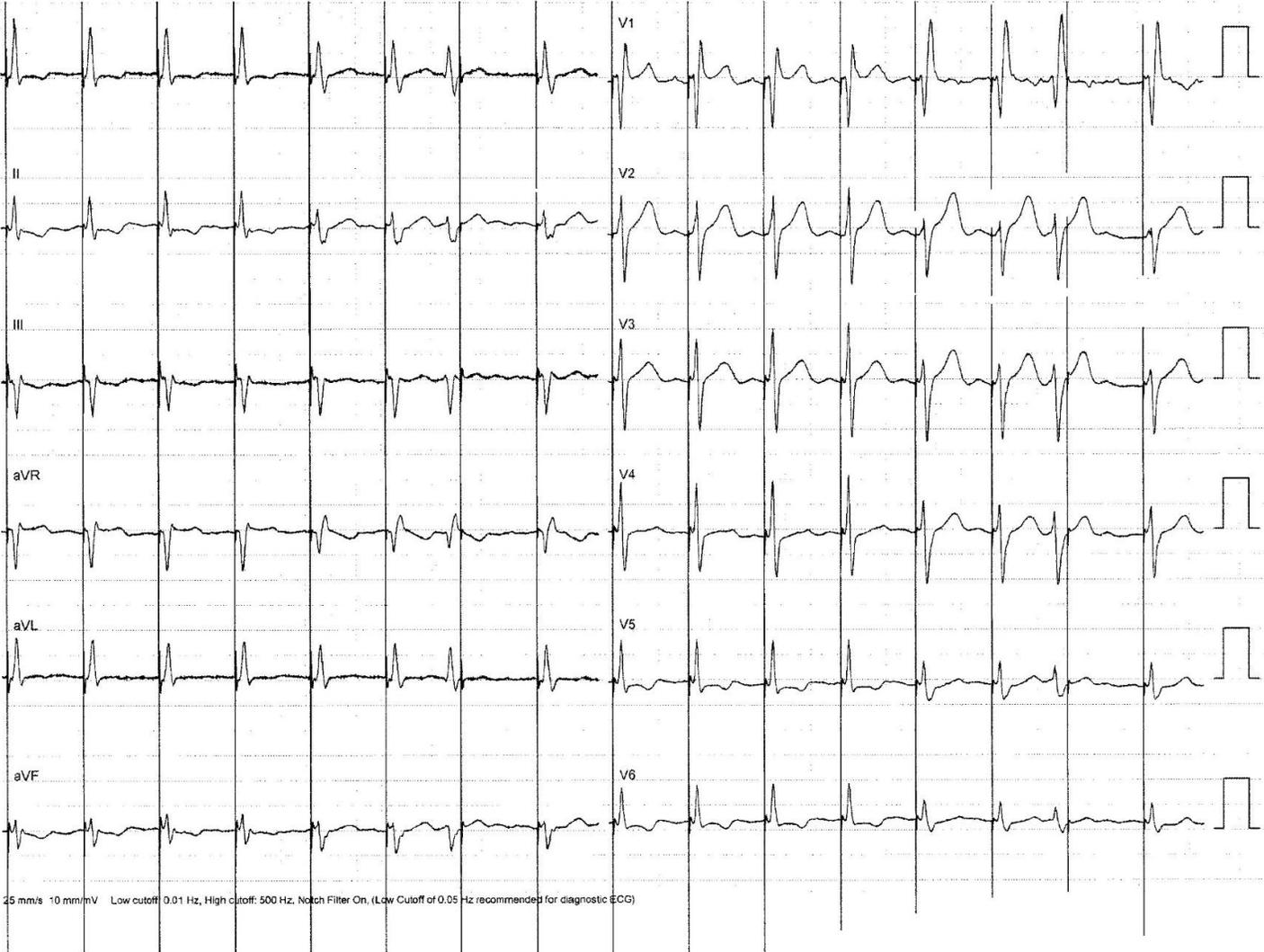


nsLBBP

