

Leadless kardiostimulace:

PRO !!!

Petr Neuzil

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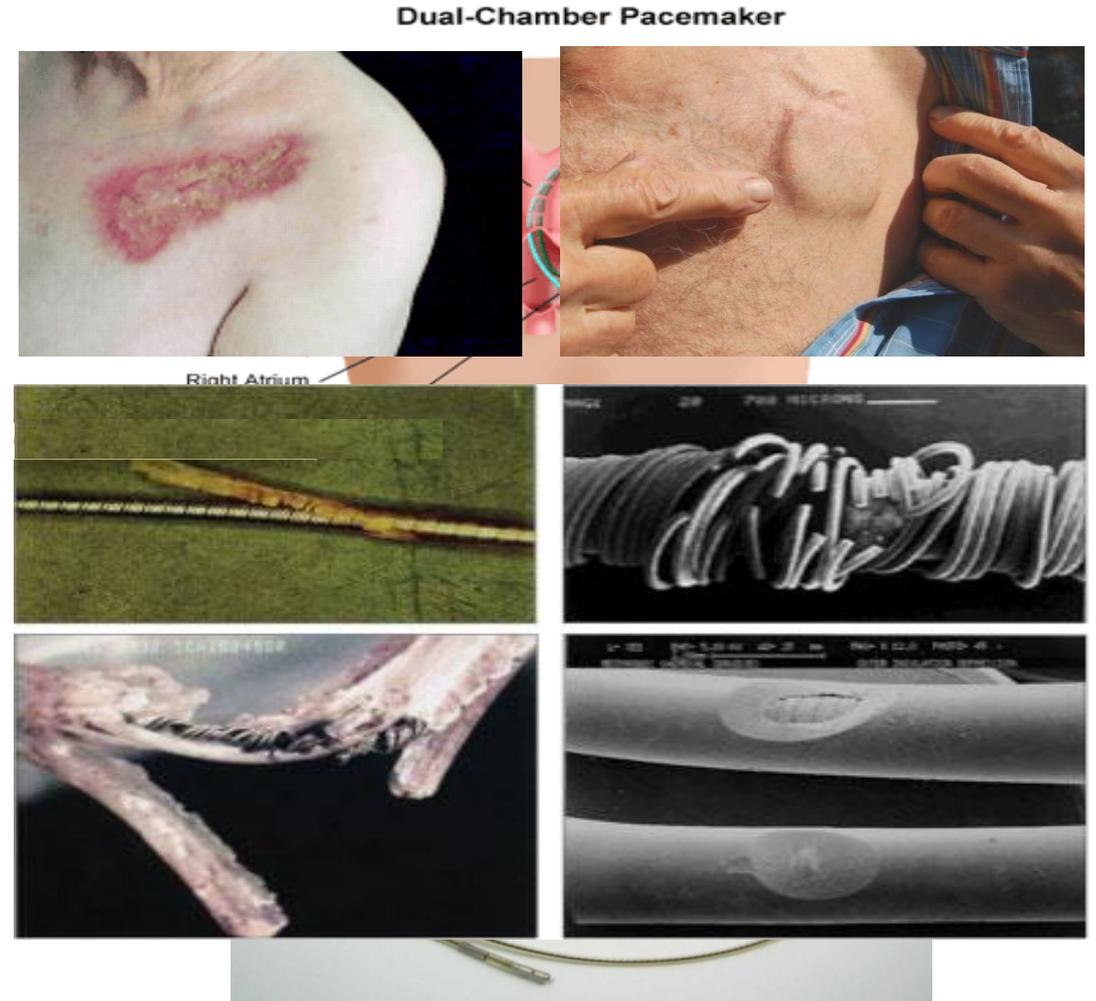
H NEMOCNICE
NA HOMOLCE





2025: Pacemaker State-of-the-Art

- **Technology:**
 - Highly mature & reliable
 - Still includes generator, connectors and leads
- **Procedure:**
 - Surgical pocket + Transvenous leads
- **Device issues – Pocket:**
 - Discomfort
 - Hematomas
 - Infections
 - Cosmetic concerns
- **Leads**
 - Mechanical failures
 - Infections; Extractions
 - Mobility restrictions
 - Some incompatible with MRI



¹ Ellenbogen, K et al. Am J Cardiology, 2003; 92:740–749.

² Connolly, SJ et al. The New England journal of Medicine, 2000; 342:1385-91.

³ Udo, EO et al. Heart Rhythm. 2012;9:728 –735.

2025: Pacemaker State-of-the-Art

- Celosvětově je během jednoho roku provedeno 900.000 implantací
- Až 50.000 různých komplikací souvisejících s výkonem
- Odhaduje se, že celosvětově má KS systém 6.4 mil.pacientů
 - Nicméně až 85.000 nemocných má komplikace s chronicky zavedeným vodičem-elektrodou

Komplikace s KS systémem	Průměrné navýšení ceny za provedenou intervenci (2009)
Infekce	\$ 49,652
Revize vodiče-elektrody	\$ 16,285
Pneumotorax	\$ 16,411
Revize uložení KS přístroje	\$ 12,560

J Thorac Cardiovasc Surg 1996;111:742-752.
Am J Cardiology 2000;85:774-776.
Cost index: www.bls.gov/cpi/cpid09av.pdf

1: Didier Klug, *Circulation*, 2007

2; MDT, STJ, BSX Product Performance Reports

3: Danish Pacemaker Registry, www.pacemaker.dk

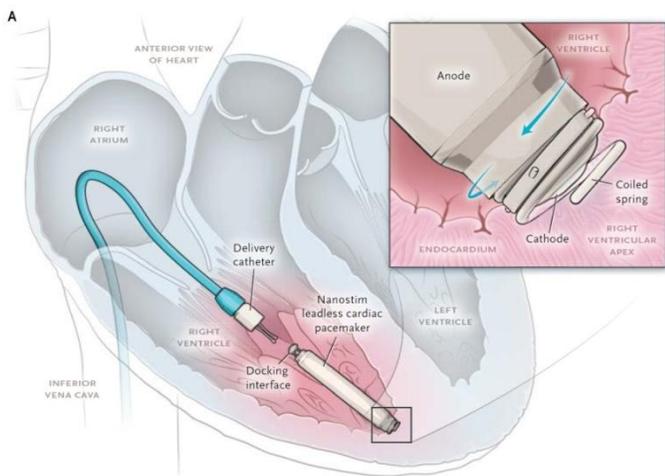
„LEADLESS“ EVIDENCE BASED MEDICINE

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Percutaneous Implantation of an Entirely Intracardiac Leadless Pacemaker

Vivek Y. Reddy, M.D., Derek V. Exner, M.D., M.P.H., Daniel J. Cantillon, M.D., Rahul Doshi, M.D., T. Jared Bunch, M.D., Gery F. Tomassoni, M.D., Paul A. Friedman, M.D., N.A. Mark Estes, III, M.D., John Ip, M.D., Imran Niazi, M.D., Kenneth Plunkitt, M.D., Rajesh Banker, M.D., James Porterfield, M.D., James E. Ip, M.D., and Srinivas R. Dukkipati, M.D., for the LEADLESS II Study Investigators*



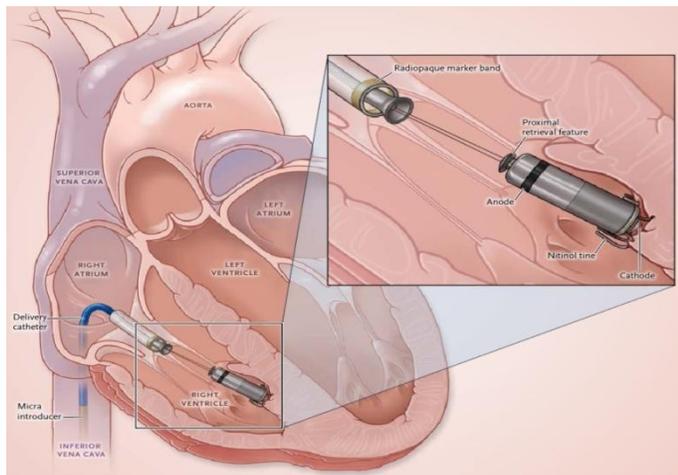
Reddy VY et al: NEJM 2015, Sept 17, 373: 1127.

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

A Leadless Intracardiac Transcatheter Pacing System

Dwight Reynolds, M.D., Gabor Z. Duray, M.D., Ph.D., Razali Omar, M.D., Kyoko Soejima, M.D., Petr Neuzil, M.D., Shu Zhang, M.D., Calambur Narasimhan, M.D., Clemens Steinwender, M.D., Josep Brugada, M.D., Ph.D., Michael Lloyd, M.D., Paul R. Roberts, M.D., Venkata Sagi, M.D., John Hummel, M.D., Maria Grazia Bongiorni, M.D., Reinoud E. Knops, M.D., Christopher R. Ellis, M.D., Charles C. Gornick, M.D., Matthew A. Bernabei, M.D., Verla Laager, M.A., Kurt Stromberg, M.S., Eric R. Williams, B.S., J. Harrison Hudnall, B.S., and Philippe Ritter, M.D., for the Micra Transcatheter Pacing Study Group*



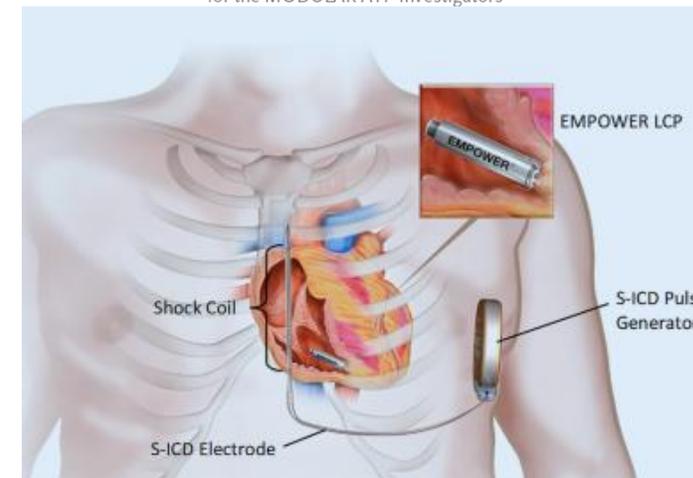
Reynolds D et al: NEJM 2016, Feb 11 : 535.

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

A Modular Communicative Leadless Pacing-Defibrillator System

R.E. Knops, M.S. Lloyd, P.R. Roberts, D.J. Wright, L.V.A. Boersma, R. Doshi, P.A. Friedman, P. Neuzil, C. Blomström-Lundqvist, M.G. Bongiorni, M.C. Burke, D. Gras, S.P. Kutalek, A.K. Amin, E.Y. Fu, L.M. Epstein, J.M. Tolosana, T.D. Callahan, J.D. Aasbo, R. Augustini, H. Manyam, D.G. Nair, B. Mondésert, W.W. Su, C. Pepper, M.A. Miller, J. Grammes, K. Saleh, C. Marquie, F.M. Merchant, Y.-M. Cha, C. Cunningham, D.S. Frankel, J. West, E. Matznick, B. Swackhamer, A.J. Brisben, J. Weinstock, K.M. Stein, V.Y. Reddy, and L. Mont, for the MODULAR ATP Investigators*



Knops, RE et al: NEJM 2024, May 18 : 391.



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EVOLUCE TV A „LEADLESS“ KARDIOSTIMULACE

1958 - 2025



2012 - 2025



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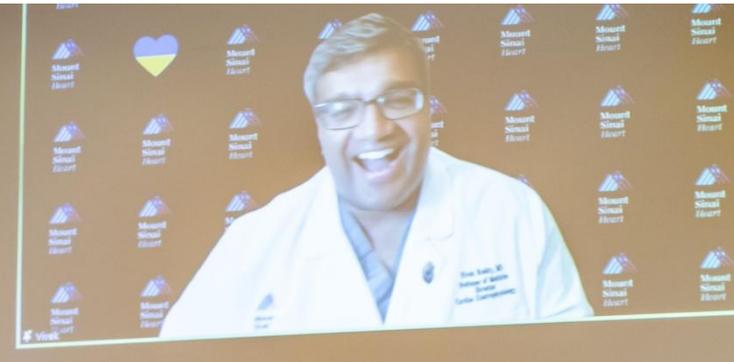
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NNH: zkušenosti jednoho centra

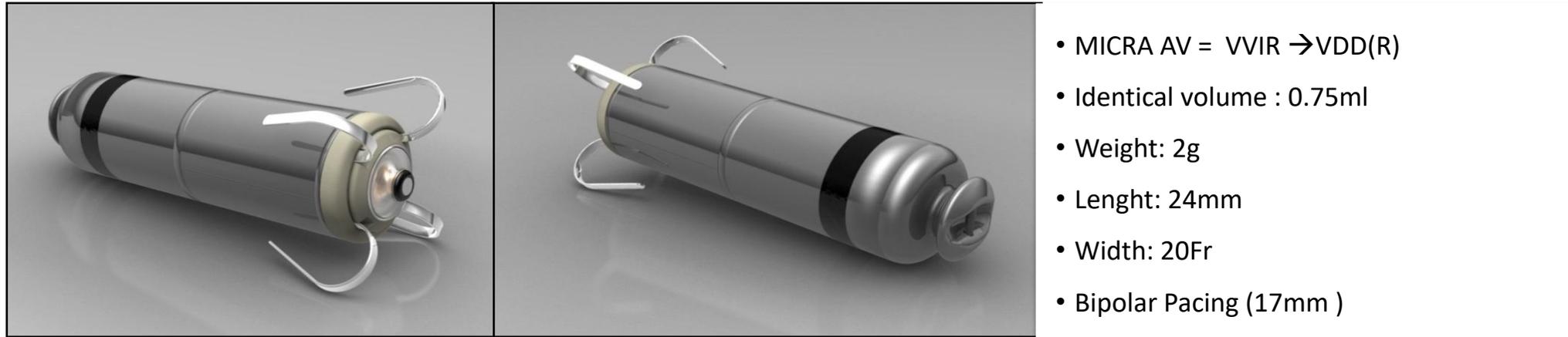
Leadless pacing v NNH: 2012 - 2024	
Σ	621 Micra TPS, Micra AV, Nanostim, Aveir VR, Aveir DR, Empower
Věk	70,5 (20 – 90) let
Muži	56,5%
Úspěšnost	99%
Stimulační parametry	Stim.práh: < 1,5 V / 0,25ms Velikost vlny R: 8 – 20 mV
Jiná než VVI stim.	Micra AV, Aveir DR, WiCS
Komplikace	0,6 % 4 x dislokace 0,3 % 2 x srdeční tamponáda 0 % revize třísla, infekce, smrt





Fyziologická jednodutinová stimulace

Micra AV : od VVI k DDD



Micra Atrial TRacking Using a Ventricular AccELerometer Study

NCT03157297

Primary Endpoint :

