



2022

**BUDAPEST
INTERNATIONAL
ARRHYTHMIA
SPECIALISTS' DAYS**



AQUAWORLD RESORT BUDAPEST
29-30 SEPTEMBER, 2022



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**Hungarian Society of Cardiology's
Working Group on Cardiac Arrhythmias and Pacing**



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BUDAPEST INTERNATIONAL ARRHYTHMIA SPECIALISTS' DAYS

PROGRAMME BOOK

AQUAWORLD RESORT BUDAPEST, HUNGARY
29-30 SEPTEMBER, 2022
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**Hungarian Society of Cardiology's
Working Group on Cardiac Arrhythmias and Pacing**



DISTINGUISHED COLLEAGUES, DEAR FRIENDS,

On behalf of the Hungarian Society of Cardiology's Working Group on Cardiac Arrhythmias and Pacing (WGCAP, HSC), we would like to welcome you all to the Budapest International Arrhythmia Specialists' Days (BIAS). We are honoured that this two-day scientific symposium is held this time in our lovely capital, Budapest, between 29–30 September 2022.

The Working Group on Arrhythmia and Cardiac Pacing has been organizing annual scientific congresses of its own since 1998. Since the beginning of the COVID pandemic, it has been very difficult to meet and discuss recent scientific results in person worldwide. We switched to online platforms due to the SARS-CoV2-pandemic, but managed to organize our last congress „off-line” again last year and this one as well. Although the COVID-19 pandemic has made it extremely challenging to focus on our main specialty in the past two years, we have still had a highly productive year so far.

The philosophy of our annual scientific congress has also evolved. In the future, the regular 3-day congress is planned to be held as a biennial event in each odd-numbered year; also, and regular 1.5-day English-language EP/CRM specialist's symposia on diverse topics will be scheduled for the upcoming even-numbered years.

We would like to sincerely thank all the members of the Organizing Committee and the Faculty for investing a substantial amount of time and energy into the creation of the scientific program. The BIAS'D Faculty consists of members of EHRA, practicing electrophysiologists, CIED specialists, as well as allied professionals from all over Europe. A Joint Session is organized also together with SCRN in English with international experts on 29 September 2022.

Whether you are an invited speaker, chairman, or a member of the audience, I would like to thank you all for your invaluable contribution to our international scientific meeting.

It is always a great honour and pleasure to listen to several excellent arrhythmia-related talks at these occasions, covering new diagnostic and therapeutic possibilities. Our main aim continues to be the sharing of up-to-date scientific content, while also building bridges between the primary care and special arrhythmology care.

Prof. Endre Zima
President

Dr. Gábor Duray MD, PhD, med.habil
Vice-president

Dr. Marcell Clemens MD, PhD
Vice-president

Dr. Csaba Földesi MD, PhD
Secretary

Dr. Máté Vámos MD, PhD, med.habil
Secretary

Working Group on Cardiac Arrhythmias and Pacing, Hungarian Society of Cardiology

GENERAL INFORMATION

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Prof. László Gellér
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www.aquaworldresort.hu

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Laboratory Science, Debrecen, Hungary

Prof. Mauro Biffi
University of Bologna, Bologna, Italy

ACCREDITATION

For Hungarian doctors - **SE-TK/2022.II/00152**
– **32 credit points**, for assistants - **16 credit points**

SCIENTIFIC INFORMATION

Prof. Endre Zima

ORGANIZING INFORMATION

Sponsorship, exhibition

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Convention Budapest Kft.
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www.convention.hu

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University Hospital of Geneva, Italy

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CardioVascular Center Bethanien, Agaplesion
Markus Hospital, Frankfurt am Main, Germany