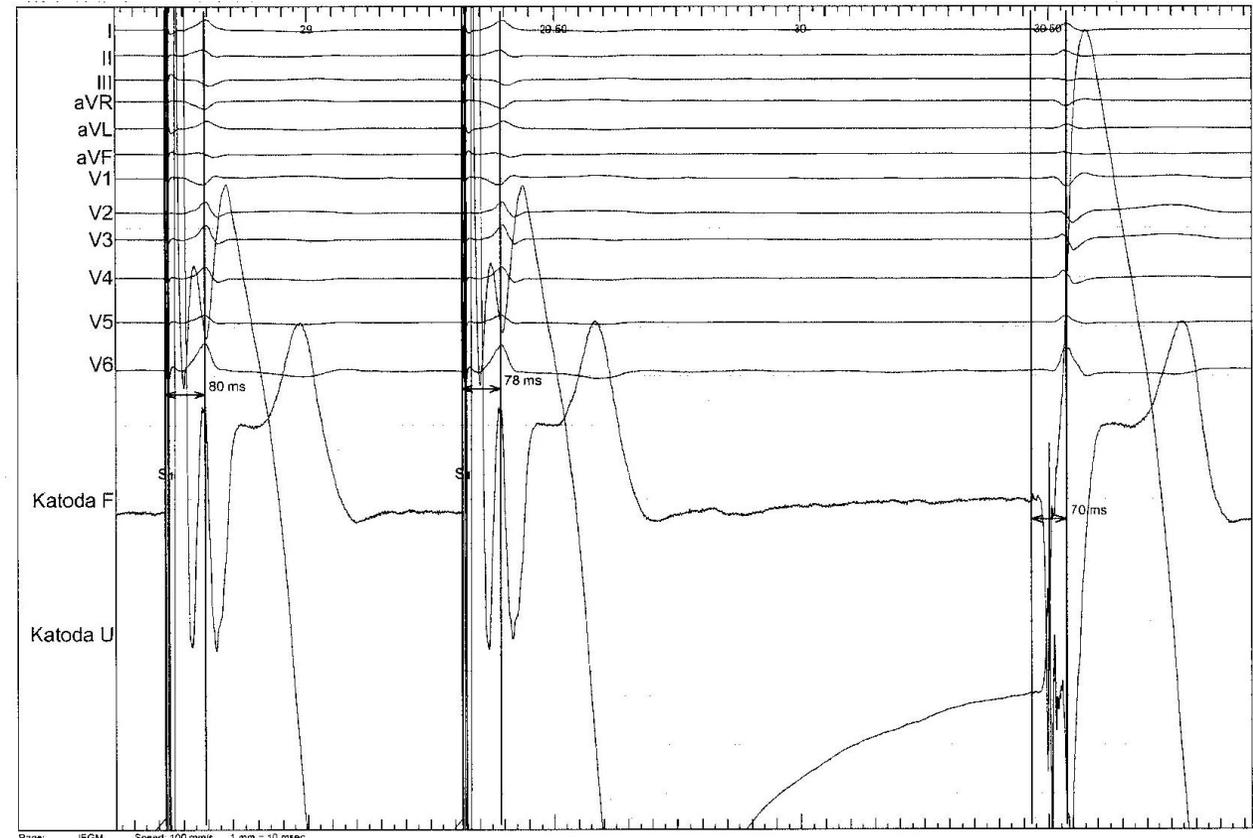
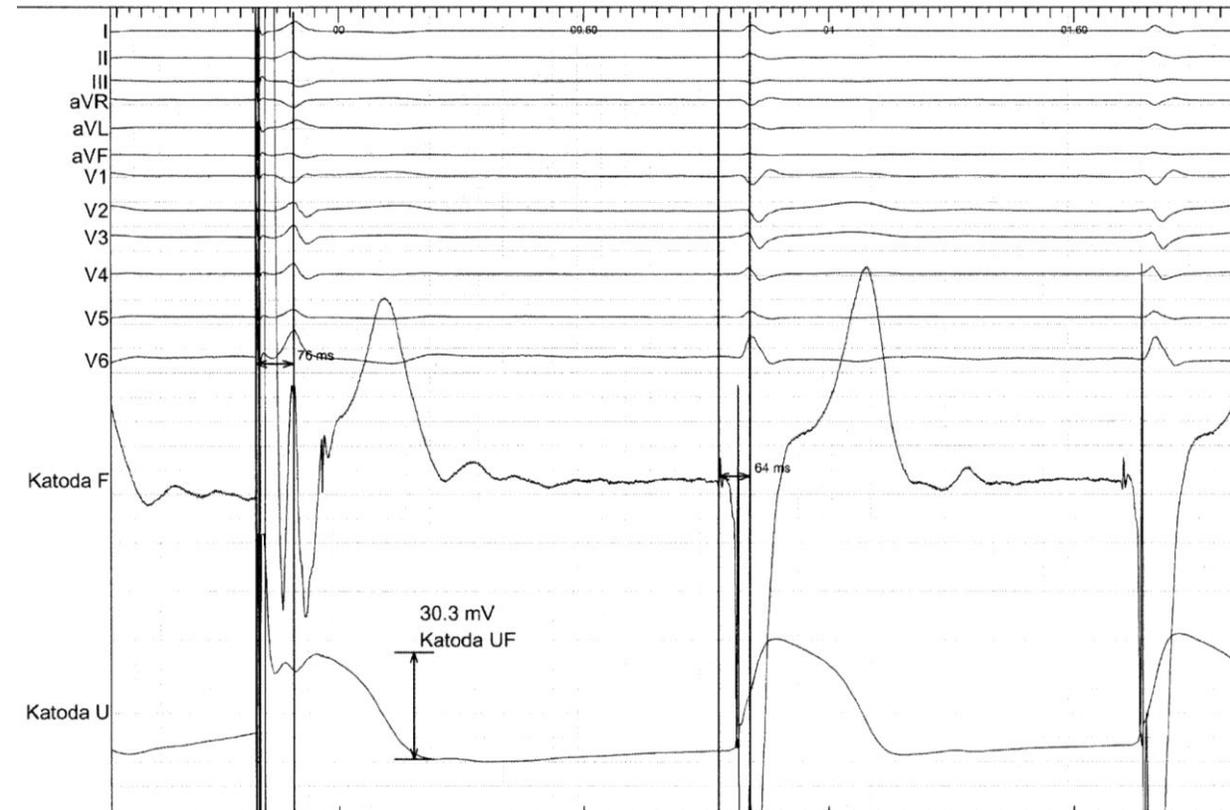