Synchronisation of ventricular pacing to reach = VDD

3 preexisting accelometers : atrial activity detection based on tricuspid valve

movement detection – in concert with P wave detection on ECG



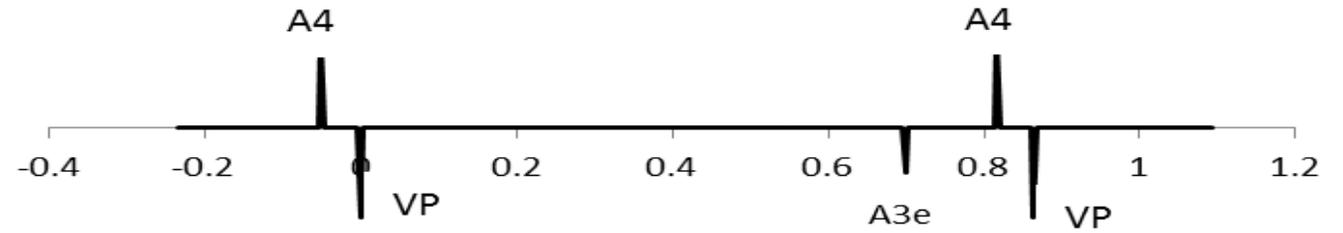
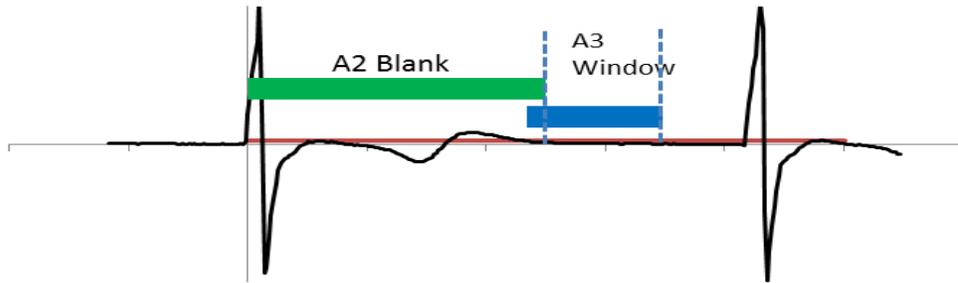
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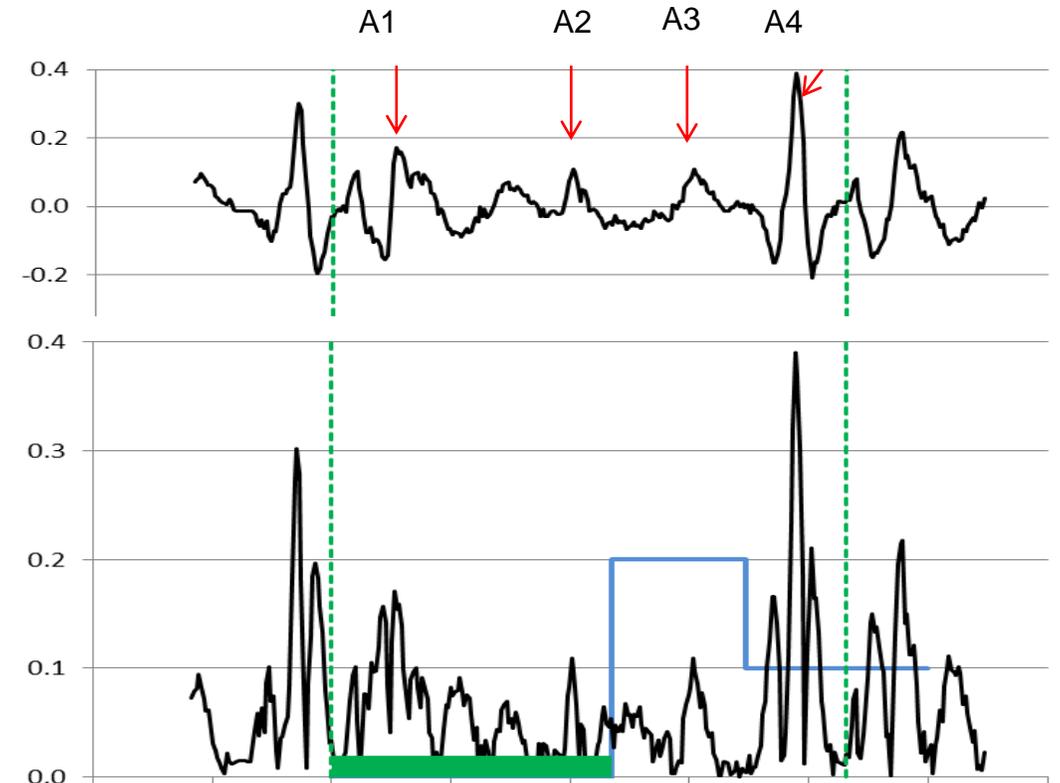


Micra AV : VDD mode

Detekce pohybu cípů TCH



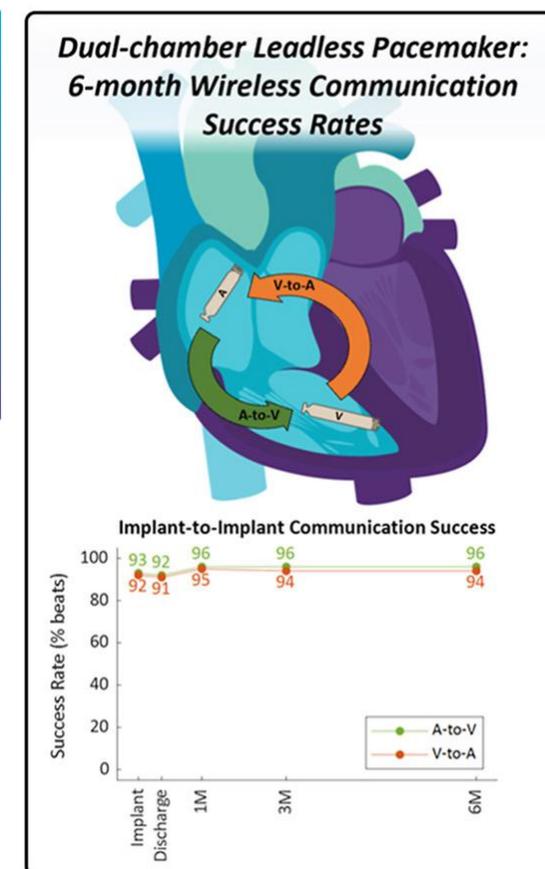
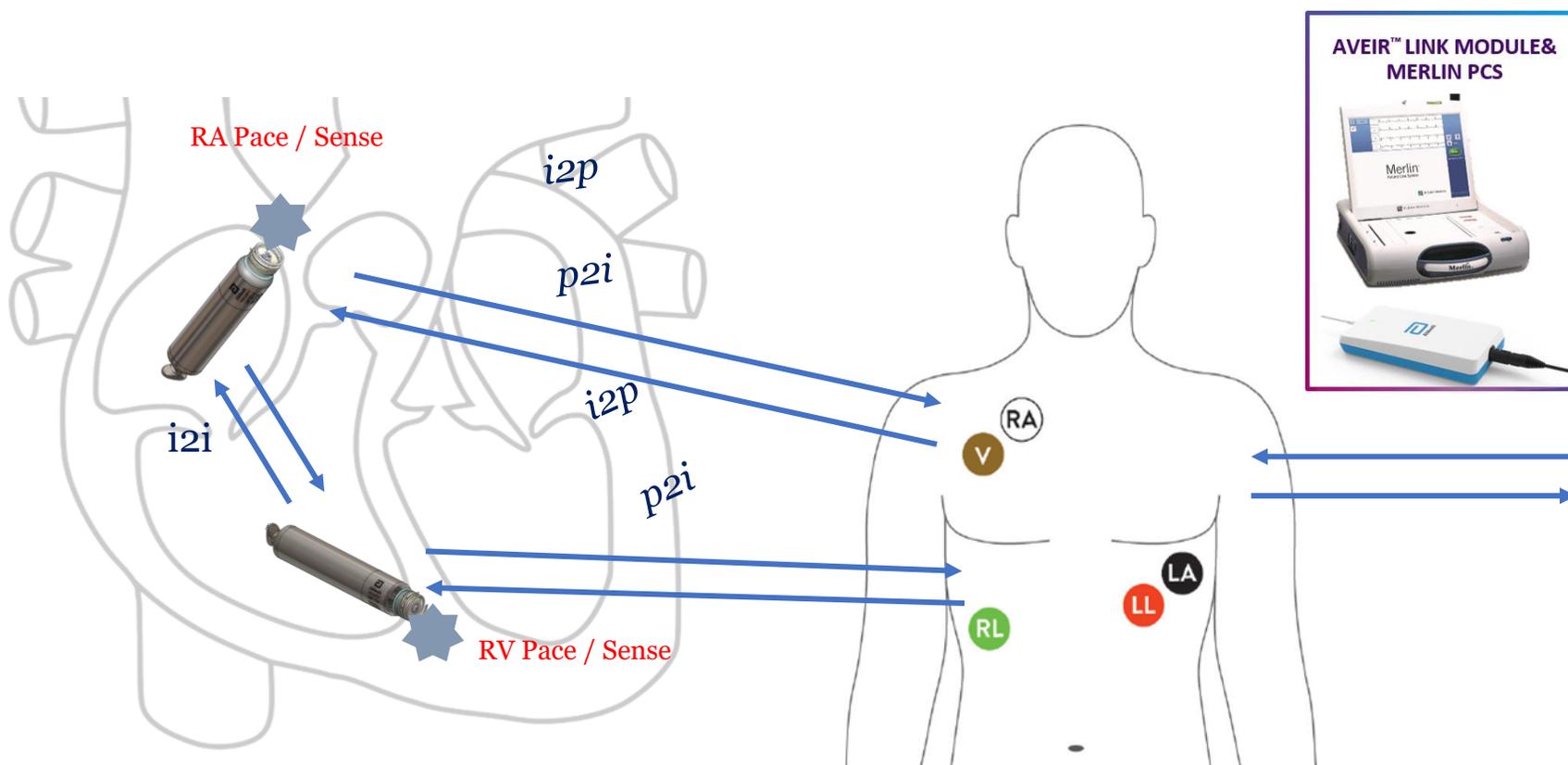
- „High pass“ filtr accelerometer (5-10Hz) – 3 x → 360°
- Usměrňovací filtr
- Blanking after ventricle activity
- Blanking or increasing threshold post T- wave detection to erase A3 false detection
 - Measurement → hardware
 - Blanking → firmware
- A4 wave detection as the first wave overcross the filter thresholds
 - Typical 0.10-0.15g



Dvoudutinový leadless Aveir DR

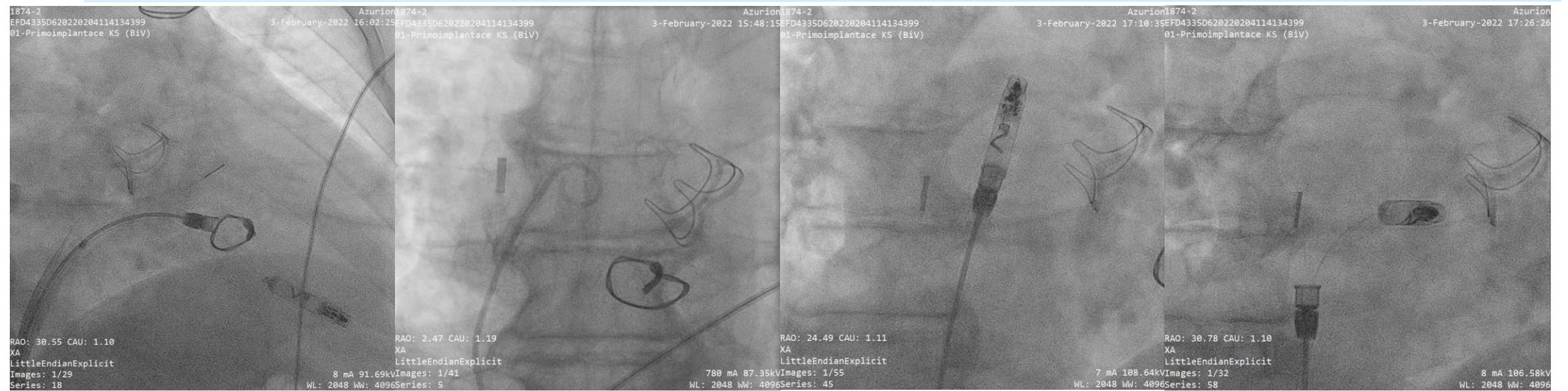
vzájemná komunikace „i2i“ (implant to implant)

- **Kondukční komunikace** – využívá vodivé vlastnosti tkání a krve; vysílání/přijímání vysokofrekv. el. signálů (uA, pA), výkon v rámci uW ... minimální spotřeba energie

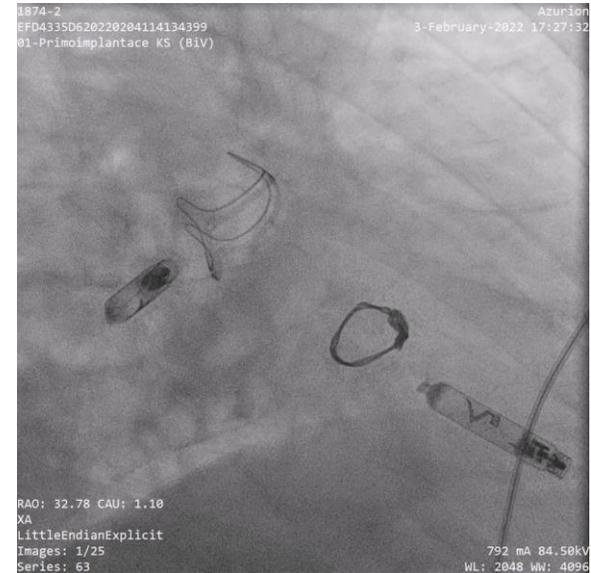
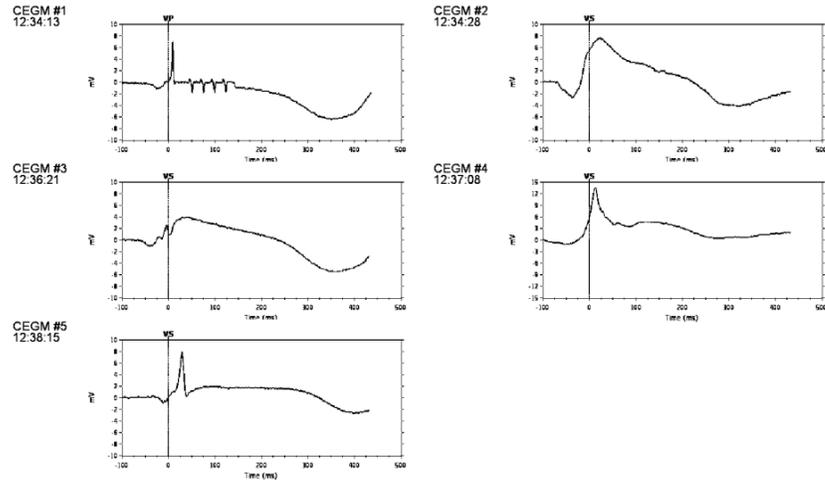


Dvoudutinový leadless Aveir DR

implantace komorové a síňové komponenty

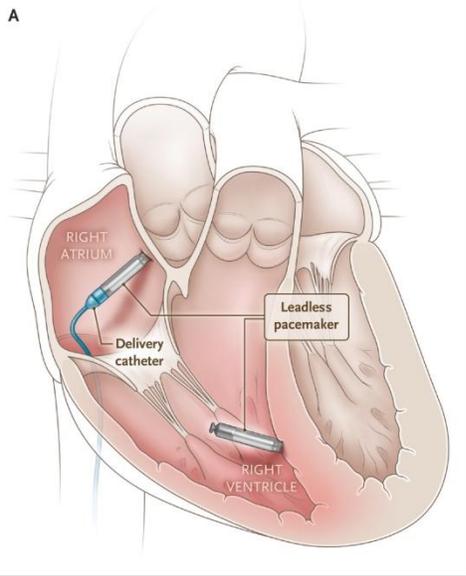


RV CEGM Summary



Dvoudutinový leadless Aveir DR

“i2i” algoritmus komunikace



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CURRENT ISSUE ▾

SPECIALTIES ▾

TOPICS ▾

ORIGINAL ARTICLE



A Dual-Chamber Leadless Pacemaker

Authors: Reinoud E. Knops, M.D., Ph.D., Vivek Y. Reddy, M.D., James E. Ip, M.D., Rahul Doshi, M.D., Derek V. Exner, M.D., M.P.H., Pascal Defaye, M.D., Robert Canby, M.D., Maria Grazia Bongiorno, M.D., Morio Shoda, M.D., Gerhard Hindricks, M.D., Petr Neuzil, M.D., Mayer Rashtian, M.D., Karel T.N. Breeman, M.D., Jordan R. Nevo, M.S., Leonard Ganz, M.D., Chris Hubbard, M.B.A., and Daniel J. Cantillon, M.D., for the Aveir DR i2i Study Investigators*

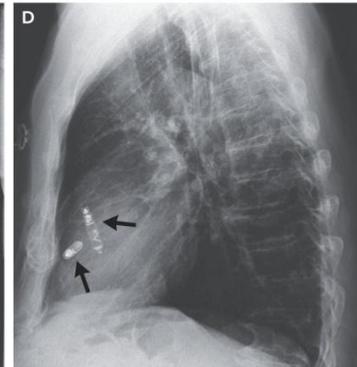
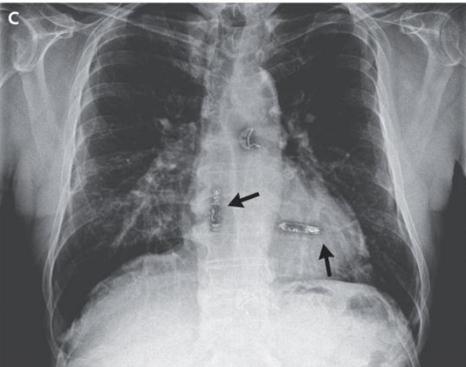
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[Author Info &](#)

[Affiliations](#)

Published May 20, 2023 | N Engl J Med 2023;388:2360-2370 | DOI: 10.1056/NEJMoa2300080 | [VOL. 388 NO. 25](#)

