

REAL-LIFE EXPERIENCE WITH VERNAKALANT

What is the right patient for this drug



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DISCLOSURES

Juha Hartikainen

Congress representative of KUH (sponsorer by industry)

Biosense Webster, Medtronic, St Jude Medical, Boehringer Ingelheim, MSD,
Biosense Webster, St. Jude Medical,

Investigator in studies sponsored by industry

Astra Zeneca, Medtronic, St. Jude Medical, Biosense Webster, Boehringer
Ingelheim,

Speaker in symposium sponsored by industry

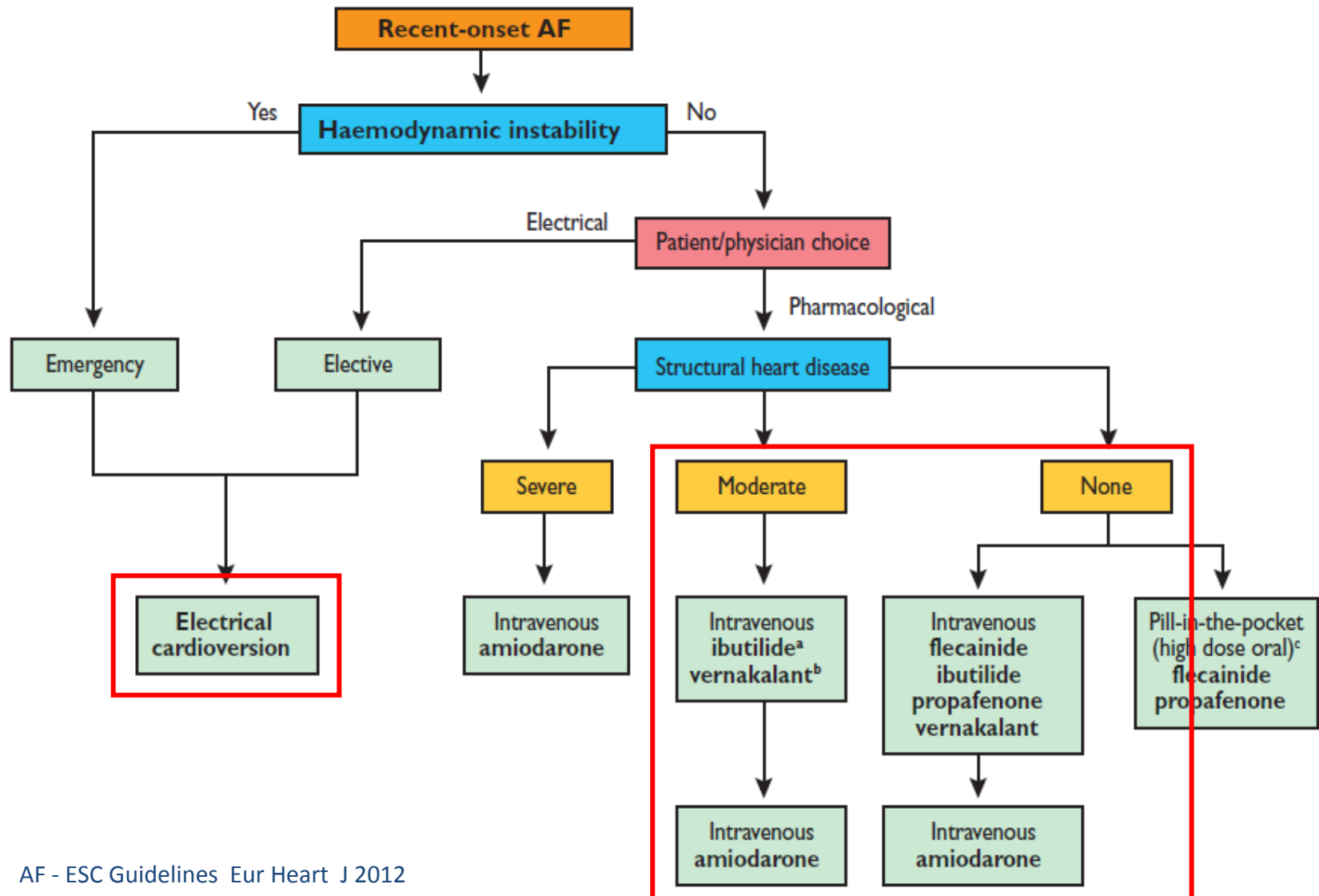
Cardiome AG, MSD, Astra Zeneca

Advisory board member

Pfizer, Lilly, MSD, Astra Zeneca, Bayer, BMS

CARDIOVERSION OF AF

DC vs DRUGS