LVSP

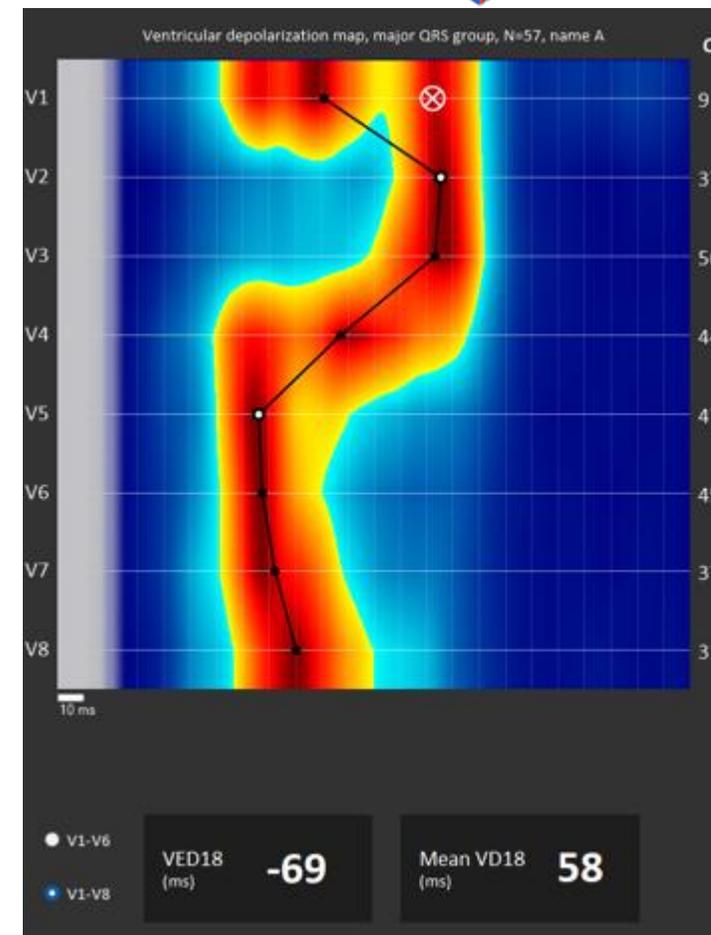
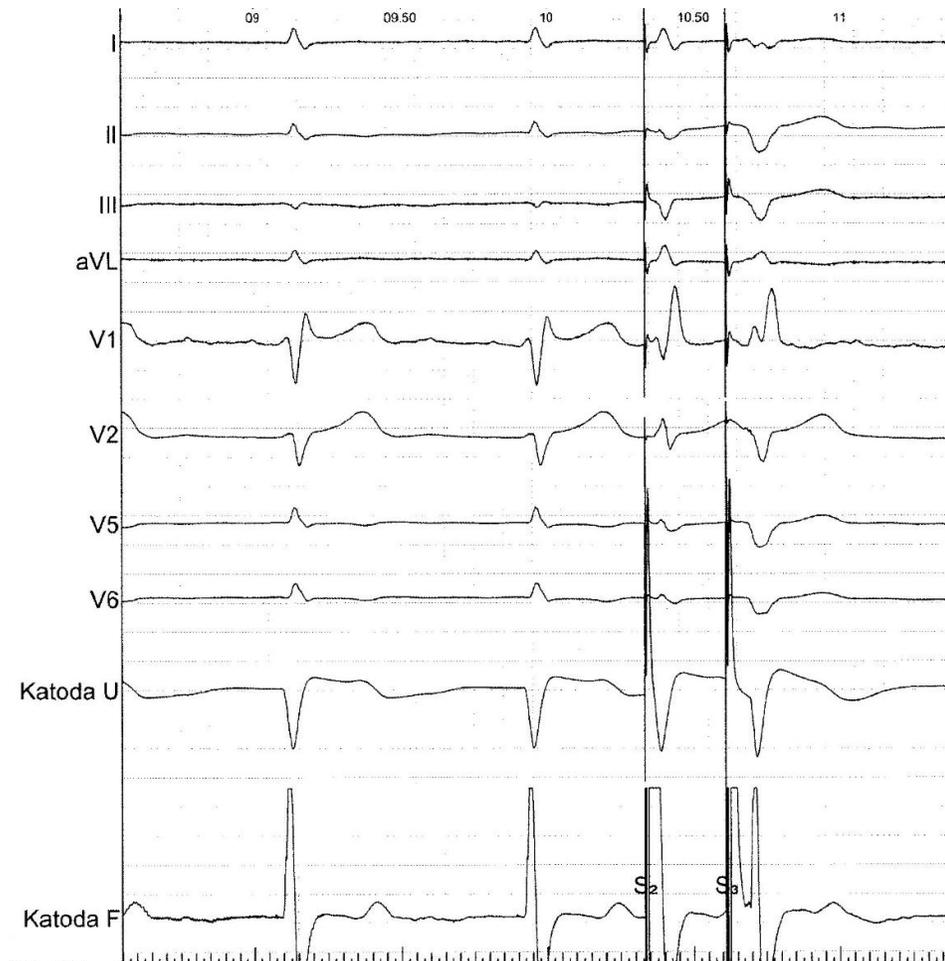
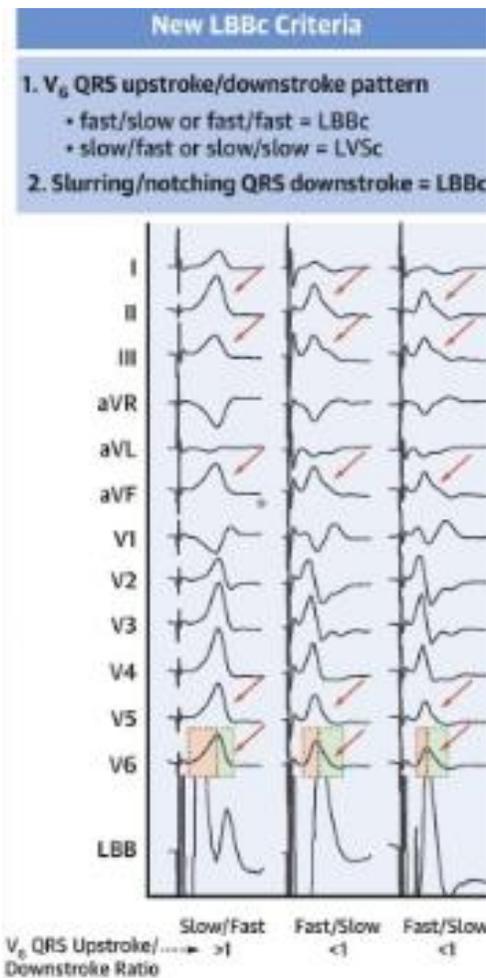
TRANZÍCIA = zlatý štandard pre potvrdenie LBBPc, LBBpo