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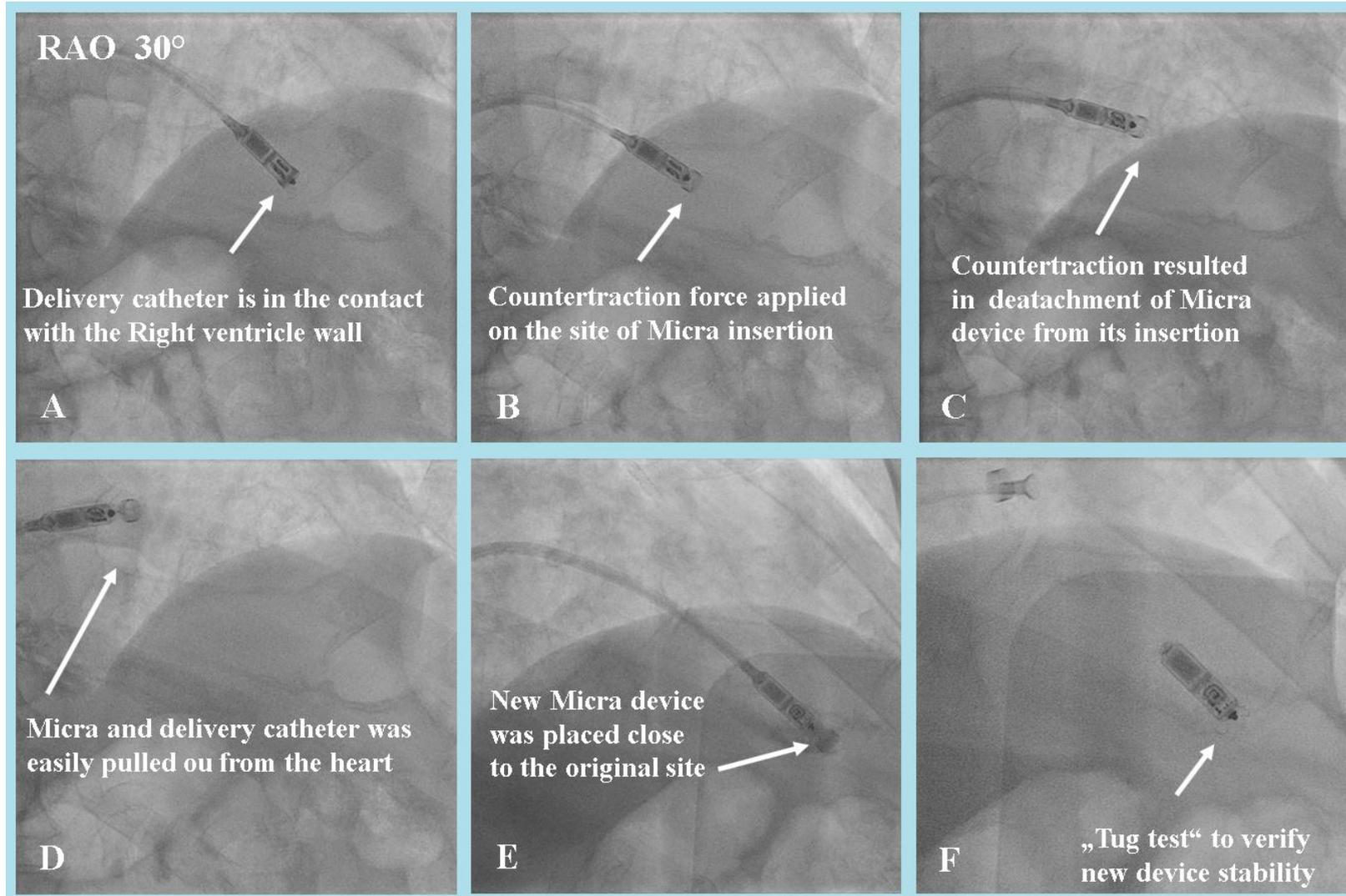


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Postup při extrakci pro MICRA TPS

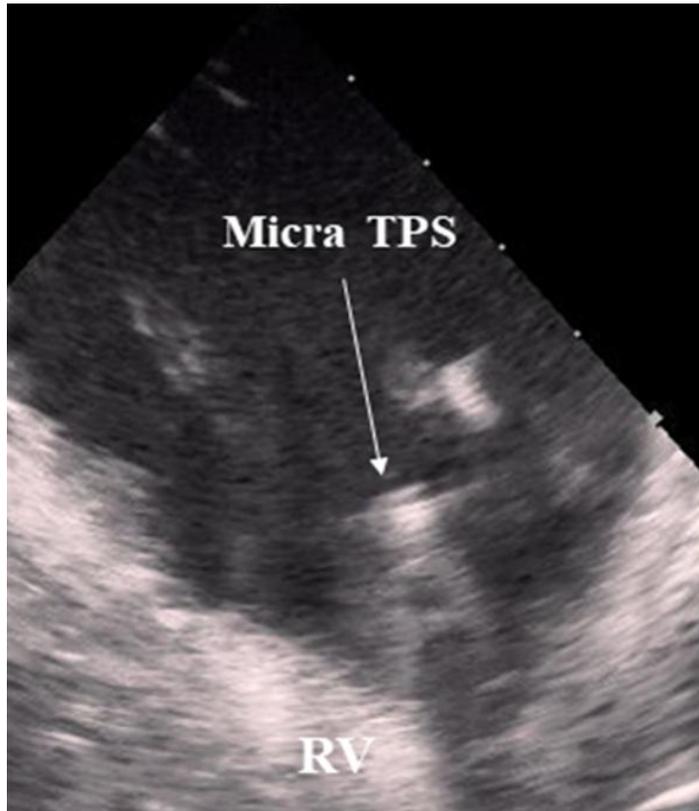


Extrakce MICRA TPS

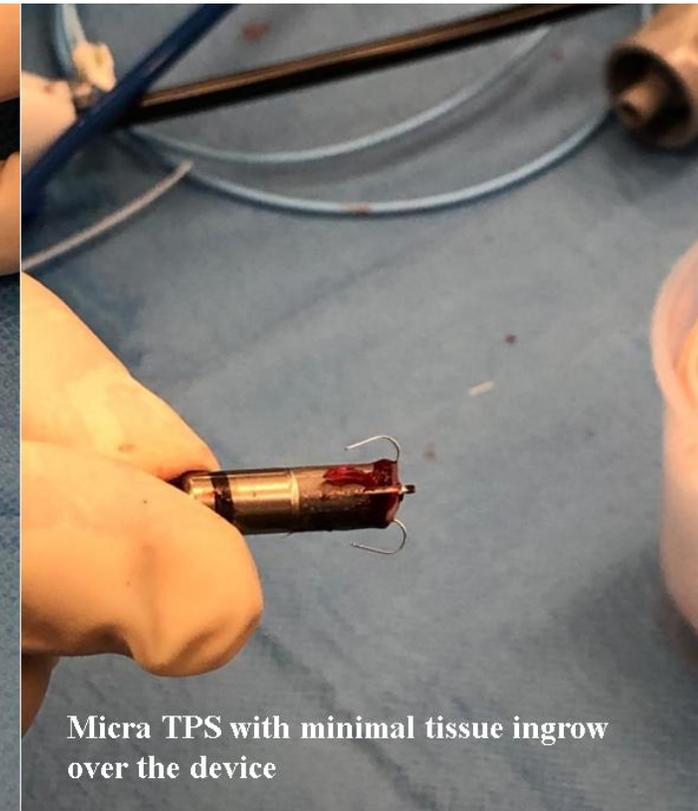
~ 10 let po primoimplantaci

Funasako M/ Neuzil P et al.; Europace. 2024 Oct 3;26(10):euae256

**Delivery katetr se zavedenou kličkou – Ø 7 mm → kontrakcí uvolnění kotev (10 min.)
Nekomplikovaná re-implantace nového přístroje Micra VR - excelentní parametry**



Micra TPS snared with the delivery catheter after successful retrieval



Micra TPS with minimal tissue ingrow over the device



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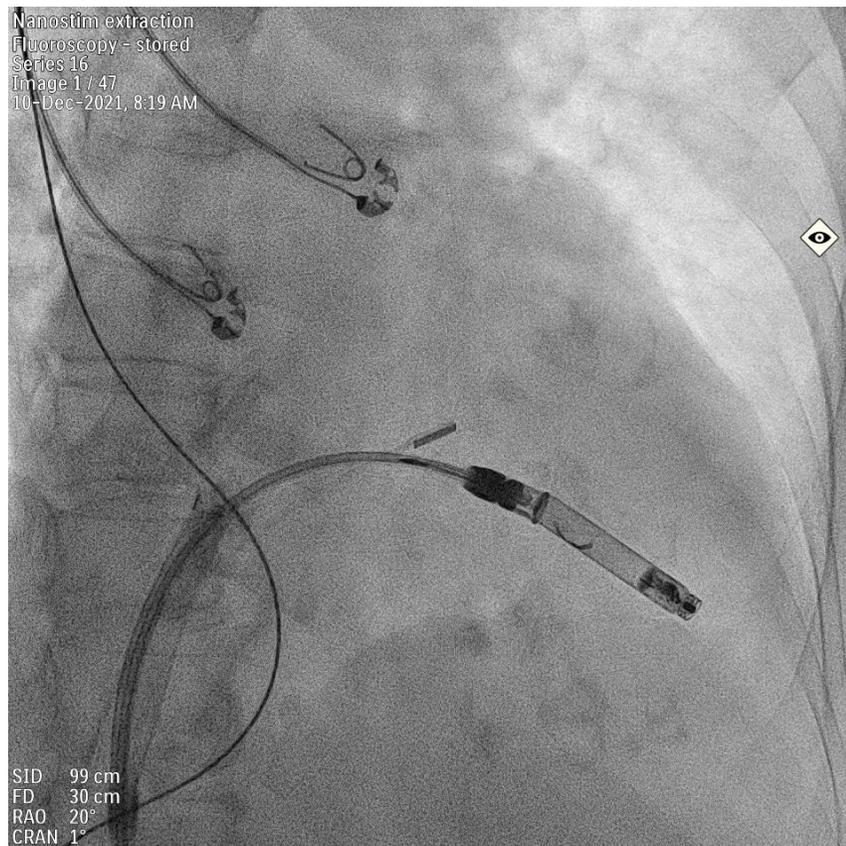
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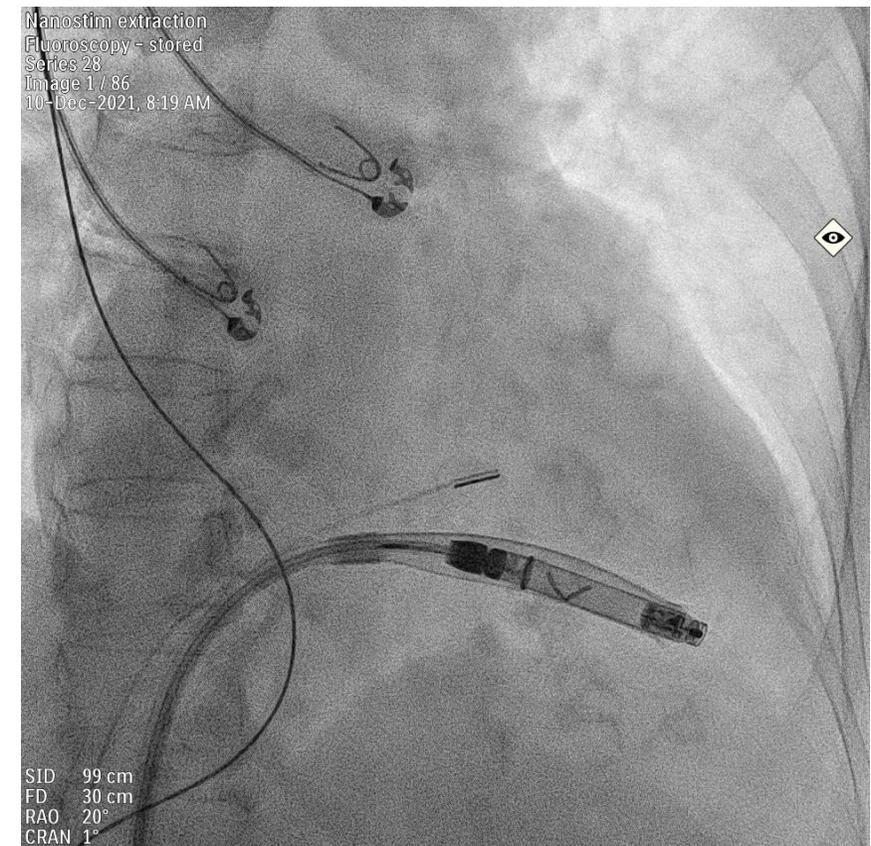
Case report

Nanostim LCP retrieval December 10, 2021

**„Meshed“ Sleeve
OVER LCP Dec 10, 08:19**

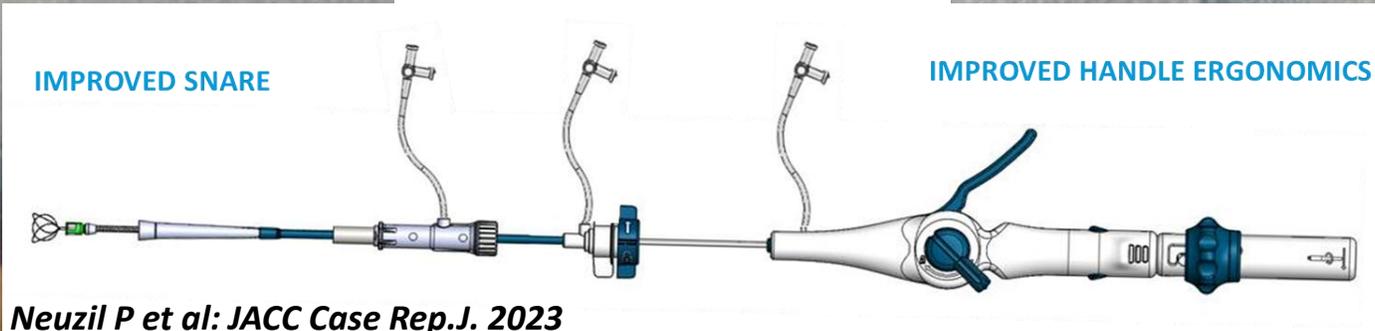
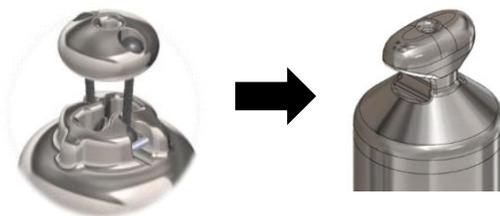


**Rotation and final
RELEASE Dec 10, 08:19**



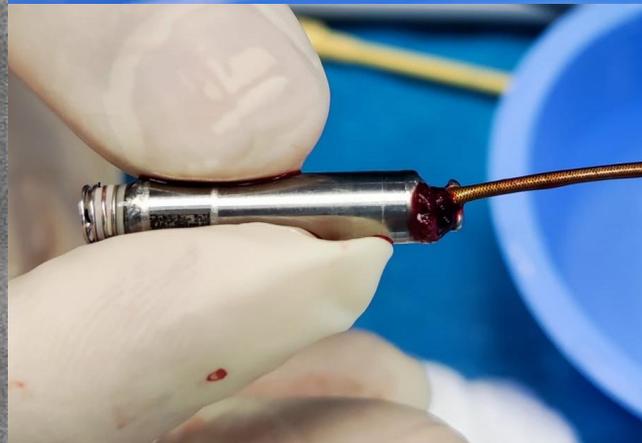
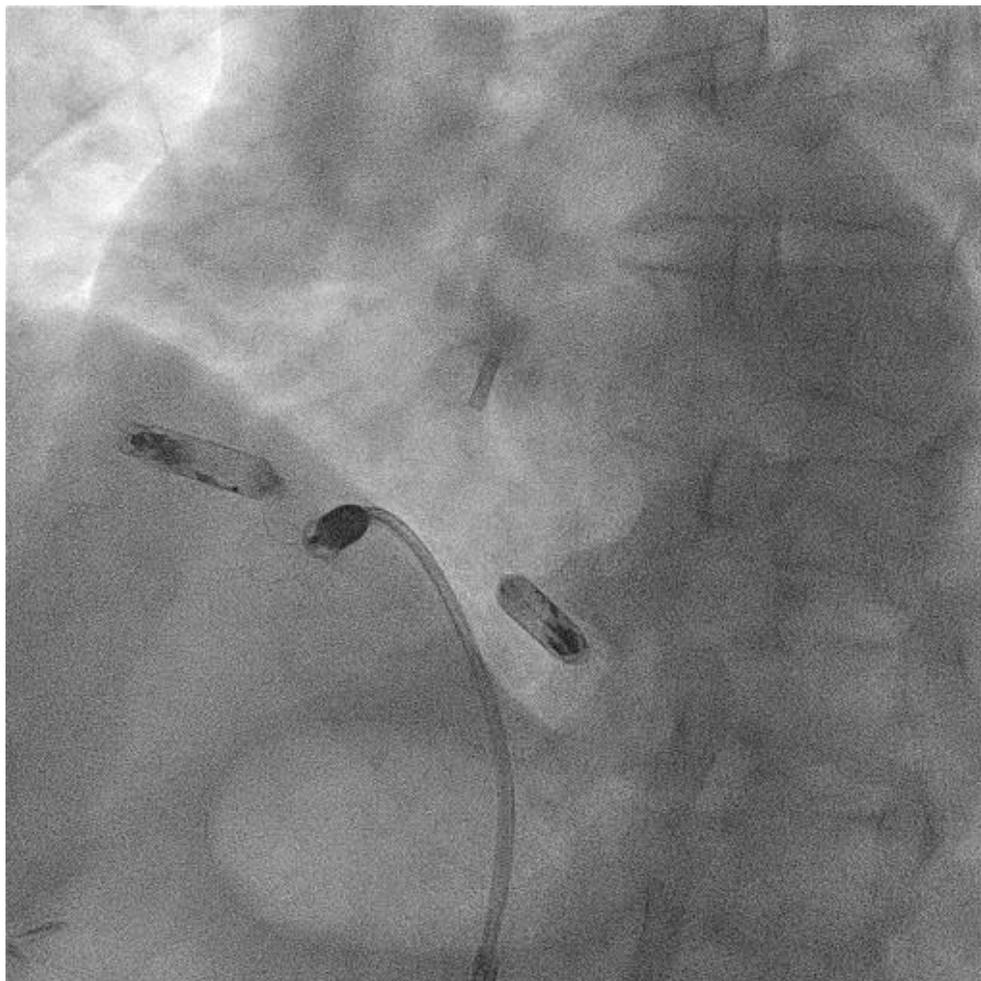
Extrakce Nanostim LCP