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Institute of Cardiology, University of Debrecen,
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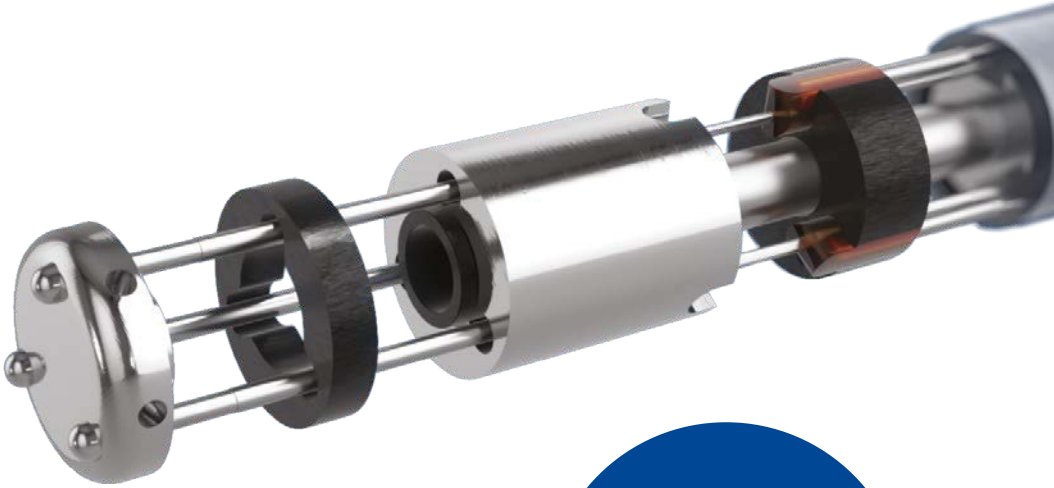


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SCIENTIFIC PROGRAMME

THURSDAY | 29.09.2022

07:30 - 08:30

REGISTRATION

08:30 - 08:45

OPENING CEREMONY – WELCOME SPEECH

Prof. Endre Zima, Dr. Gábor Duray, Dr. Marcell Clemens, Dr. Csaba Földesi, Dr. Máté Vámos, Prof. Béla Merkely, Prof. László Gellér

08:45-09:45

TRANSVENOUS OR EXTRAVASCULAR ICD: WHICH DEVICE FOR WHICH PATIENT?

Chairs: Dr. Csaba Földesi, Dr. Máté Vámos

Subcutaneous or substernal ICD? – The surgeons' opinion (20')

Prof. Joachim Winter (University of Düsseldorf, Germany)

Dr. Marianna Németh (Semmelweis University, Heart and Vascular Center, Budapest, Hungary)

Experience with the substernal ICD (20')

Prof. Béla Merkely (Semmelweis University, Heart and Vascular Center, Budapest, Hungary)

Hungarian experience with Subcutaneous-ICD (10')

Dr. Zoltán Som (Gottsegen National Cardiovascular Center, Budapest, Hungary)

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Discussion (10')

09:45-10:00

BREAK

10:00- 11:05

CONDUCTION SYSTEM PACING: HOW AND FOR WHOM?

Chairs: Prof. Béla Merkely, Dr. László Ságthy

Indications for conduction system pacing: „For Whom„? (ONLINE, 20')

Prof. Haran Burri (University Hospital of Geneva, Switzerland)

Techniques of conduction system pacing: „How”, with special regard to LBBA pacing (20')

Prof. Marek Jastrzębski (Jagiellonian University, Krakow, Poland)

Conduction system pacing: The Hungarian Experience (10')

Prof. László Gellér (Semmelweis University, Heart and Vascular Center, Budapest, Hungary)

Discussion (15')

11:05-11:20

COFFEE BREAK

11:20-12:30

NOVELTIES IN CARDIAC RESYNCHRONIZATION THERAPY

Chairs: Prof. László Gellér, Prof. Endre Zima, Dr. Gábor Duray

CRT with 2 leads only: Hype or Hope? (20')

Prof. Mauro Biffi (University of Bologna, Bologna, Italy)

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Optimizing response in CRT patients by device programming (20')

Dr. David Žižek (University Medical Centre Ljubljana, Slovenia)

Preliminary results of the BUDAPEST-CRT Upgrade Trial (20')

Prof. Béla Merkely (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

Discussion (10')

12:30-13:30

LUNCH BREAK

13:30-14:45

CURRENT DEVELOPMENTS ON TRANSCUTANEOUS LEAD EXTRACTION

Chairs: Dr. László Sághy, Dr. Attila Kardos

Understanding safety in lead extraction procedures – How to improve outcomes (20')

Prof. Christoph T. Starck (Deutsches Herzzentrum, Berlin, Germany)

Hungarian experience with lead extraction (15')

Prof. László Gellér (Semmelweis University, Budapest, Hungary)

A head-to-head comparison of the first choice and crossover powered extraction sheath: Laser vs. Mechanical (10')

Dr. Máté Vámos (University of Szeged, Szeged, Hungary)

Perioperative oral anticoagulant agents and blood tests: What to be aware of? (20')

Dr. Zsuzsanna Bereczky (University of Debrecen, Division of Clinical Laboratory Science, Debrecen, Hungary)

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Discussion (10')