LBBpo – individualizované meranie LVAT



ĎALŠIE MOŽNOSTI AKO POTVRDIŤ LBBPc



STABILITA ELEKTRÓDY

✓ Kontrola stability – dostatočná vôľa – slack

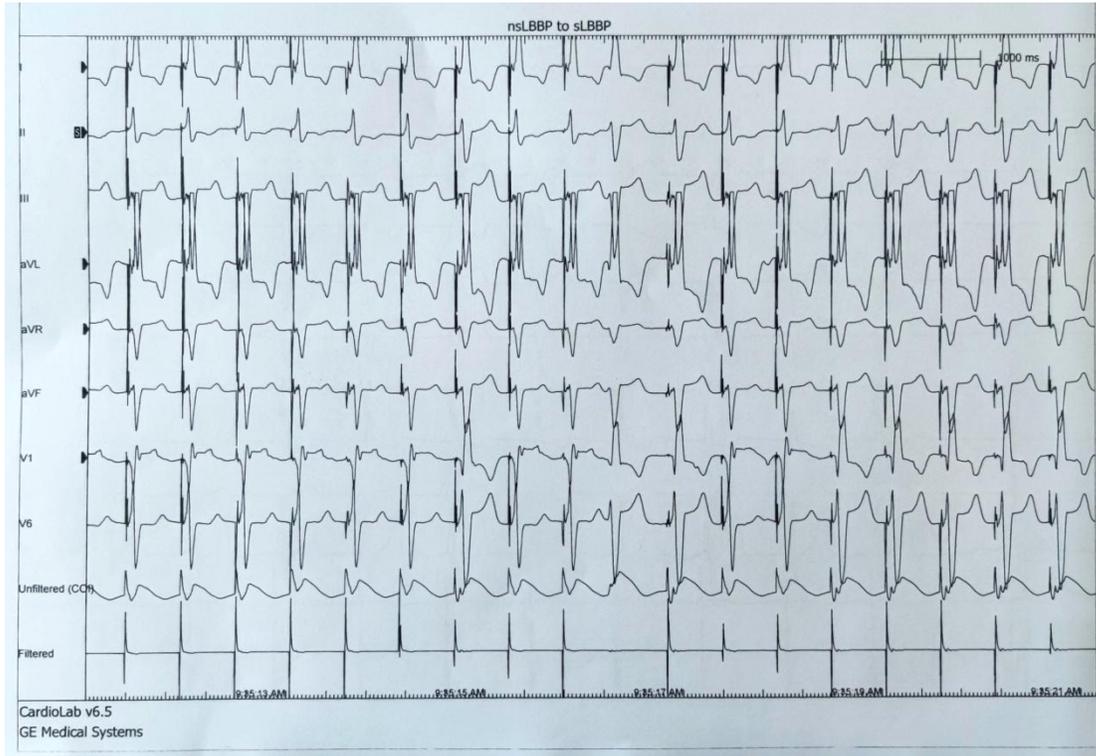
✓ Znamky včasnej mikrodislokácie: ↑ COI

↑ V6RWPT

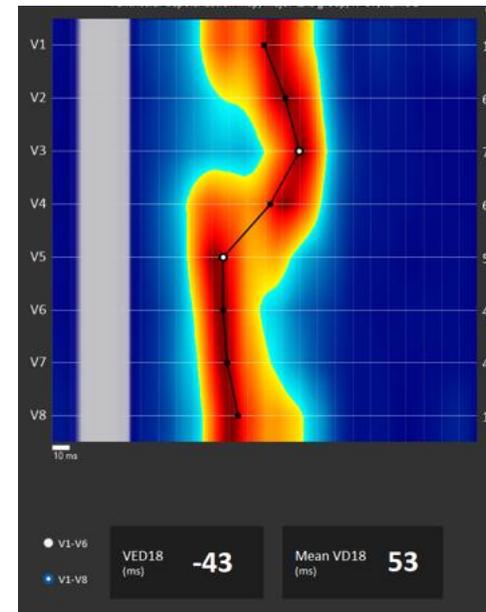
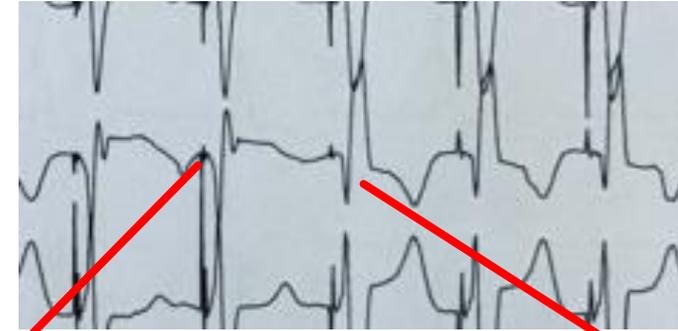
↓ LBBpo