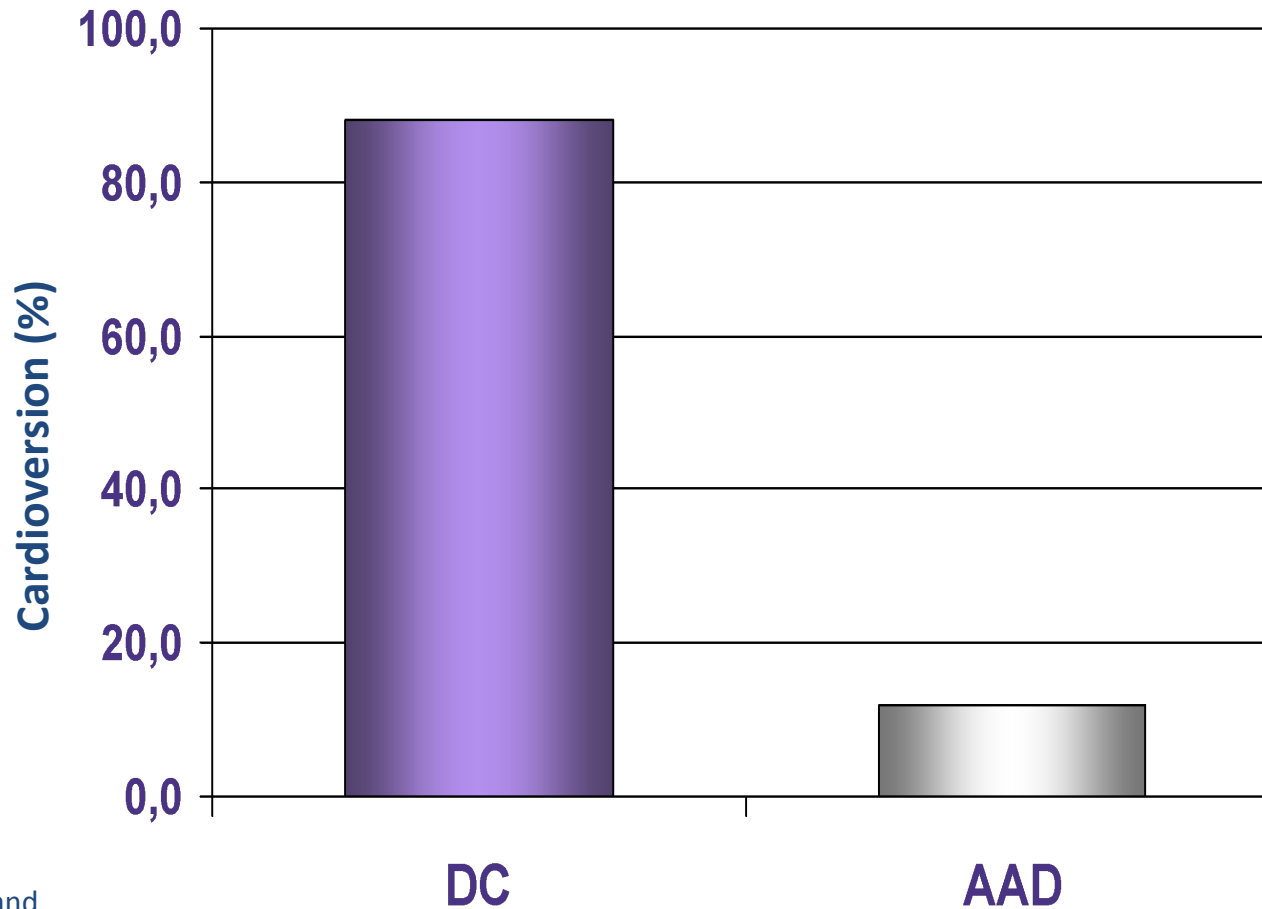


CARDIOVERSION OF ATRIAL FIBRILLATION

EMERGENCY ROOM

CARDIOVERSION OF ACUTE AF

FinFib STUDY*



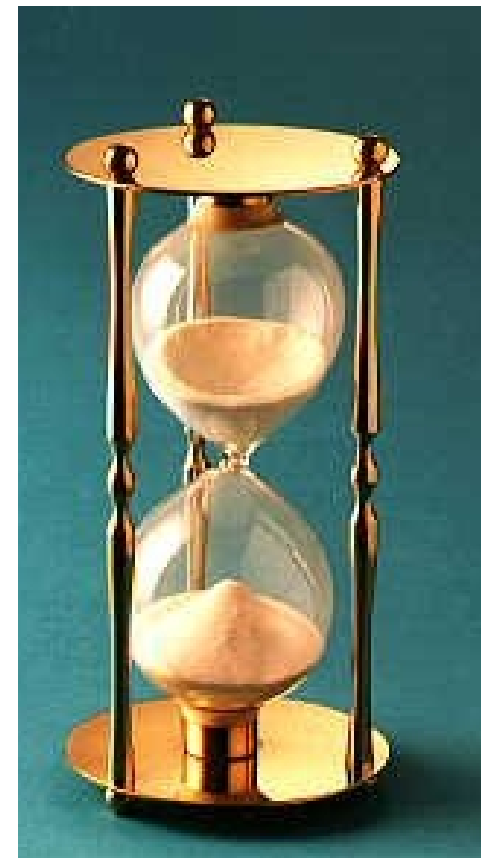
*40 centers in Finland

FinFib Lehto et al. SLL 2011

FACTS TO CONSIDER

TIME TO CARDIOVERSION

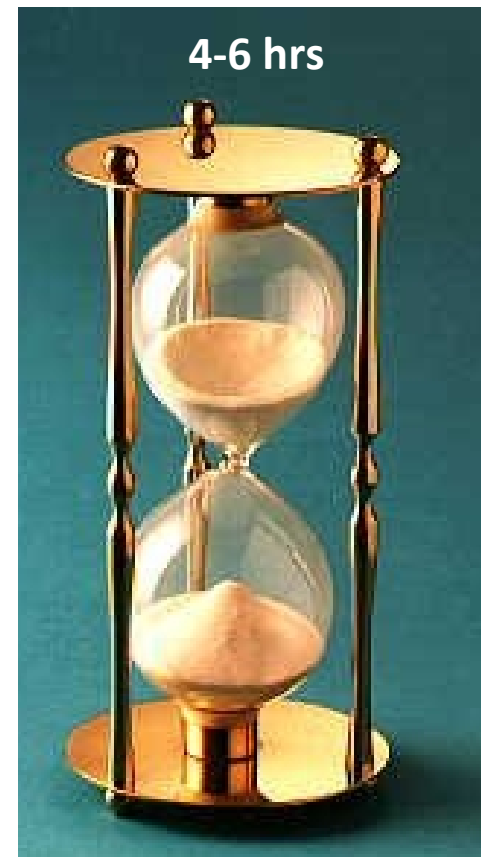
ACCESS TO ANESTHESIA / TIME TO GET ANAESTHESIA