14:45-15:00

COFFEE BREAK

15:00-16:00

ZERO FLUOROSCOPY ABLATION OF PAROXYSMAL SUPRAVENTRICULAR TACHYCARDIAS

Chairs: Dr. Gábor Duray, Dr. Klaudia Vivien Nagy, Dr. Zoltán Salló

The importance of zero fluoroscopy ablations - beyond the protection of electrophysiologists and patients (15')

Dr. Bor Antolič (Department of Cardiology, University Medical Centre Ljubljana, Slovenia)

Learning curve of the zero fluoroscopy technique and conversion rate to fluoroscopy (10')

Dr. Klaudia Vivien Nagy (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

ICE support for zero fluoroscopy ablations, does it have added value? (10')

Dr. Péter Kupó (University of Pécs, Pécs, Hungary)

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Zero fluoroscopy ablations in infants and children (10')

Dr. László Környei (Hungarian Pediatric Heart Centre, Budapest, Hungary)

Discussion (15')

16:00-16:15

BREAK

16:15-17:15

SINGLE SHOT VS POINT-BY-POINT IN ATRIAL FIBRILLATION ABLATION

Chairs: Prof. Zoltán Csanádi, Dr. Csaba Földesi

The single shot techniques in atrial fibrillation ablation (ONLINE, 20')
Prof. Julian Chun (CardioVascular Center Bethanien, Agaplesion Markus Hospital, Frankfurt am Main, Germany)

Debate: The only way for PVI in patients with left common trunk is the point-by-point ablation

Pro: Dr. Róbert Pap (University of Szeged, Szeged, Hungary) (10')

Contra: Dr. Vedran Velagic (University of Zagreb, Zagreb, Croatia) (10')

Answers (10')

Discussion (10')

17:15-17:30

BREAK

17:30-19:00

BIAS'D AND SCRIN JOINT SECTION: STATE-OF-THE-ART: HIGH POWER ABLATION AND REMOTE NAVIGATION TECHNIQUES

Chairs: Prof. Dhiraj Gupta, Dr. Klaudia Vivien Nagy

Introduction, novelties in the field of cardiac ablation (5')
Prof. Peter Weiss (Banner - University Medical Center, Phoenix, USA)

High Power and Very High Power short ablation for AF: why and how? (20')
Prof. Dhiraj Gupta (Liverpool Heart and Chest Hospital, Liverpool, UK)

Durability and safety results of High Power and Very High Power short duration PVI (10')

Dr. Nándor Szegedi (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

Remote navigation in ablation of complex atrial arrhythmias (15')
Prof. Tamás Szili-Török (Erasmus Medical Center Rotterdam, Netherlands)

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Utilization of machine learning in treatment of arrhythmia patients (15')
Prof. Sabine Ernst (Imperial College London, London, UK)

Discussion (15')

20:00

DINNER & LOUNGE MUSIC

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SCIENTIFIC PROGRAMME

FRIDAY | 30.09.2022 | ROOM „A”

09:00-10:00

THE ROLE OF ULTRASOUND IN EP LAB

Chairs: Dr. Petr Peichl, Dr. László Sághy

Intracardiac echocardiography in AF ablation (20')
Dr. Bor Antolič (University Medical Centre Ljubljana, Slovenia)

ICE in SVT ablations (15')
Dr. Róbert Pap (University of Szeged, Szeged, Hungary)

Ultrasound guidance for vascular access in EP procedure - how to avoid the complications? (15')
Dr. Péter Kupó (University of Pécs, Pécs, Hungary)

Discussion (10')

10:00-10:15

COFFEE BREAK

10:15-11:20

CURRENT PRACTICES AND CONTROVERSIES OF ANTICOAGULANT THERAPY

Chairs: Prof. Endre Zima, Dr. Ferenc Árvai

Anticoagulation during AF ablation, focus on the DOACs (20')
Dr. Dejan Kojic (Dedinje, Cardiovascular Institute, Belgrade, Serbia)

Atrial fibrillation ablation: critical appraisal of the 25 years (20')
Prof. Zoltán Csanádi (Institute of Cardiology, University of Debrecen, Debrecen, Hungary)

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Feasibility and safety NOAC treatment during the COVID pandemic (20')
Prof. Robert Hatala (National Cardiovascular Institute and Slovak Medical University, Bratislava, Slovakia)

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Discussion (5')

11:20-11:30

BREAK

11:30-12:30

REMOTE CIED-PATIENT MANAGEMENT IN THE “COVID- ERA”. DOES ONE SIZE FIT ALL?