Implantace 17.12.2012 – Extrakce 10.12.2021



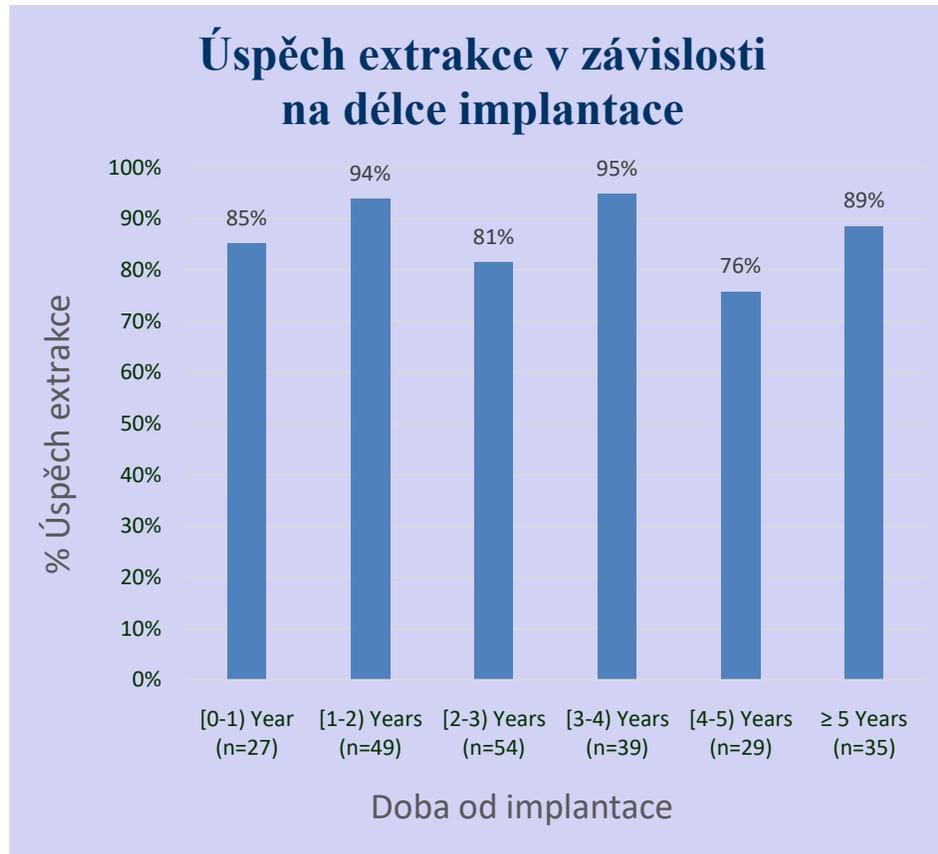
Neuzil P et al: JACC Case Rep.J. 2023

„Retriver“ katetr s trojitou kličkou → výkon (15 min) obě komponenty úspěšně extrahovány
Nekomplikovaná re-implantace transvenózního DDD KS

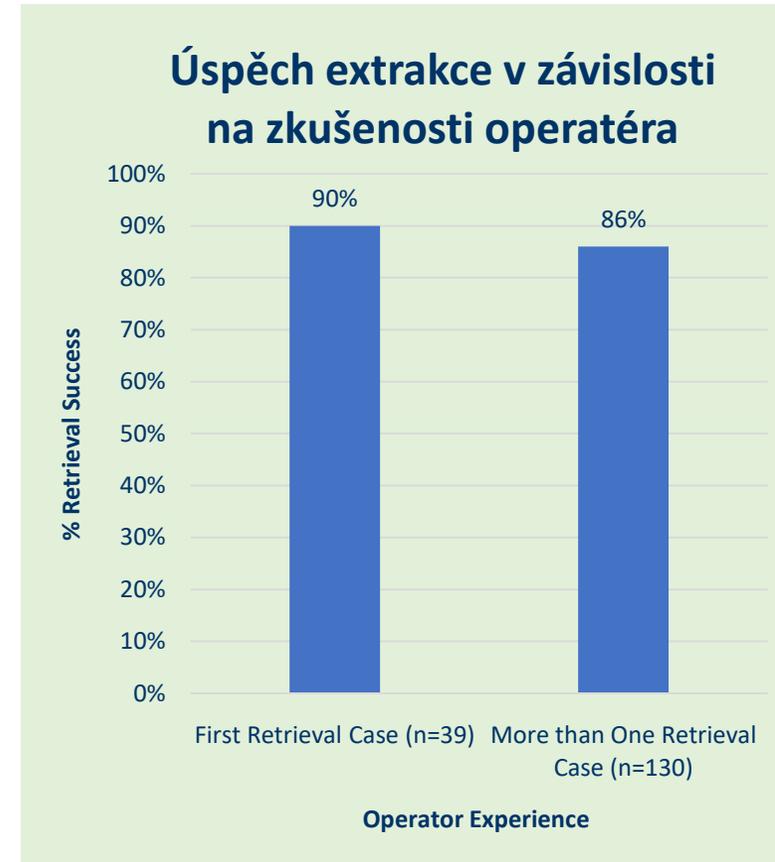


Celosvětový přehled extrakcí Nanostim

Délka implantace & zkušenost operátora (> 28.10.21)



89% (31/35) úspěch u extrakcí LCP ≥ 5 let



Není jasná závislost na zkušenosti



Leadless brady & ATP & S-ICD

Implantable Devices



EMPOWER™ Modular Pacing System
EMBLEM™ Family of S-ICDs

EMPOWER™ Details

32.1 mm x 6 mm
0.8 cc

Active fixation talons
Tether / Snare port



EMPOWER™ Delivery and Retrieval



Preloaded delivery catheter
with extendable inner
catheter



Dedicated
retrieval system with single &
tri-loop snares



Dedicated delivery and retrieval catheters

Programmmerers

Model 3200 S-ICD Programmer



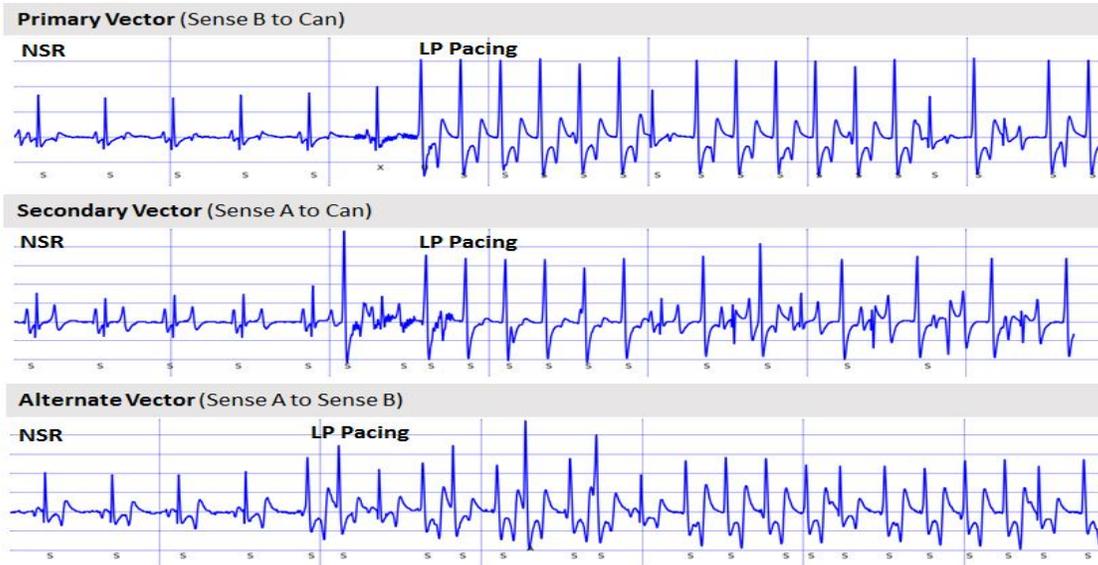
Next Generation
BSC 3300 LATITUDE
Programming System



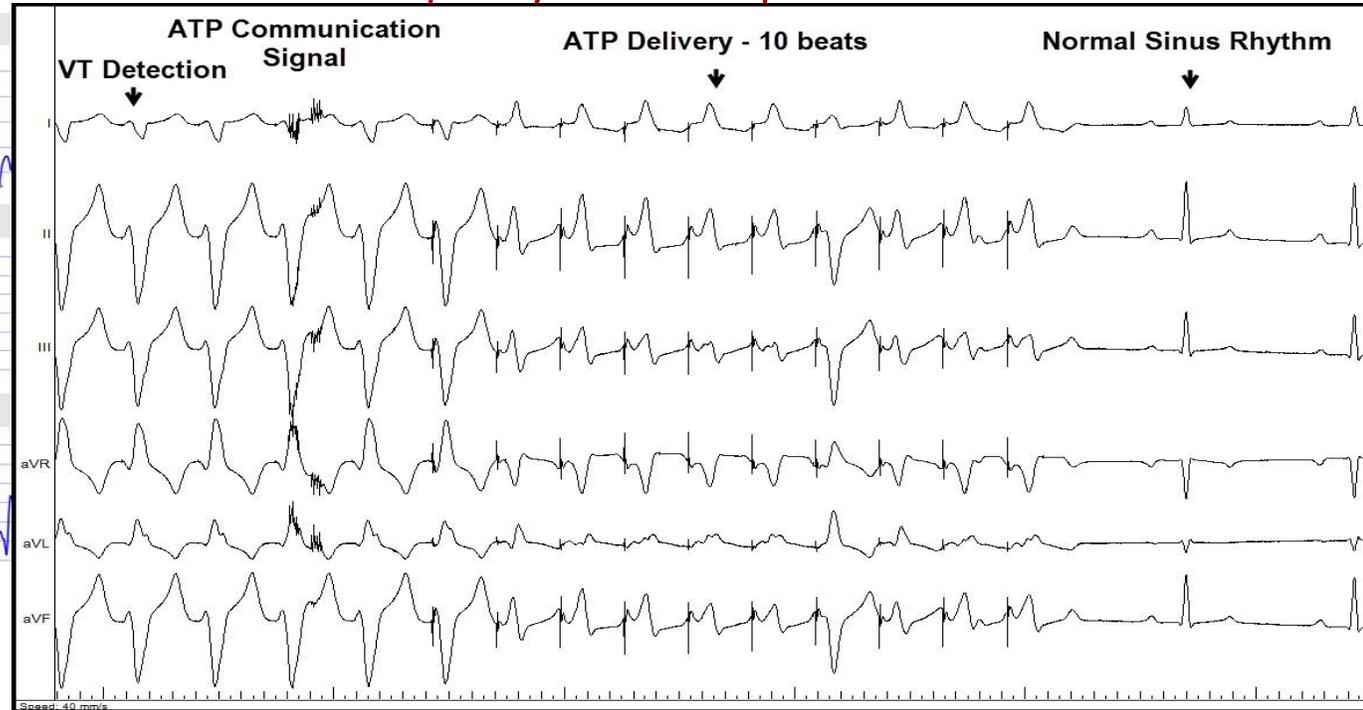
Komunikace Leadless ATP & S-ICD:

Preklinický model

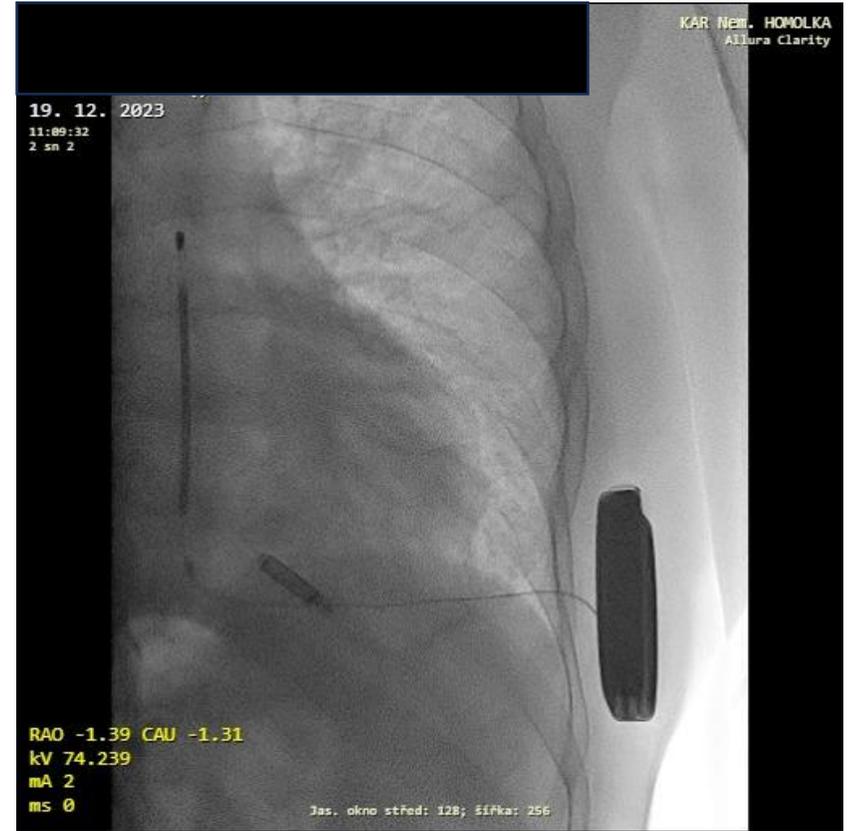
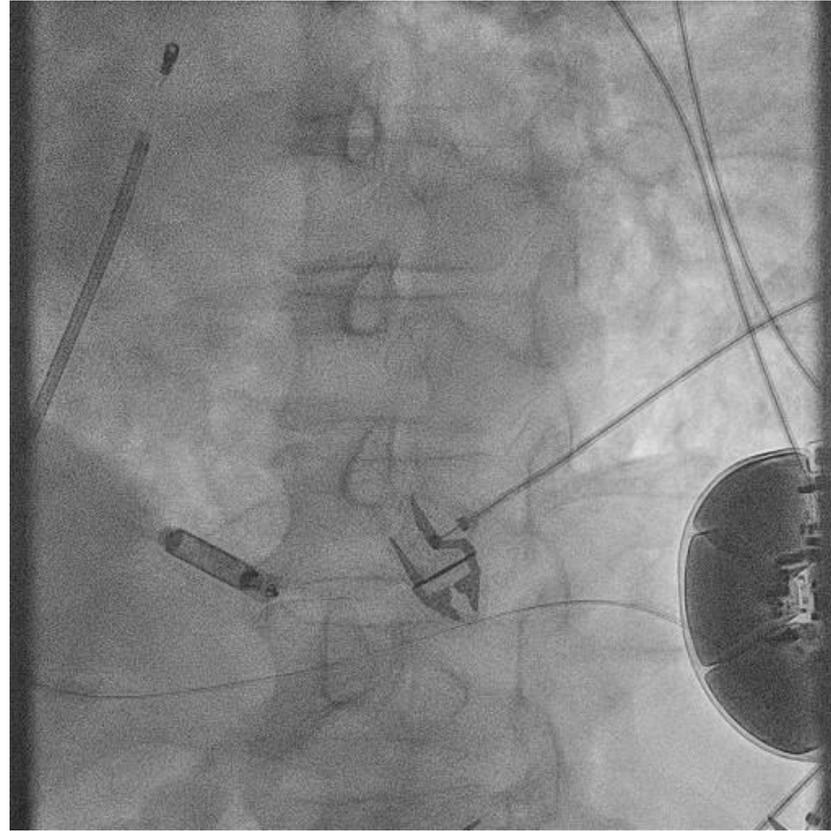
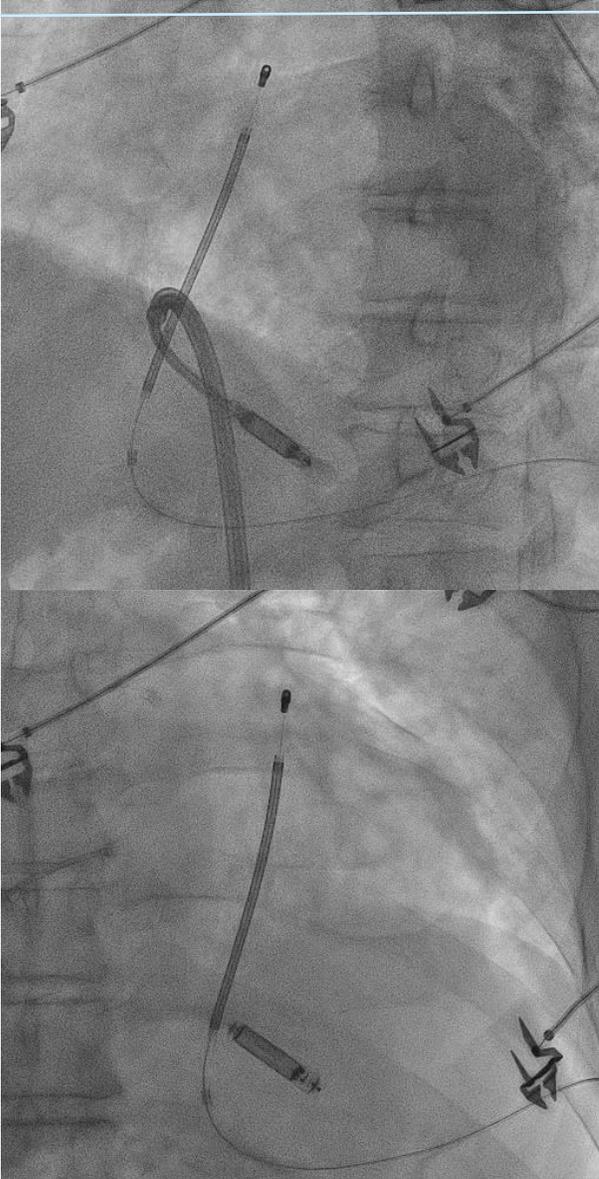
S-ICD diskriminace rytmu při stimulaci