↓ V1 R wave

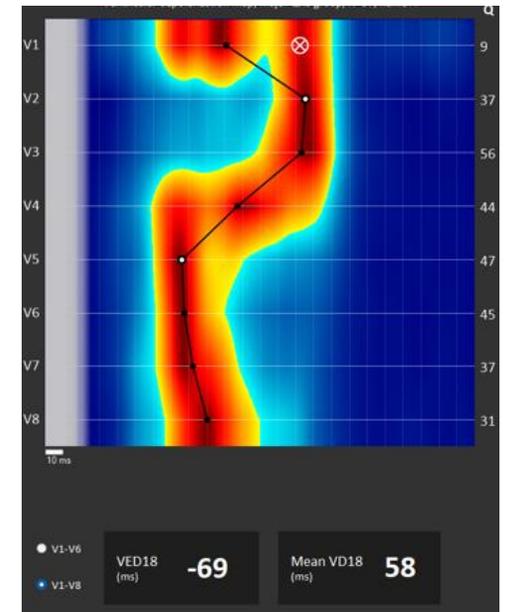
nsLBBP a sLBBP



- Rýchla aktivácia lat. steny LV
- Na úkor interventrikulárnej dyssynchronie pri oneskorenej aktivácii pravej komory
- Predĺženie šírky QRS pri sLBBP