Chairs: Prof. Robert Hatala, Dr. Tamás Tahin, Dr. Gábor Duray

Telemedicine and digital technologies for arrhythmia management – beyond gadgets (20’)

Prof. Robert Hatala (National Cardiovascular Institute and Slovak Medical University, Bratislava, Slovakia)

Remote monitoring of CIED patients during the COVID lockdown (15’)

Prof. Endre Zima (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

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Future practical aspects of remote monitoring of heart failure patients (15’)

Dr. Annamaria Kosztin (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

Discussion (10’)

12:30-13:30

LUNCH BREAK

13:30-14.15

PULSED-FIELD SINGLE SHOT ABLATION

Chairs: Prof. László Gellér, Dr. Attila Kardos

Pulsed-field ablation: Prague experiences (20’)

Dr. Petr Peichl (Department of Cardiology, IKEM, Prague, Czech Republic)

Learning curve of AF ablation with single shot PFA and initial Hungarian results (15’)

Dr. Nándor Szegedi (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

SPONSORED BY TWINMED KFT.

Discussion (10’)

14:15-14:30

COFFEE BREAK

14:30-15:30

ARRHYTHMIAS AND ABLATION IN SPECIAL CIRCUMSTANCES

Chairs: Prof. Endre Zima, Dr. Marcell Clemens

VT ablation: state-of the art (20')

Prof. László Gellér (Semmelweis University Heart and Vascular Centre, Budapest, Hungary)

Atypical accessory pathway ablations (15')

Prof. Emin Evren Ozcan (Dokuz Eylul University, Izmir, Turkey)

Non-antiarrhythmic drug therapy to reduce the burden of VTA (15')

Dr. Csaba Földesi (Gottsegen National Cardiovascular Center, Budapest, Hungary)

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Discussion (10')

15:30-15:45

CLOSING CEREMONY

Prof. Endre Zima, Dr. Gábor Duray, Dr. Marcell Clemens, Dr. Csaba Földesi, Dr. Máté Vámos, Prof. Béla Merkely, Prof. László Gellér

15:45-18:00

BOARD ELECTION OF WGCAP, HSC – IN HUNGARIAN

(MKT Aritmia és Pacemaker Munkacsoport vezetőségválasztása)

SCIENTIFIC PROGRAMME

FRIDAY | 30.09.2022 | ROOM „B”

13:30-15:00

ABSTRACT SESSION AND OF EP ASSISTANTS & ALLIED PROFESSIONALS (LANGUAGE: HUNGARIAN)

Chairs: Dr. István Osztheimer, Dr. Leticia Papp

AV-szekvenciális, transzvéna, vezeték nélküli pacemaker beültetés teljes felső vénás elzáródásban: Esetbemutató (15')

Tóth Zsóka, Irsai Farkas Ildikó, Damián-Kedves Eleonóra, Dr. Miklós Márton, Dr. Makai Attila, Dr. Pap Róbert, Dr. Sághy László, Dr. Vámos Máté (SZTE, Elektrofiziológiai Labor, Szeged)

Ultragang-vezérlés röntgen-mentes katéter-abláció során (15')

Mártonné Pop Cristina, Márkné Egervári Mária, Tóth Zsóka, Irsai Farkas Ildikó, Dr. Pap Róbert, Dr. Sághy László (SZTE, Elektrofiziológiai Labor, Szeged)

Charge density térképezés – új alternatíva a pitvari ritmuszavarok kezelésében (15')

Kiss Edit, Bettenbuch Tünde, Srej Marianna, Blazsek Mónika, Dr. Szegedi Nándor, Dr. Salló Zoltán, Dr. Nagy Klaudia Vivien, Prof. Gellér László (SE VSZÉK Pacemaker és Elektrofiziológiai Labor, Budapest)

BIOTRONIK HUNGÁRIA KFT. TÁMOGATÁSÁVAL

Nyitott szívűtét subcutan cardioverter defibrillátorral rendelkező betegnél (15')

Bettenbuch Tünde, Srej Marianna, Prof. Hartyánszky István, Prof. Gellér László, Prof. Merkely Béla, Dr. Daróczy László, Dr. Németh Marianna (SE VSZÉK Pacemaker és Elektrofiziológiai Labor, Budapest)

Discussion & Round Table (Megbeszélés és kerekasztal) (30')