ATP terapie vydaná LCP při detekci S-ICD



Komunikace Leadless ATP & S-ICD: *Kazuistika*

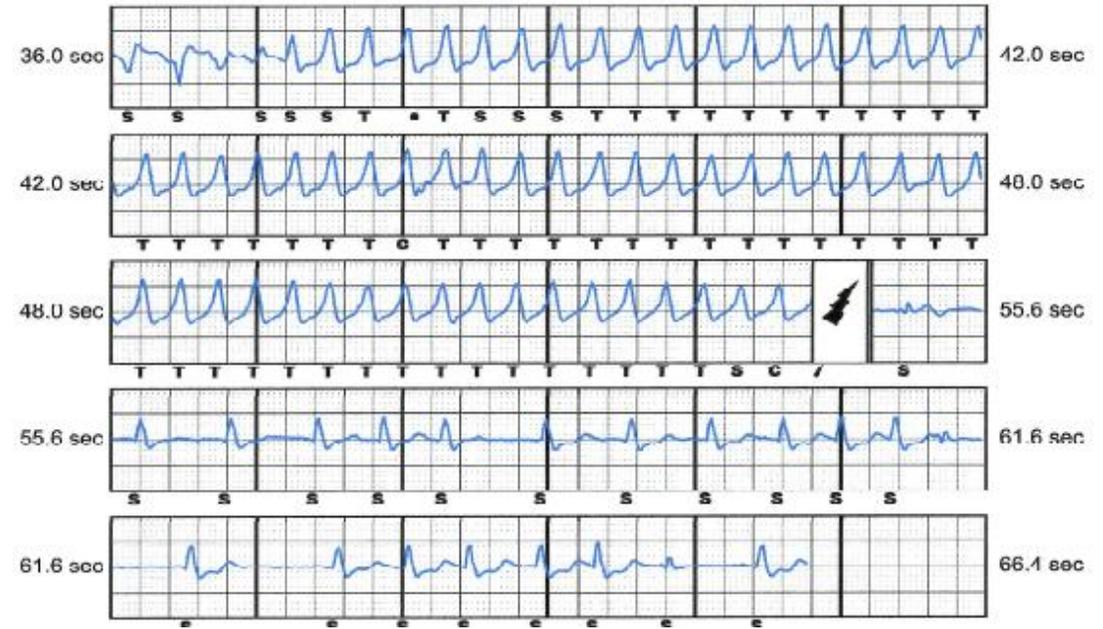


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ORIGINAL ARTICLE

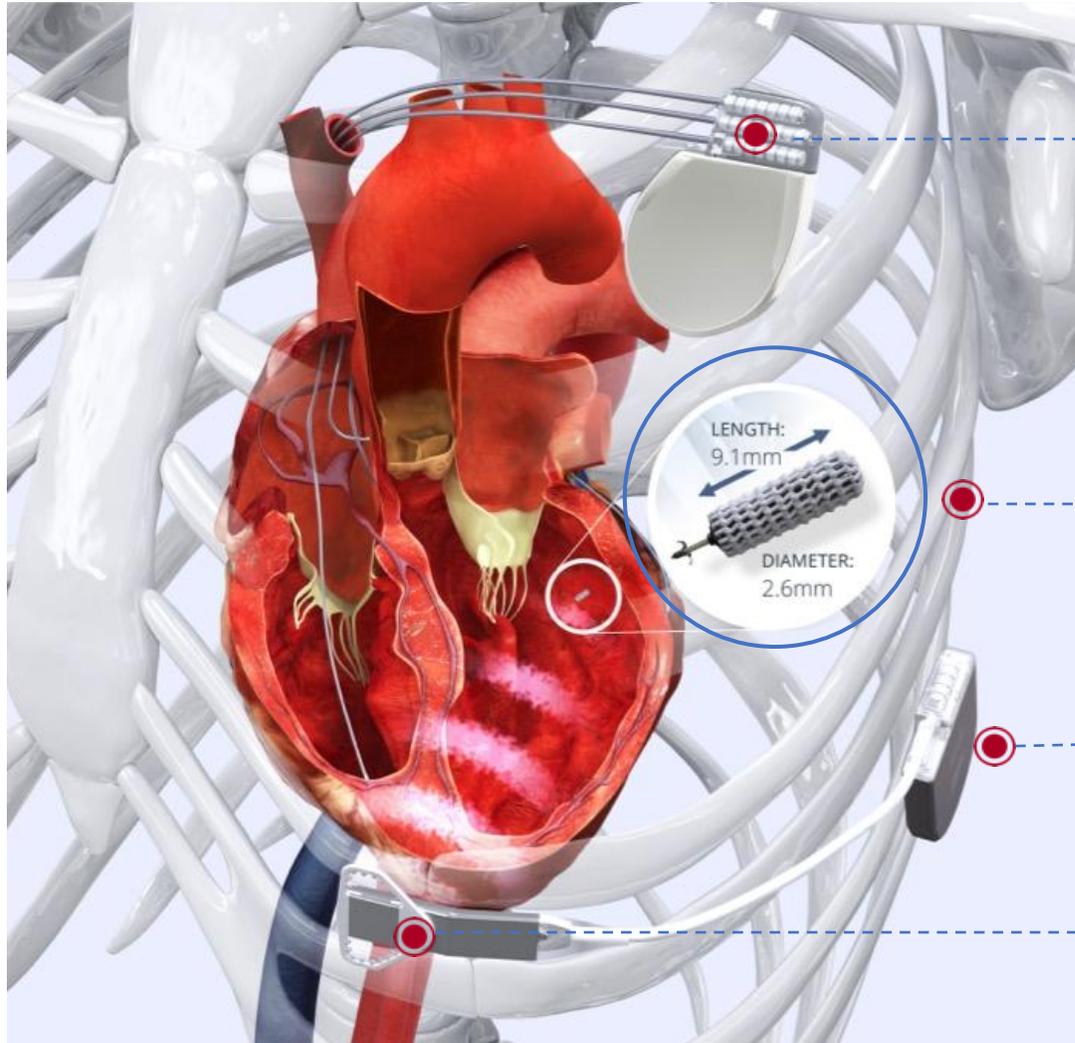
A Modular Communicative Leadless Pacing–Defibrillator System

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WiSE CRT System

Hlavní součásti a princip „wireless“ stimulace

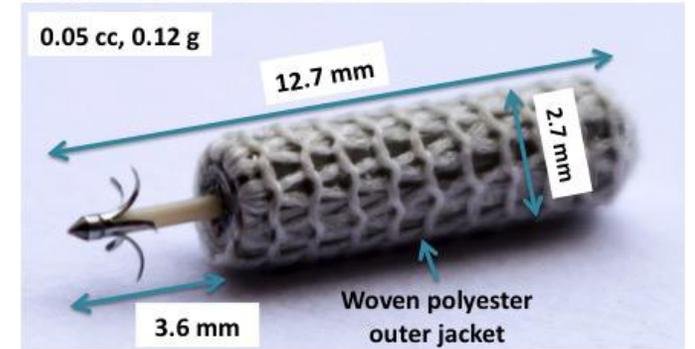


CO-IMPLANT DEVICE

RECEIVER ELECTRODE

BATTERY

TRANSMITTER

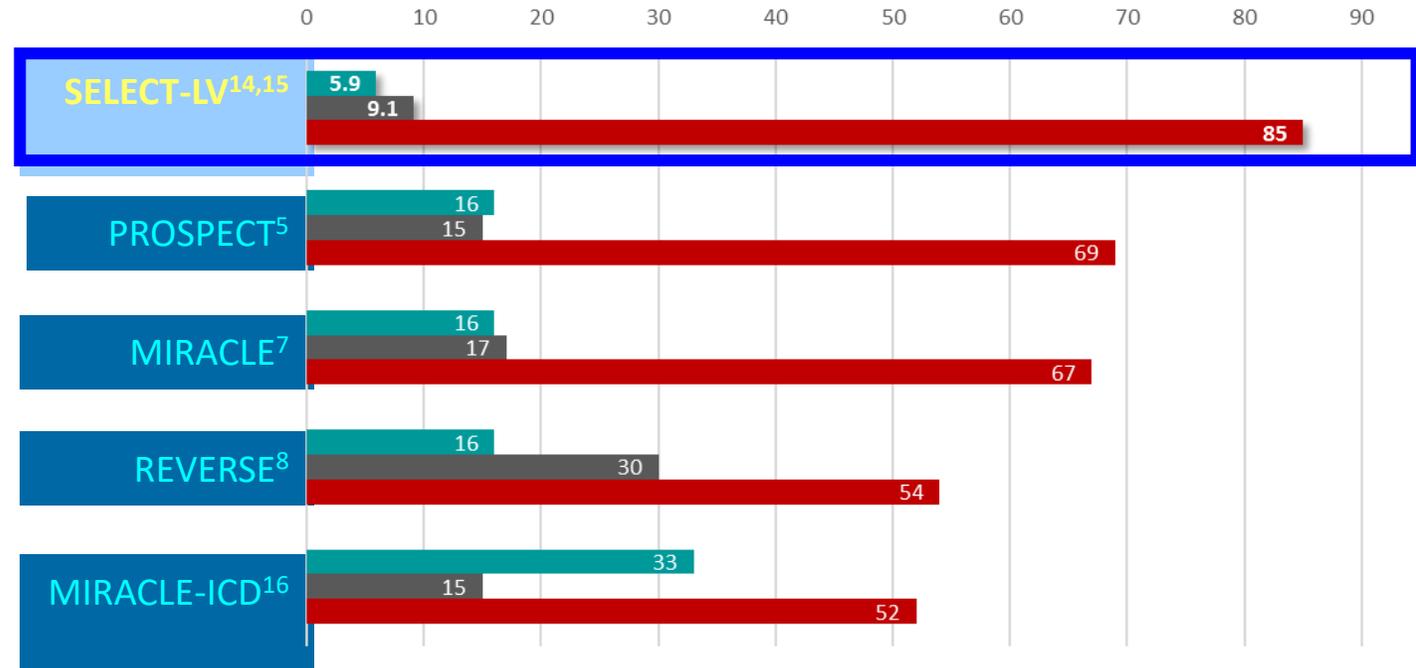


Studie SELECT-LV : Hlavní výsledky

The SELECT-LV study showed sustained cardiovascular improvement for complex CRT patients treated with the WiSE System

85%
of patients
experienced
persistent clinical
benefits at 6-months

■ Worsened
■ Unchanged
■ Improved

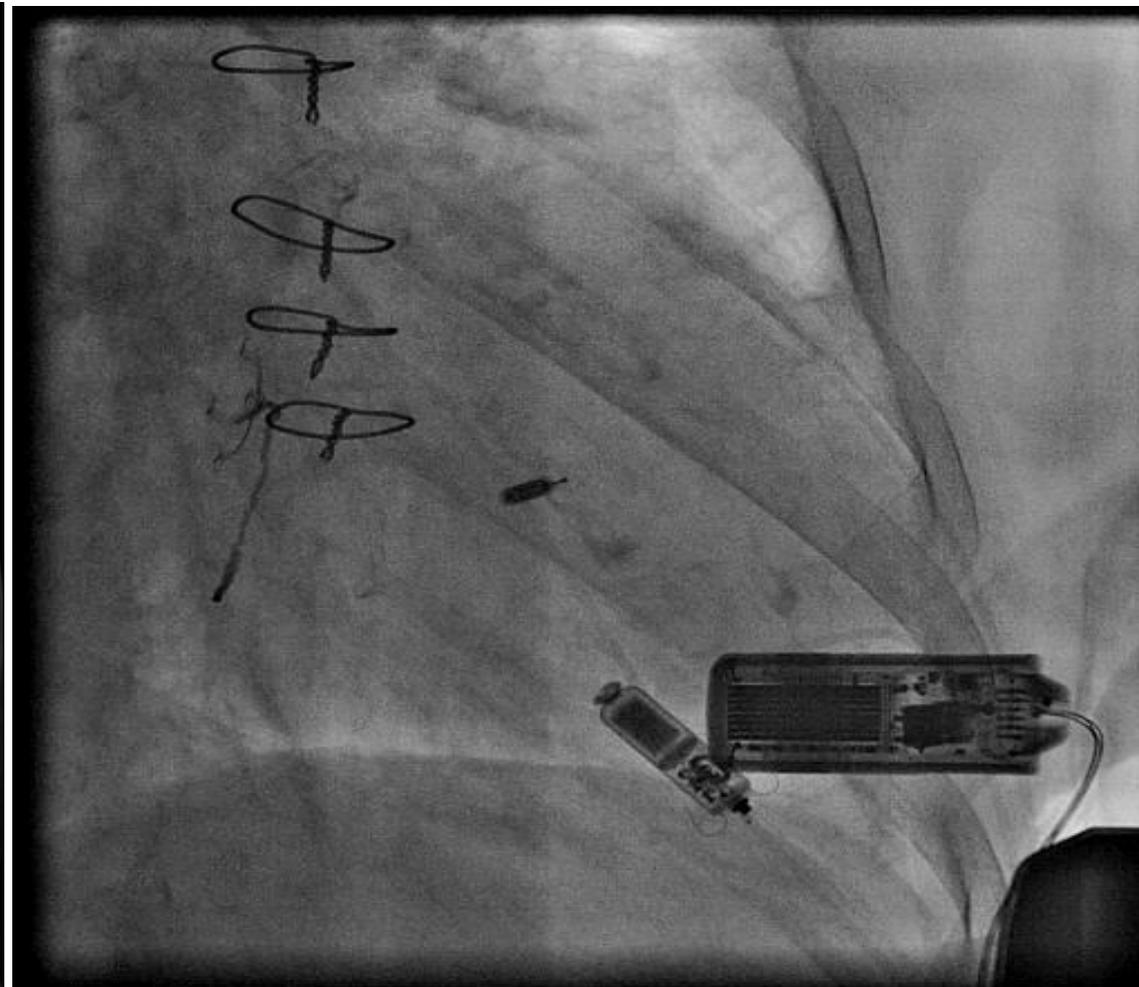
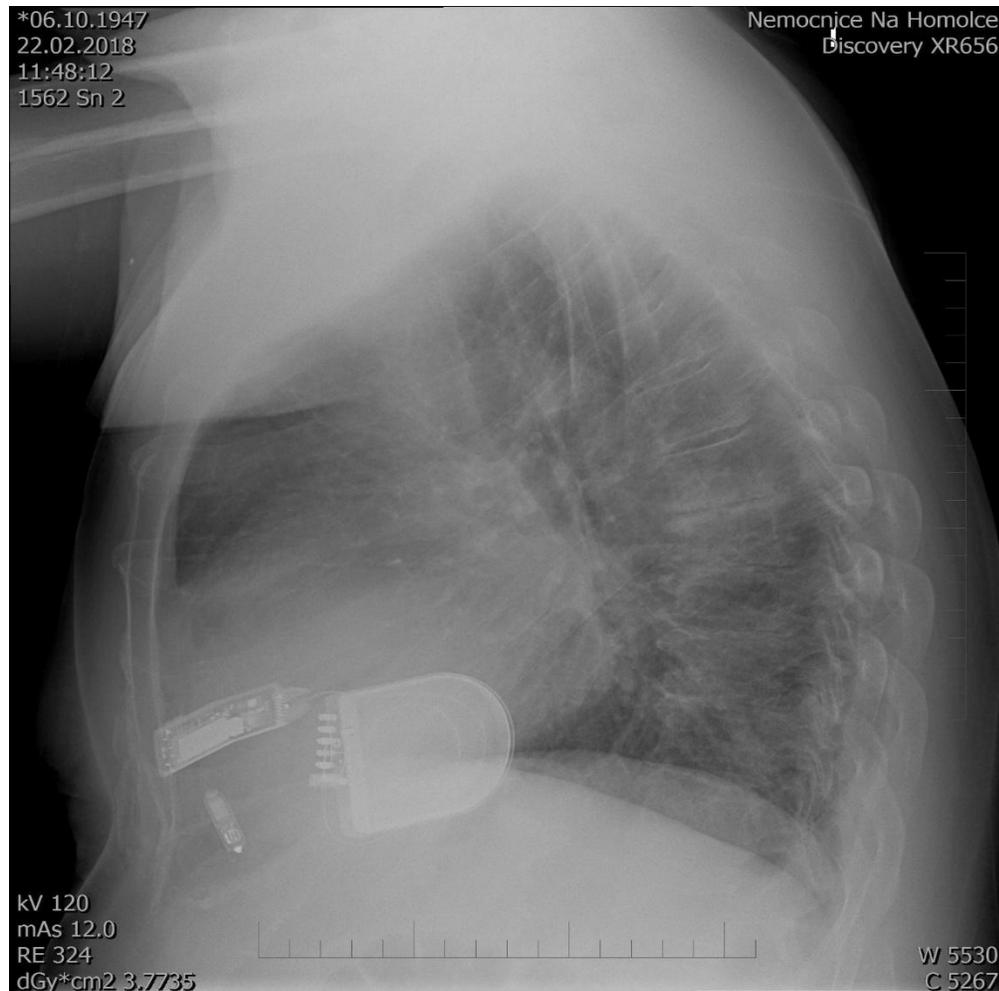