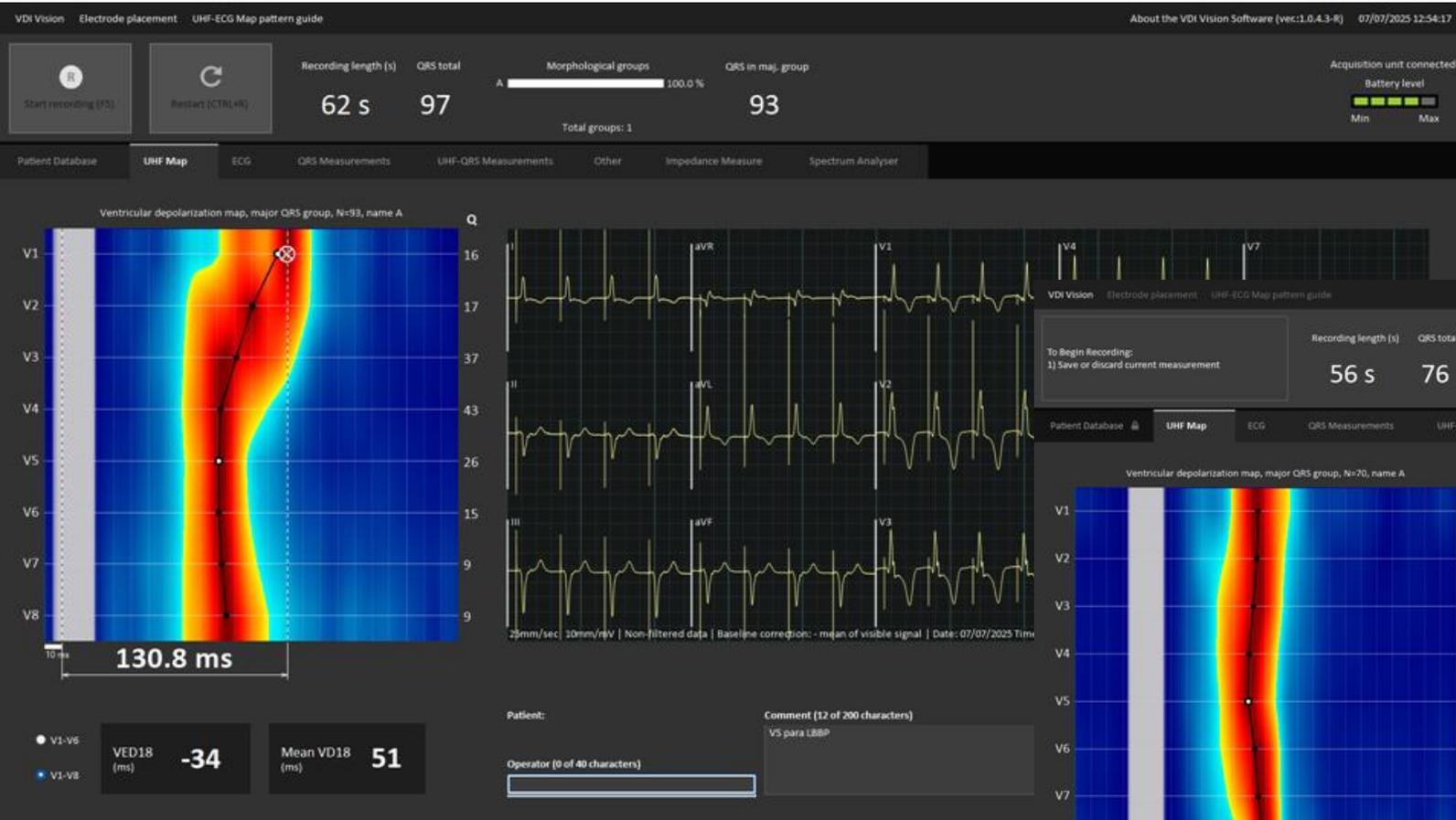


nsLBBP