FACTS TO CONSIDER

TIME TO CARDIOVERSION

MEAL

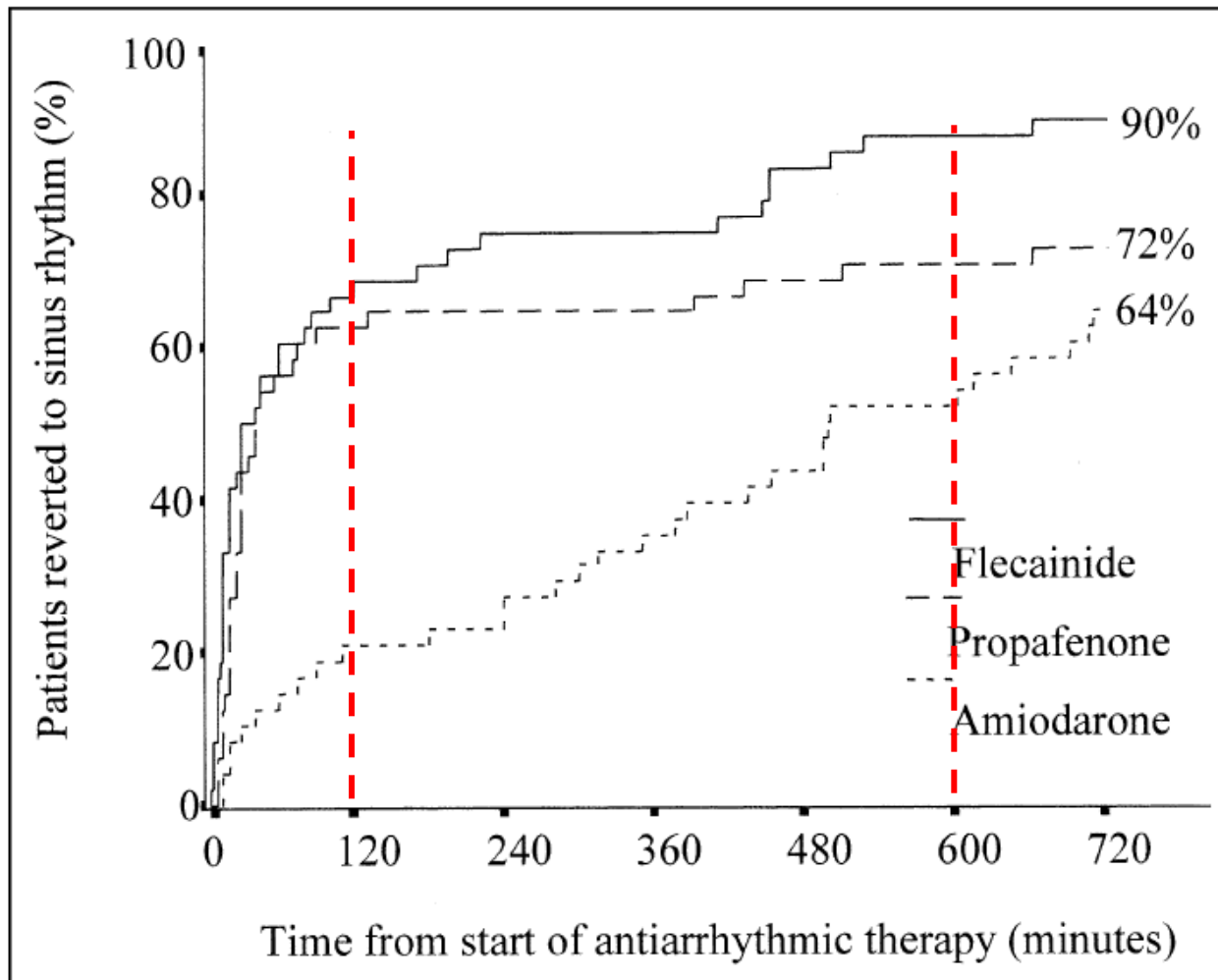


FACTS TO CONSIDER PATIENT's WILL

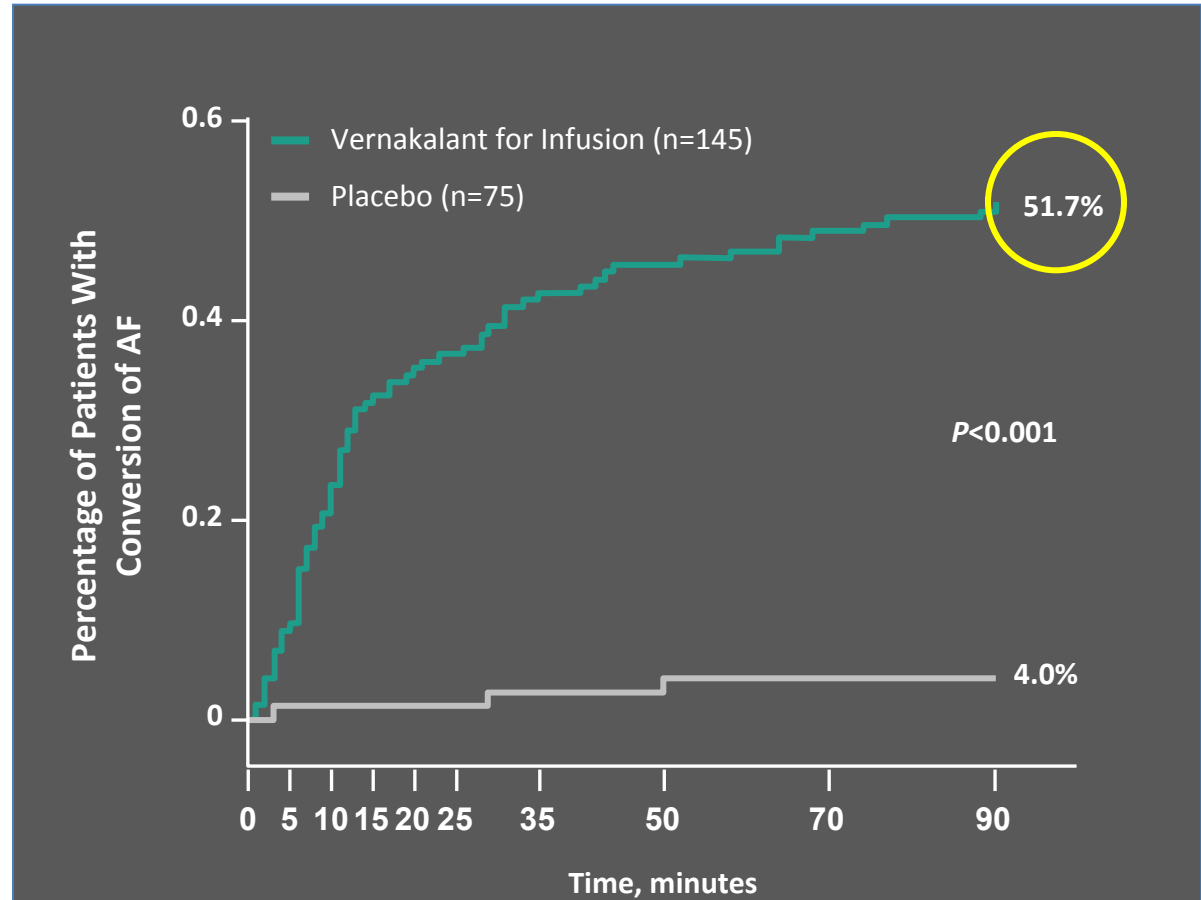


CARDIOVERSION WITH ANTIARRHYTHMIC DRUGS