IGAZOLT HATÁSOSSÁG, SZUPERIOR BIZTONSÁGOSÁGI PROFIL^{1*}

Egyszerű lehetőség a stroke megelőzésére non-valvuláris pitvarfibrillációban²



**NAPONTA
1x**

* Az ENGAGE AF-TIMI 48 vizsgálat elsődleges biztonságossági végpontja a súlyos vérzéses események előfordulása volt.
Referencia: 1. Giugliano RP et al. NEJM 2013;369(22):2093-2104, 2. Lixiana alkalmazási előírás

Rövidített alkalmazási előírás: Lixiana 15 mg filmtabletta, Lixiana 30 mg filmtabletta, Lixiana 60 mg filmtabletta. ATC kód: B01AF03. Hatóanyag: 15 mg, 30 mg és 60 mg edoxabán tartalmaz (tozilat formájában) filmtablettánként. **Ismert hatású segédanyag:** Mannit (E 421), enyhe hasmenést okozhat. **Terápiás javallatok:** A Lixiana stroke és a szisztémás embolizáció megelőzésére javallott nem billentyű eredetű pitvarfibrillációban (non valvular atrial fibrillation – NVAF) szenvedő, egy vagy több kockázati tényezővel rendelkező felnőtt betegeknek, amilyen például a pangásos szívelégtelenség, a hypertensio, a 75 év vagy afeletti életkor, a diabetes mellitus, korábbi stroke vagy transziens ischaemias attack (TIA). A Lixiana mélyvénás thrombosis (deep vein thrombosis – DVT) és a pulmonalis embolia (PE) kezelésére és ismétlődő DVT és PE megelőzésére javallott felnőtteknek.

Osztályozás: Orvosi rendelvényhez kötött gyógyszer (V).

A forgalomba hozatali engedély jogosultja: Daiichi Sankyo Europe GmbH, Zielstattstrasse 48, 81379 München, Németország

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Elérési útvonal: <http://www.neak.gov.hu>; SZAKMÁNÁK; GYÓGYSZER/GYÓGYÁSZATI SEGÉDESZKÖZ/GYÓGYFÜRDŐ TÁMOGATÁSOK; Egészségügyi szakembereknek; PUBLIKUS GYÓGYSZERTÖRZS; VÉGLEGES TÖRZS.

Ha bővebb információért szeretne a Lixiana 15 mg, 30 mg, 60 mg filmtablettával kapcsolatban, kérjük, küldje el kérdését a dpc.hungary@organon.com e-mail címe. A gyógyszer engedélyezését követően lényeges a feltételezett mellékhatások bejelentése, mert az fontos eszköze annak, hogy a gyógyszer előny/kockázat profilját folyamatosan figyelemmel lehessen kísérni. Kérjük, hogy a feltételezett mellékhatásokat jelentsen az Országos Gyógyszerészeti és Élelmezés-egészségügyi Intézet (OGYÉI) a <http://www.ogyei.gov.hu/> honlapon megtalálható online bejelentő-feüületen keresztül vagy a honlapról letölthető mellékhatás-bejelentő lapon, melyet visszaküldhet e-mailben (adr.box@ogyei.gov.hu), levélben (Országos Gyógyszerészeti és Élelmezés-egészségügyi Intézet, 1372 Budapest, Pf.450.), vagy faxon (+36 1/886-9472), vagy az Organon Hungary Kft. gyógyszerbiztonsági osztálya felé a +36 (1) 766 1963 telefonszámon vagy a dpc.hungary@organon.com e-mail címen. Kérjük, hogy mellékhatás-bejelentését csak egy helyre juttassa el. További információk: Organon Hungary Kft. 1082 Budapest, Futó u. 37–45. Telefon: +36 (1) 766 1963.



Organon Hungary Kft., 1082 Budapest, Futó utca 37–45.
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Biosense Webster
A leader in the field of minimally-invasive heart care

The HELIOSTAR™ Balloon Ablation Catheter allows for efficient and safe PVI in PAF patients with majority of PVs requiring only one application

First-in-man RADIANCE^{1,2*}



4 EUROPEAN HOSPITALS

40 DRUG-REFRACTORY PAF PATIENTS
61 YRS, 58% MALE

PVI with HELIOSTAR™ Balloon Ablation Catheter



CUSTOMIZABLE ENERGY DELIVERY
OPTIMAL ANATOMICAL FIT
CARTO® INTEGRATION



Procedure efficiency & safety

101.6MIN PROCEDURE TIME	79.6% PVI WITH ONE APPLICATION	2.6% PRIMARY ADVERSE EVENT RATE
BALLOON DWELL: 40.5 MIN	FLUOROSCOPY:	16.3 MIN

12-month outcome¹

Freedom from documented arrhythmia at 12 months¹



0 REPEAT PROCEDURES

*Key conclusions on efficacy and safety in the RADIANCE Study are preliminary and require larger studies to fully validate.