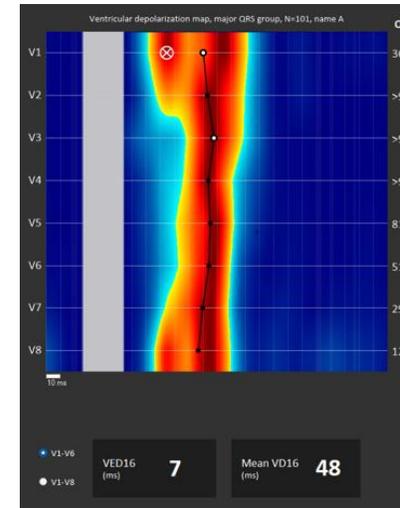
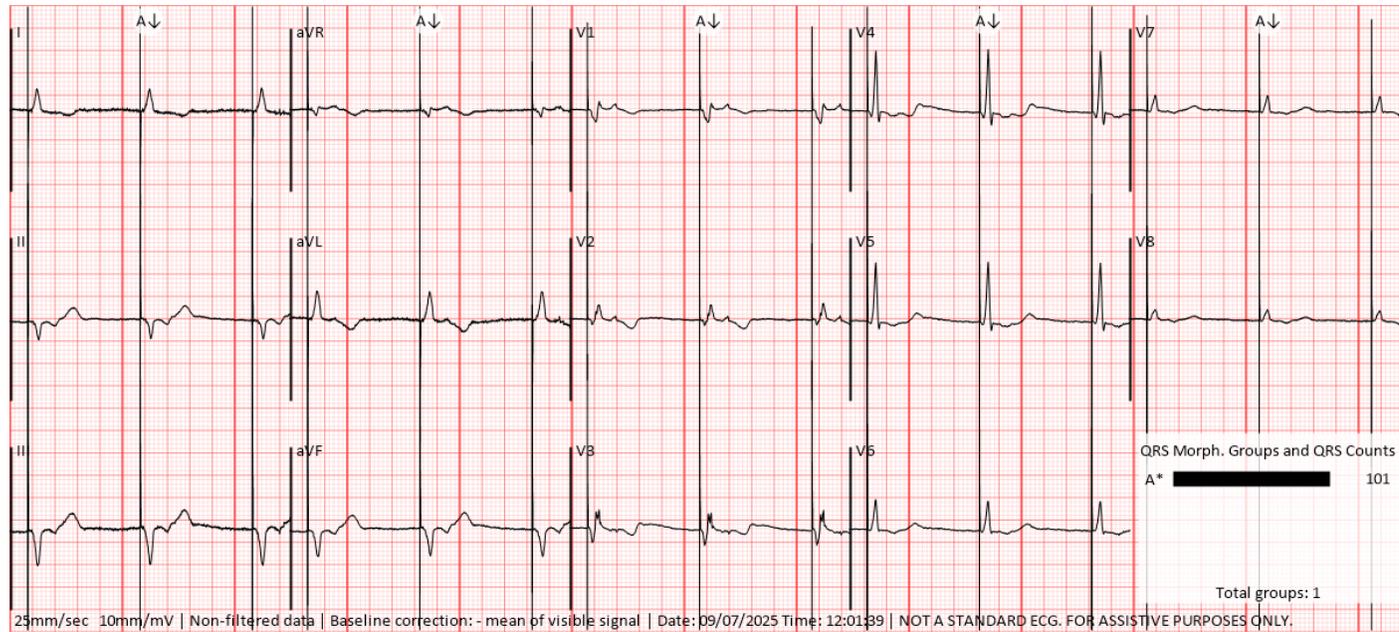
sLBBP