This pts group had previously failed conventional CRT

Kompletní leadles-wireless CRT systém

Micra TPS + WiSE

Carabelli A / Neuzil P / Defaye P: *Europace* 2021;23:740-747



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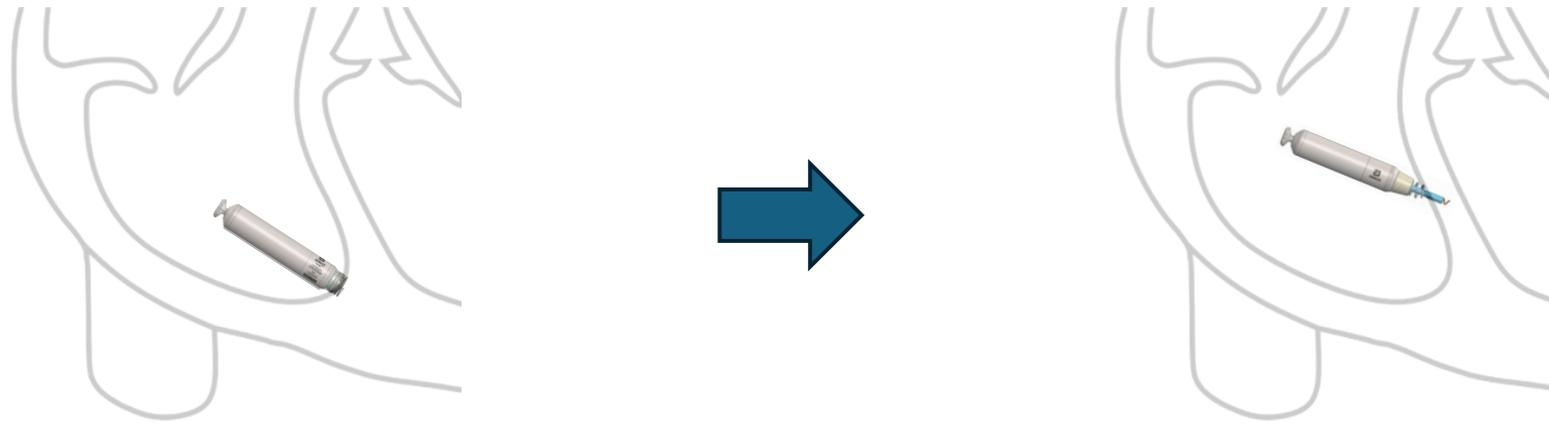
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KARDIOCENTRUM

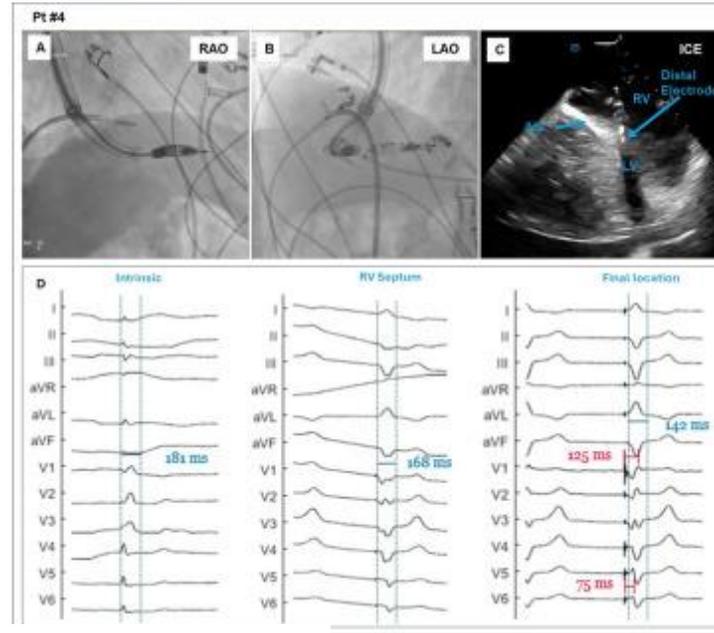
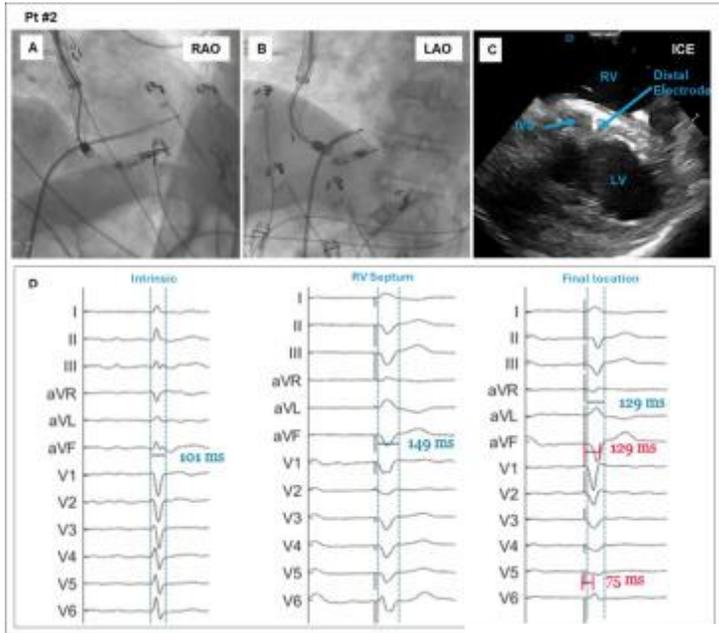
F-I-M Study of a Leadless Pacemaker System for Left Bundle Branch Area Pacing

- ❖ Leadless pacing has already demonstrated significant benefits to patients
- ❖ Current ventricular leadless pacemakers are limited to right ventricular pacing and cannot perform left bundle branch area pacing (LBBAP)
- ❖ A novel helix-based leadless pacemaker has been developed for LBBAP that combines the benefits of leadless pacemaker technology with that of conduction system pacing (LP_{CSP}).

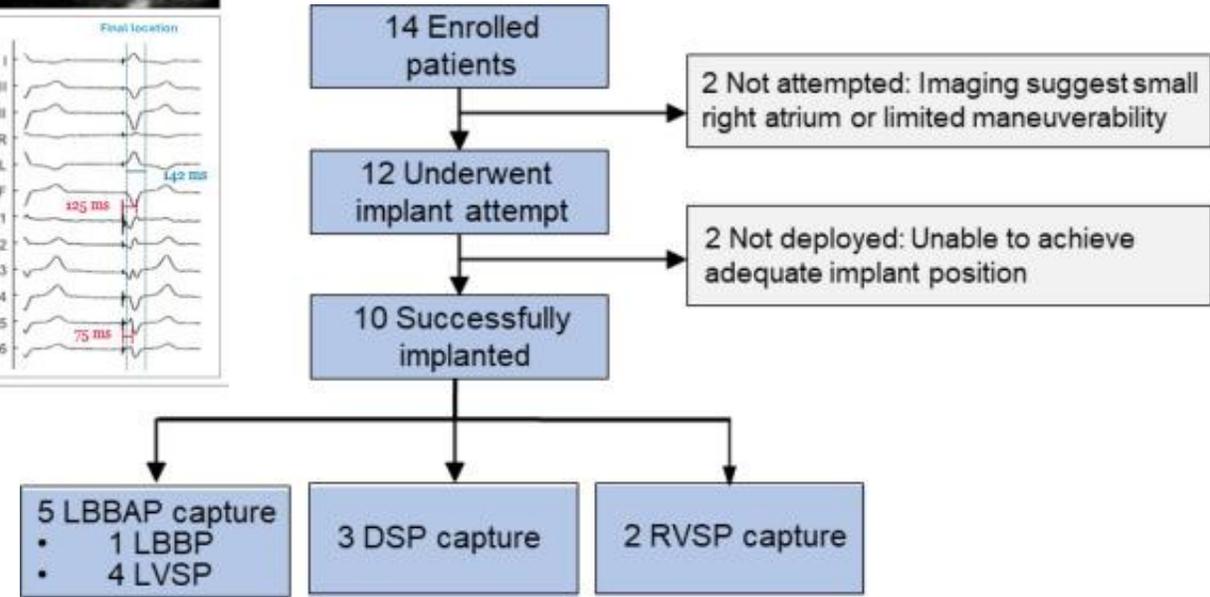
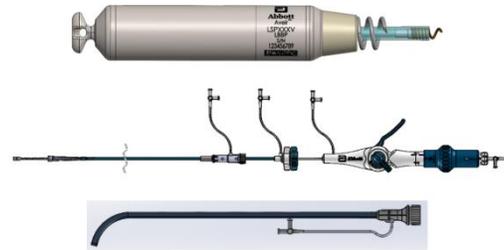


F-I-M Study of a Leadless Pacemaker System for Left Bundle Branch Area Pacing

Reddy V / Nair D / Neuzil P Heart Rhythm 2025



AVEIR CSP



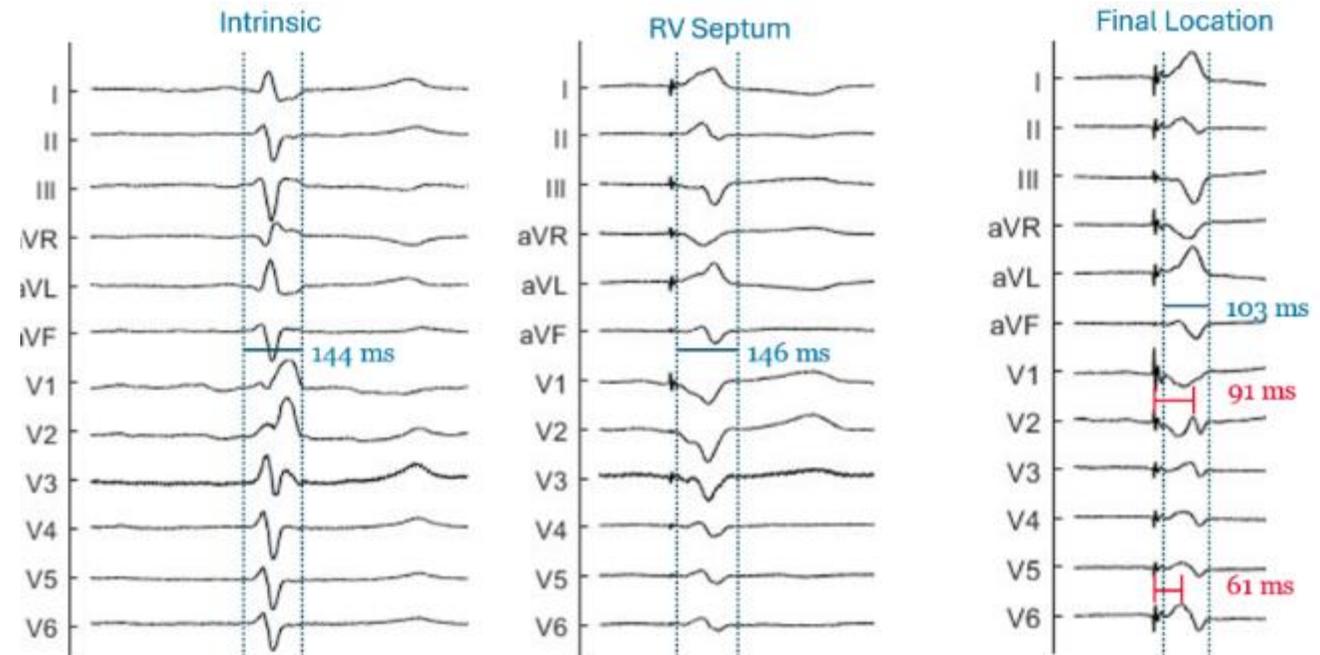
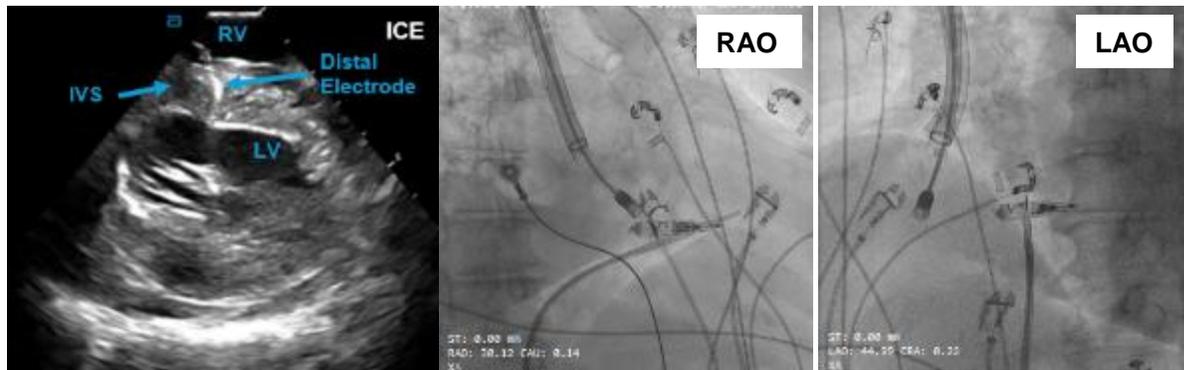
1. LÉKAŘSKÁ
FAKULTA
Univerzita Karlova

NEMOCNICE
NA HOMOLCE



F-I-M Study of a Leadless Pacemaker System for Left Bundle Branch Area Pacing

- 74 yo, Female, RBBB, SND, History of AF
- Capture type Assessment
 - Electrode tip on the left side of septum
 - V6 RWPT of 61 ms
 - **V6-V1 = 30 ms**
 - **Terminal r wave visible in V2**
- Capture type: **DSP**