AAD = atrial fibrillation; drug PAF = pharmacologic atrial fibrillation; BF = radiofrequency; PV = pulmonary vein; PVI = pulmonary vein isolation.

After formal study conclusion at 3 months, a subset of 37 patients were followed up to 12 months.

Arrhythmia monitoring via 24 hr ECG ambulatory monitoring

Thibault VV, et al. *Circ Arrhythm Electrophysiol*. 2019 Dec;13(12):e007041. doi: 10.1161/CIRCEP.119.007041.

Thibault VV, et al. *J Cardiovasc Electrophysiol*. 2020 Apr 6; doi: 10.1111/jce.14470. This study was not powered to fully evaluate clinical outcome.

For product details such as Indications, Contraindications, Warnings and Precautions please consult the IFU. This publication is not intended for distribution outside of the EMEA region.

NOTES

A page for taking notes with a red title "NOTES" at the top. The page features horizontal dotted lines for writing. The background is decorated with abstract geometric shapes: a grey triangle on the left, a light pink triangle at the bottom left, and a grey diagonal band crossing the page. A white diagonal line is also present in the bottom right corner.

NOTES

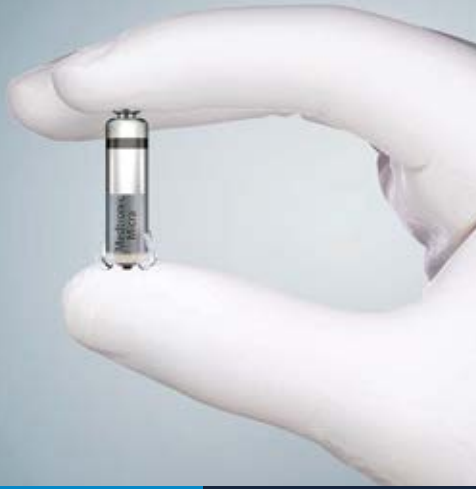
A series of horizontal dotted lines for writing notes, set against a background with light grey and light red geometric shapes.

NOTES

A page for taking notes. The page is divided into two main sections by a diagonal line. The top section is white and contains a series of horizontal dotted lines for writing. The bottom section is light pink and also contains a series of horizontal dotted lines for writing. A solid gray diagonal line runs from the top left to the bottom right, separating the two sections. A solid white diagonal line runs from the bottom left to the top right, intersecting the gray line.

NOTES

A series of 20 horizontal dotted lines for writing notes.



- **>99%** Implant success in Micra VR* clinical studies⁴⁻⁵
- **Low 2.7%** major complication rate through 12 months⁴
- **63%** fewer major complications than traditional pacemakers⁴

4,000+

Micra VR patients studied in global clinical trials⁴⁻⁶

93%

smaller than conventional pacemakers³

MICRA CLINICAL EVIDENCE

Micra VR IDE and Post-approval Registry

- High implant success rate (99.1%)
- Low major complication rate through 12 months (2.7%)
 - Low dislodgement rate (0.06%)
 - Low procedure-related infection rate (0.17%)
- 63% fewer major complications than traditional pacemakers⁴

Micra AV Algorithm Performance

MARVEL 2 Trial (n = 75)⁸

A multicenter, pivotal IDE study in which the algorithm was downloaded into existing Micra VR devices in order to provide AV synchronous pacing. The results showed the following:

- 94.3% median AV synchrony at rest in complete AV block patients with normal sinus rhythm (n = 40)
- 89.2% mean AV synchrony increased from 26.8% during VVI pacing to 89.2%
- 95% of patients (38 of 40) with complete AV block and normal sinus rhythm had $\geq 70\%$ AV synchrony
- 8.8% improvement in stroke volume as measured by LVOT VTI (n = 39)

BENEFITS OF MICRA

Redefined Patient Experience⁷

- No chest scar
- No bump
- No visible or physical reminder of a pacemaker under the skin
- Fewer post-implant activity restrictions

Eliminated Pocket-related Complications⁷

- Infection
- Hematoma
- Erosion

Eliminated Lead-related Complications⁷

- Fractures
- Insulation breaches
- Venous thrombosis and obstruction
- Tricuspid regurgitation



MAPPING WITHOUT COMPROMISE

ENSITE™ X EP SYSTEM WITH
ENSITE™ OMNIPOLAR TECHNOLOGY (OT)