Pacient na CRT, neúspěšná BiV-CRT, nsLBBP



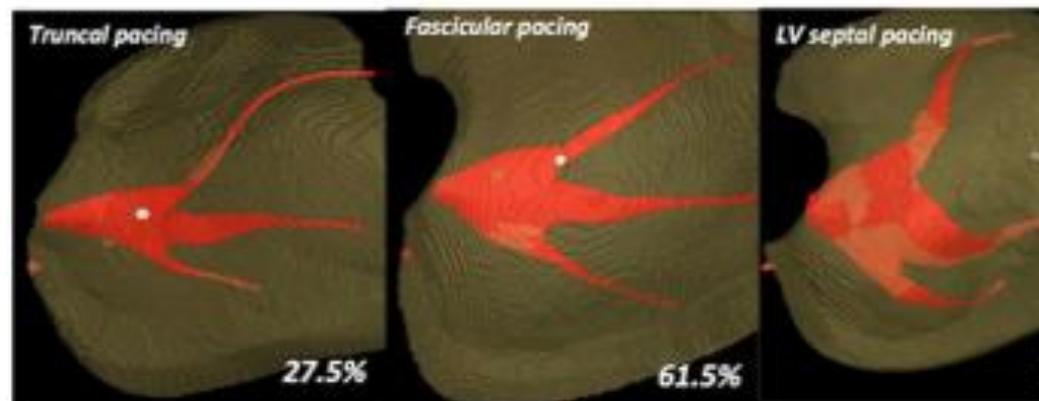
AVD 100ms

LVSP



- Menej interventrikulárnej dyssynchronie
- Na úkor predĺž. intraventrikulárneho vedenia s oneskorenou aktiváciou lat. steny LV
- na 10-20 ms ZÁLEŽÍ pri CRT

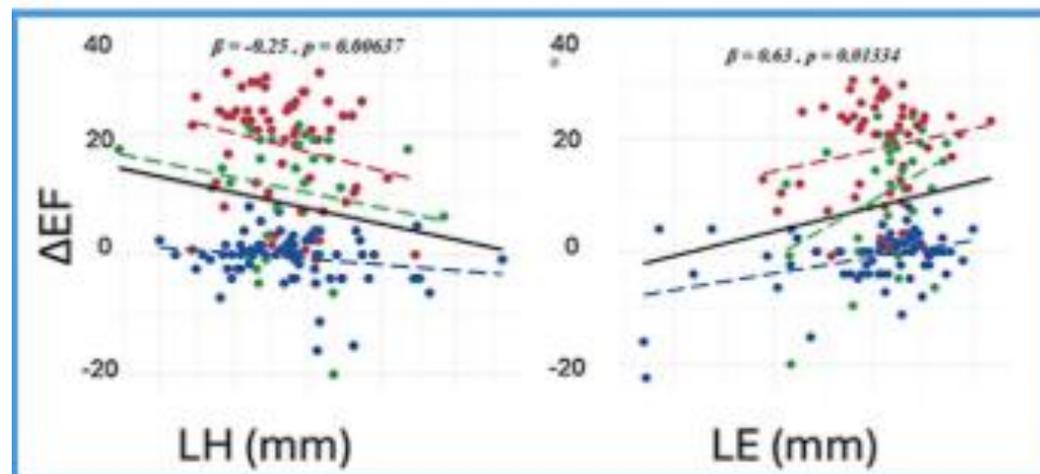
EFEKT PODĽA LOKALIZÁCIE LBBAP



LH – HB to Lead tip



LE – Lead tip to LV endocardium



Záver

- Pre „true“ LBBPc nemá byť kritériom iba „R prime“ vo V1, LBBc je potrebné dokázať
- LBB area = potenciálne široká oblasť stimulácie → pre správnosť procedúry je nevyhnutné rozumieť čo stimulujeme
- Výzvou je najmä LBBa pacing pri HF a degeneratívnom ochorení prevodového systému, escape rytme so širokým QRS pri AVB a IVCD
- Brať do úvahy aj anatomické variácie, mať k dispozícii viac katétrov alebo techník

Záver

- Je LBBAP rovnako dobré ako HBP?
- Ktoré kritériá sú najoptimálnejšie pre dôkaz LBBPc?
- Je rozdiel medzi stimuláciou proximálnej vs distálnej oblasti LBBAP pre klinické výsledky?
- Je nevyhnutné dosahovať LBBc u pacientov s bradyardiou?
- Aký klinický dopad má oneskorená aktivácia pravej komory pri LBBAP, najmä u pacientov so srdcovým zlyhaním?
- Aký klinický dopad má CSP u pacientov s diastolickým srdcovým zlyhaním a AV blokádou alebo ramienkovou blokádou?





ĎAKUJEM ZA POZORNOST



KARDIOCENTRUM
FNsP J.A.Reimana
PREŠOV