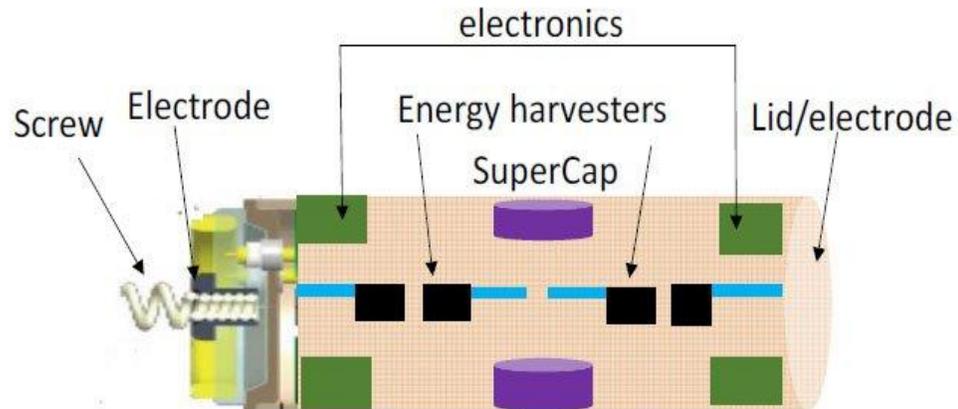
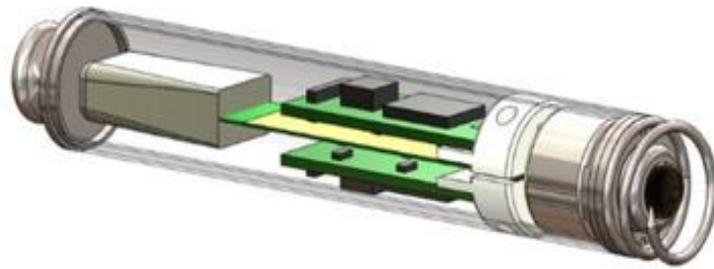


Nová technologie baterií „harvesting“ energie

- Kardiokinetika jako zdroj energie pro stimulaci:

[Piezoelectric energy harvester for pacemaker application: a comparative study - IOPscience](#)

Parameters	Micra (Medtronic)	ALPS
Polarity	bipolar	bipolar
Pacing modes	VVIR (single-ch)	VVIR / DDDR
Rate modulation	3D accelerometer	3D accelerometer
Energy supply	Lithium iodine battery	Piezoelectric energy harvester
Estimated longevity (ISO)	5 y	> 20y
Size (D x L) mm	6,7 x 26	6,5 x 30
Fixation mechanism	Tines	Helix + torque limiter
Delivery	Femoral catheter access	Femoral catheter access
Other features	Hourly/daily based pacing threshold verification	Beat to beat capture verification
		Automatic sensing adaptation
		Holter episode for EGM + Acceleration
		Daily/weekly Home-monitor transmission



SILNÝ LEADLESS



SLABÝ TRANSVENOUS



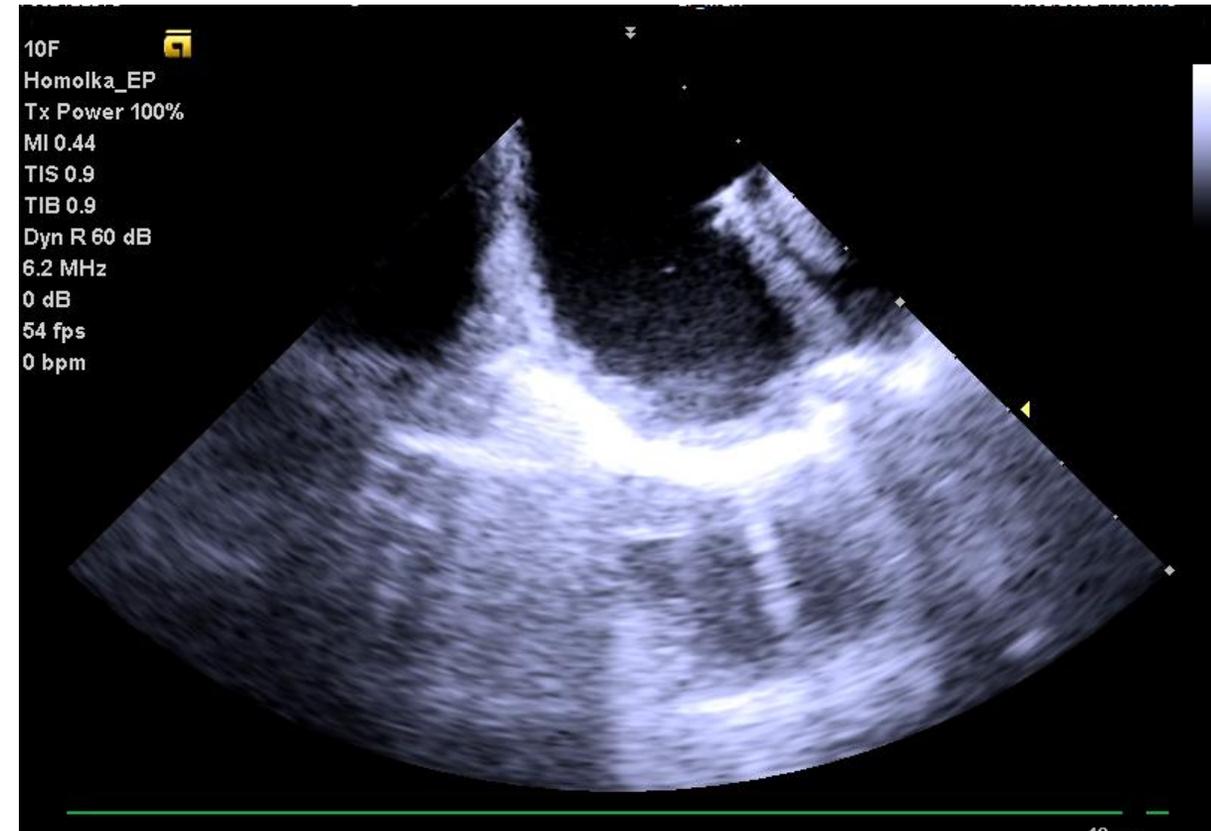
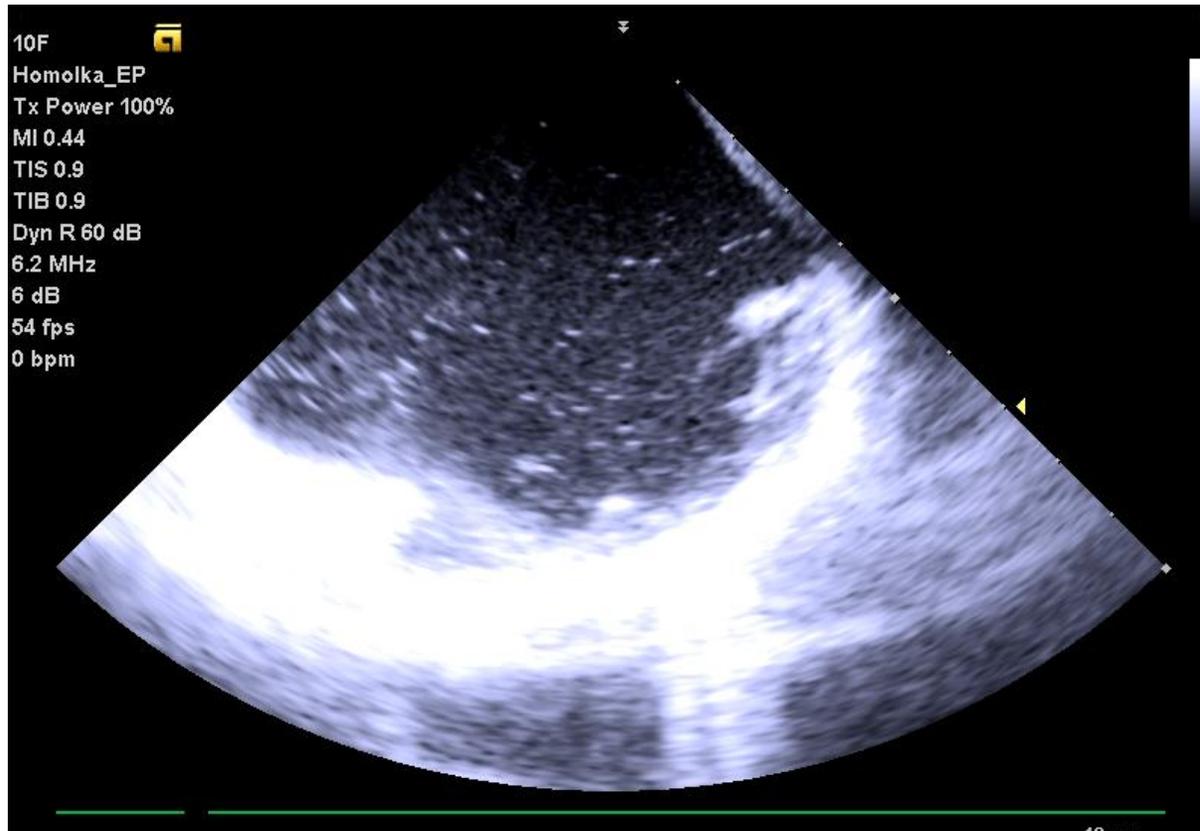
TAK KDO MŮŽE BÝT PROTI??





Dvoudutinový leadless Aveir DR

implantace síňového Aveir - ICE

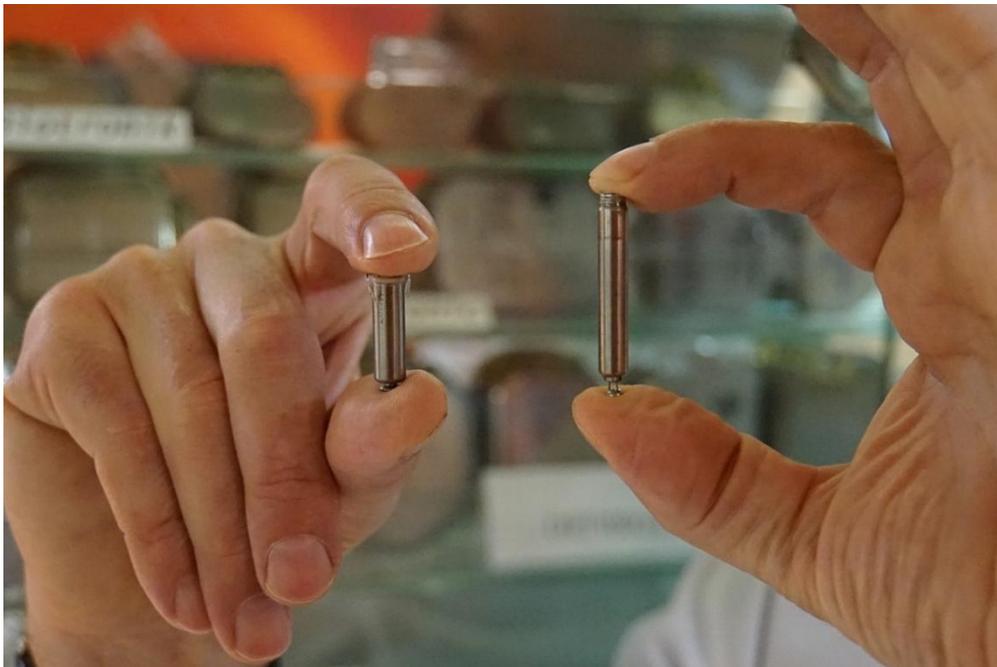


1. LÉKAŘSKÁ
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NA HOMOLCE



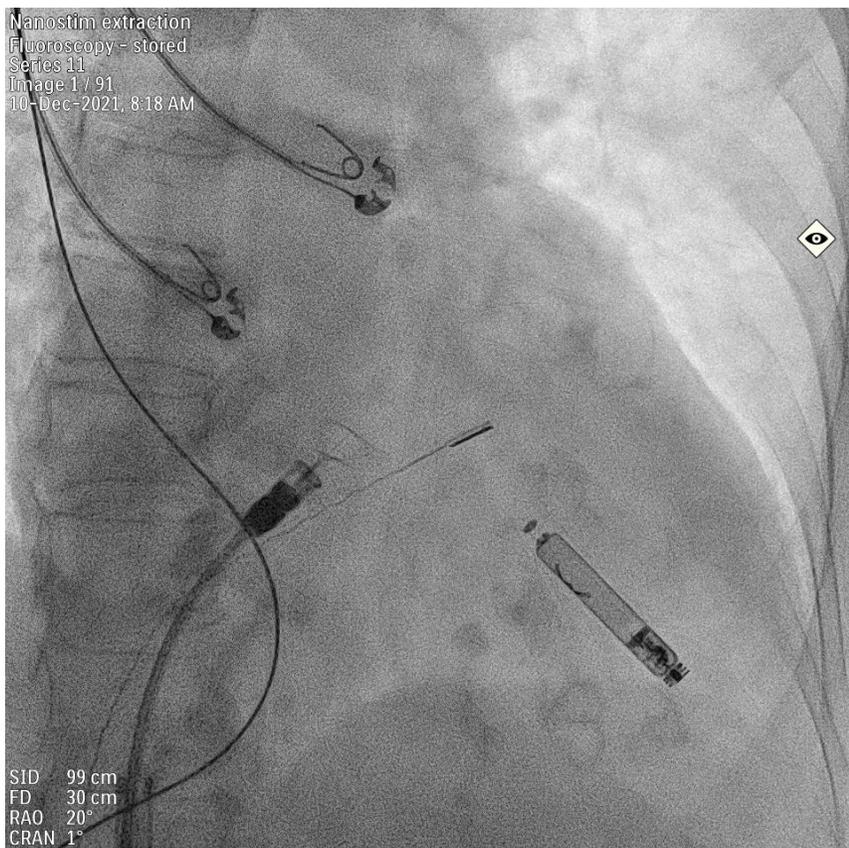
13 LET PO PRVNÍ IMPLANTACI NENÍ LEADLESS KARDIOSTIMULACE SVÉBYTNOU PLATFORMOU



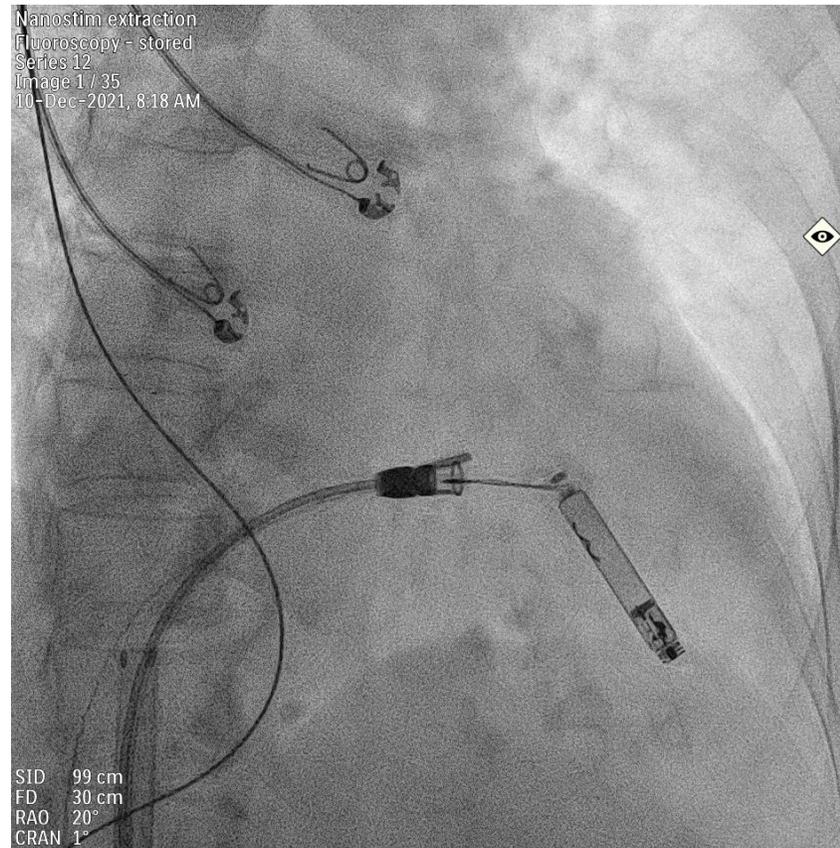
Case report

Nanostim LCP retrieval December 10, 2021

**Tri-Loop High Torque retrieval catheter
CAPTURE Dec 10, 08:18**



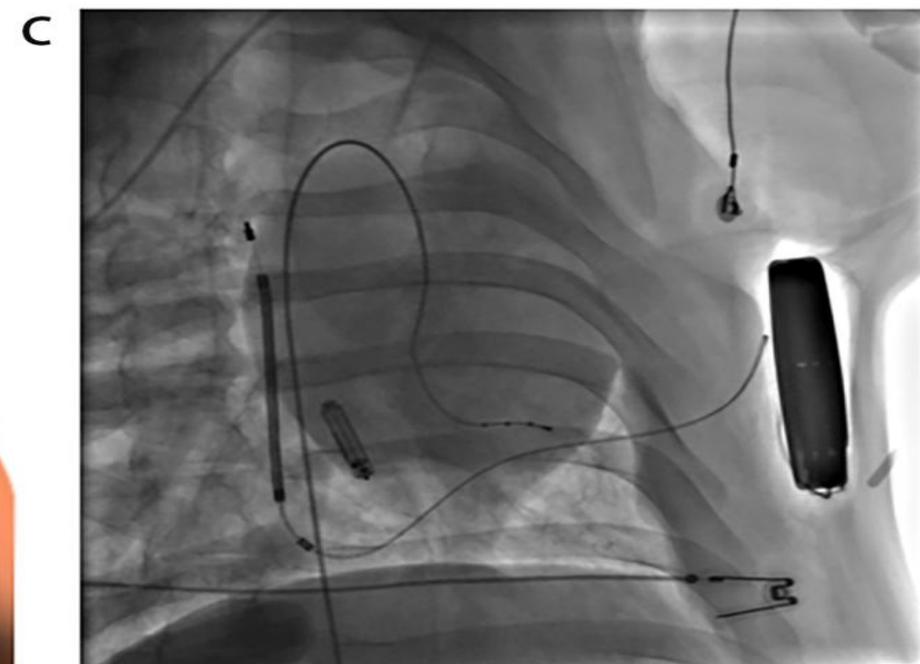
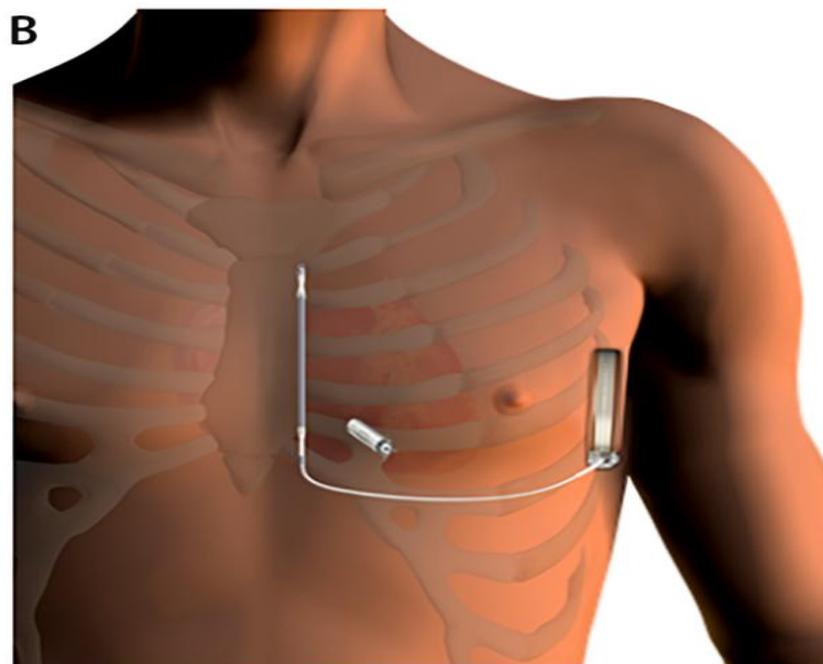
**Tri-Loop High Torque retrieval catheter
DOCKING Dec 10, 08:18**



Komunikace Leadless ATP & S-ICD:

Preklinický model

Koncept: Leadless Systém umožňuje brady pacing, ATP a defibrilaci



- Muž, 61 let
- ICHS (st.p. NSTEMI spodní stěny s dPCI ACD a RMS + 2x BSM 11/2006)
- Chronické srdeční selhání HFrEF (EF LK 20 %)
- V roce 2007 implantován transvenózní ICD v rámci sekundární prevence NSS
- Opakované infekční komplikace
- Leden 2022 extrakce původního ICD včetně elektrod
- **Únor 2022 - Implantace S-ICD - Boston Scientific EMBLEM MRI**

Komunikace Leadless ATP & S-ICD:

Kazuistika

- **Od první implantace ICD v roce 2007 zaznamenáno 90 incesantních epizod setrvalé KT**
- **Leden 2017 - Katetrizační RF ablace arytmogenního substrátu LK**
- **Pouze jediná epizoda setrvalé KT v únoru 2022 : Ukončena 1. výbojem S-ICD**
 - Středně významná mitrální regurgitace (konzervativní postup)
 - Arteriální hypertenze
 - Hyperlipoproteinemie
 - Diabetes mellitus 2. typu na PAD
 - Amauróza levého oka, revmatoidní artritida

• **Prosinec 2023 implantace LCP EMPOWER (BSCI) v režimu VVICD**

Klinická studie: MODULAR ATP

Komunikace Leadless ATP & S-ICD:

Kazuistika



SUMMARY REPORT

Report Printed: 01/02/2024 3:53 pm
 Programmer Software Version: 1.04
 Device Software Version: 3.2.662

Patient Name: 0492MA555
 Last Follow-up Date: 12/19/2023
 Follow-up Date: 01/02/2024
 Implant Date: 01/25/2022

Device Model#: A219 EMBLEM™ MRI S-ICD
 Device Serial#: 143993
 Electrode Model#: 3501
 Electrode Serial#: 200119
 Pacemaker Model/Serial#: B170/151351

Programmable Parameters

Current Device Settings

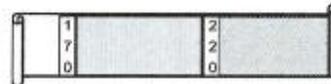
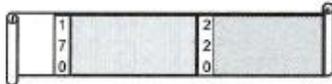
Therapy: ON
 Shock Zone: 220 bpm (ATP On)
 Conditional Shock Zone: 170 bpm (ATP x2)
 Post Shock Pacing: OFF
 SMART Pass: OFF

Gain Setting: 1X
 Sensing Configuration: Secondary
 Shock Polarity: REV

Initial Device Settings

Therapy: ON
 Shock Zone: 220 bpm (ATP On)
 Conditional Shock Zone: 170 bpm (ATP x2)
 Post Shock Pacing: OFF
 SMART Pass: OFF

Gain Setting: 1X
 Sensing Configuration: Secondary
 Shock Polarity: REV



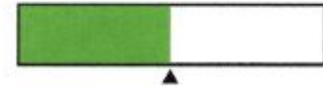
Parameter changes this session: NO

Episode Summary

Since Last Follow-Up
 Untreated Episodes: 0
 Treated Episodes: 14
 # of Shocks Delivered: 24
 # of ATPs Requested: 9

Since Implant
 Untreated Episodes: 0
 Treated Episodes: 15
 # of Shocks Delivered: 30
 # of ATPs Requested: 23

Battery Status



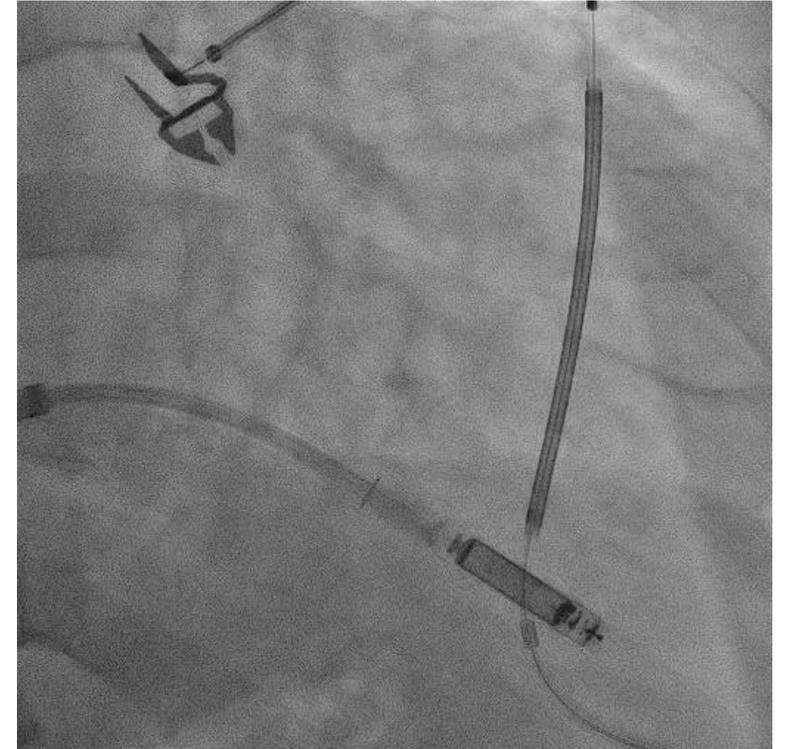
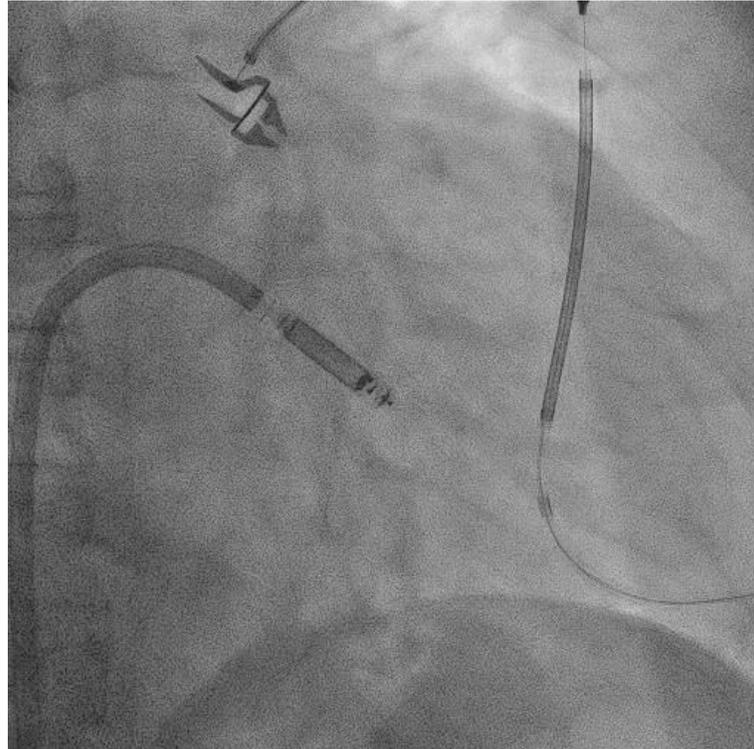
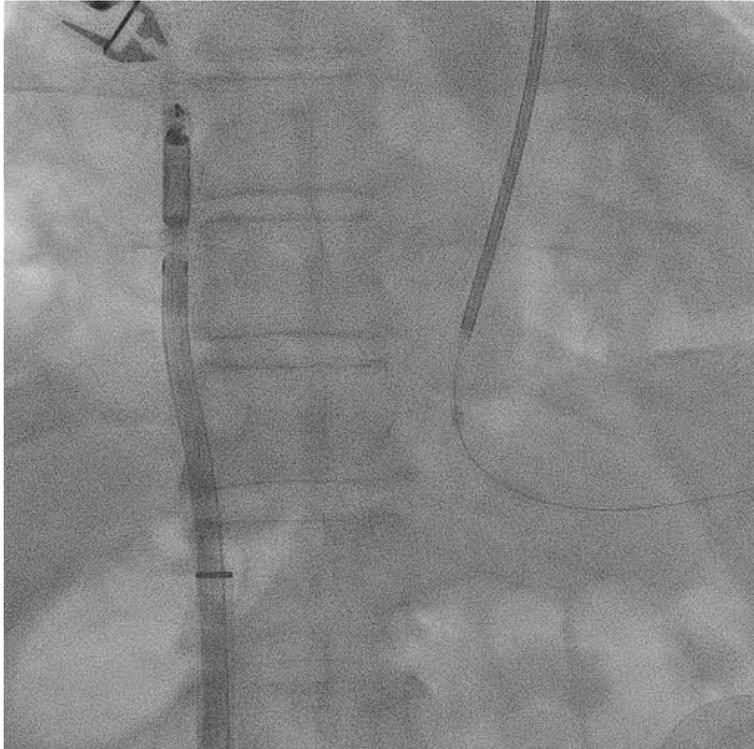
Remaining Battery Life to ERI: 43%

Electrode Impedance Status

 System Impedance = 210 Ohms

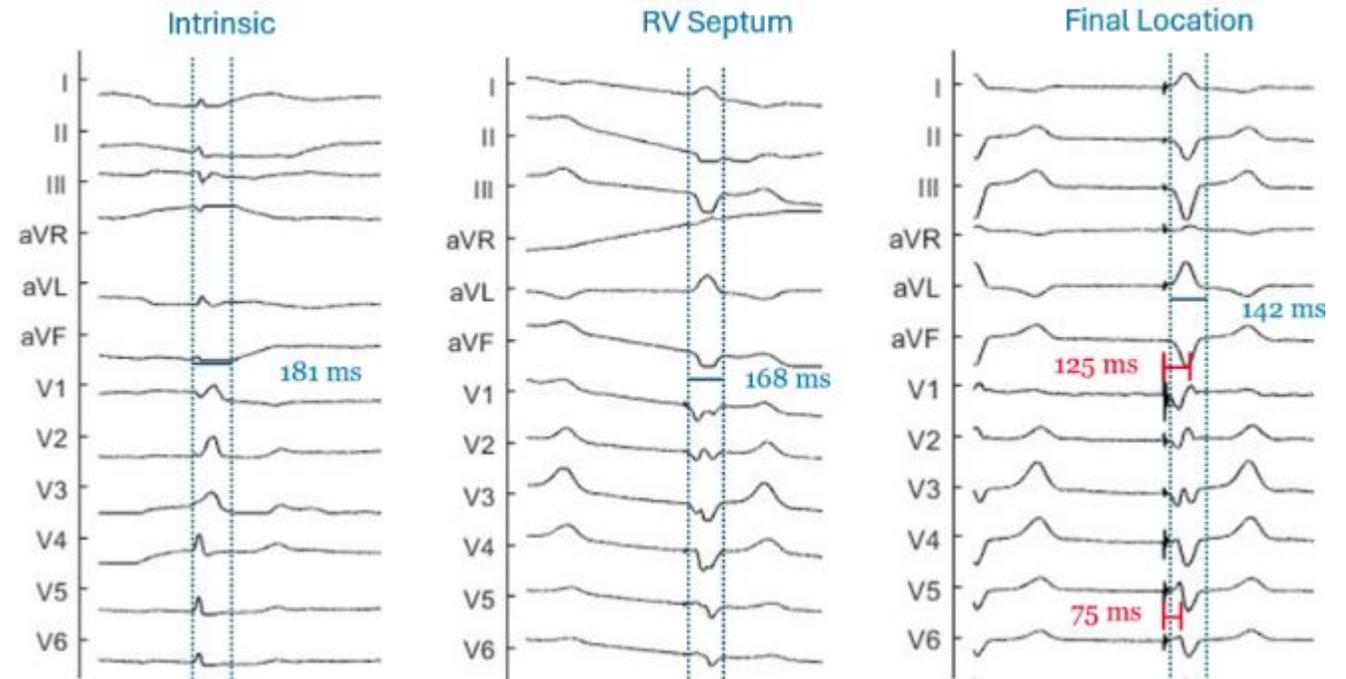
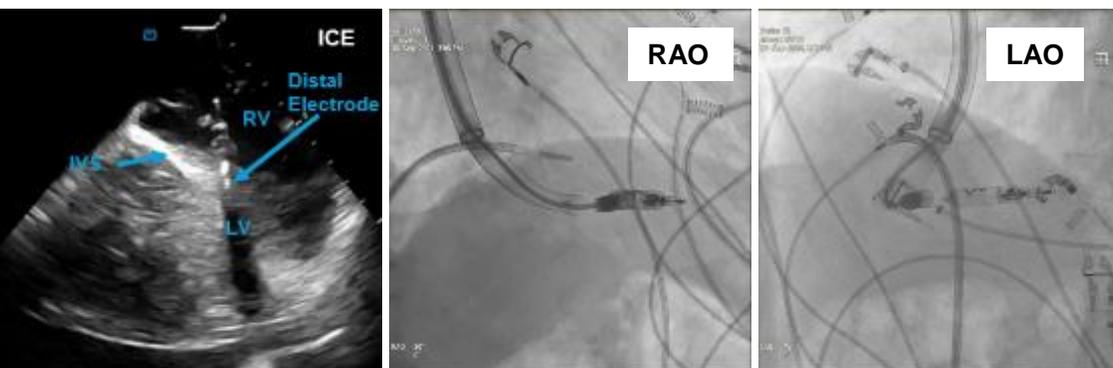
Komunikace Leadless ATP & S-ICD:

Kazuistika



F-I-M Study of a Leadless Pacemaker System for Left Bundle Branch Area Pacing

- 77 yo, Male, RBBB, SND, CHF, NYHF Class II
- Capture type Assessment
 - Electrode tip on the left side of septum
 - V6 RWPT of 75 ms
 - V6-V1= 50 ms
 - **Small Terminal r wave visible in V1**
- Capture type: **LVSP**



F-I-M Study of a Leadless Pacemaker System for Left Bundle Branch Area Pacing

- 74 yo, Male, SND, History of AF, CAD, and PCI
- Capture type Assessment
 - Electrode tip on the left side of septum
 - V6 RWPT of 75 ms
 - V6-V1 = 54 ms
 - Terminal r wave visible in V1
- Capture type: **LBBP**

Red denotes Stim to RWPT on V1 and V6

Blue denotes QRS duration measured from onset to offset