ANTIARRHYTHMIC DRUGS IN AF CARDIOVERSION



VERNAKALANT IN AF* CARDIOVERSION

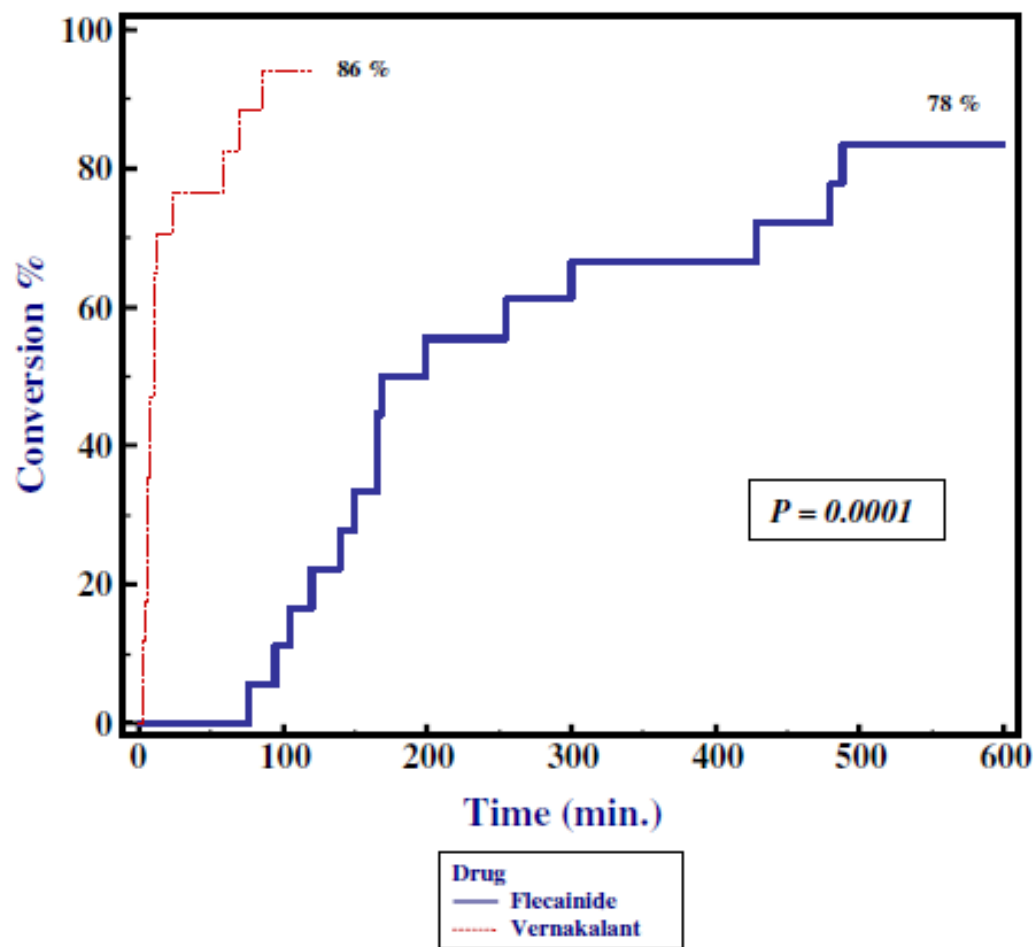


* Short-duration AF (3 hours to 7 days)

1. Roy D et al. ACT I *Circulation*.
2008

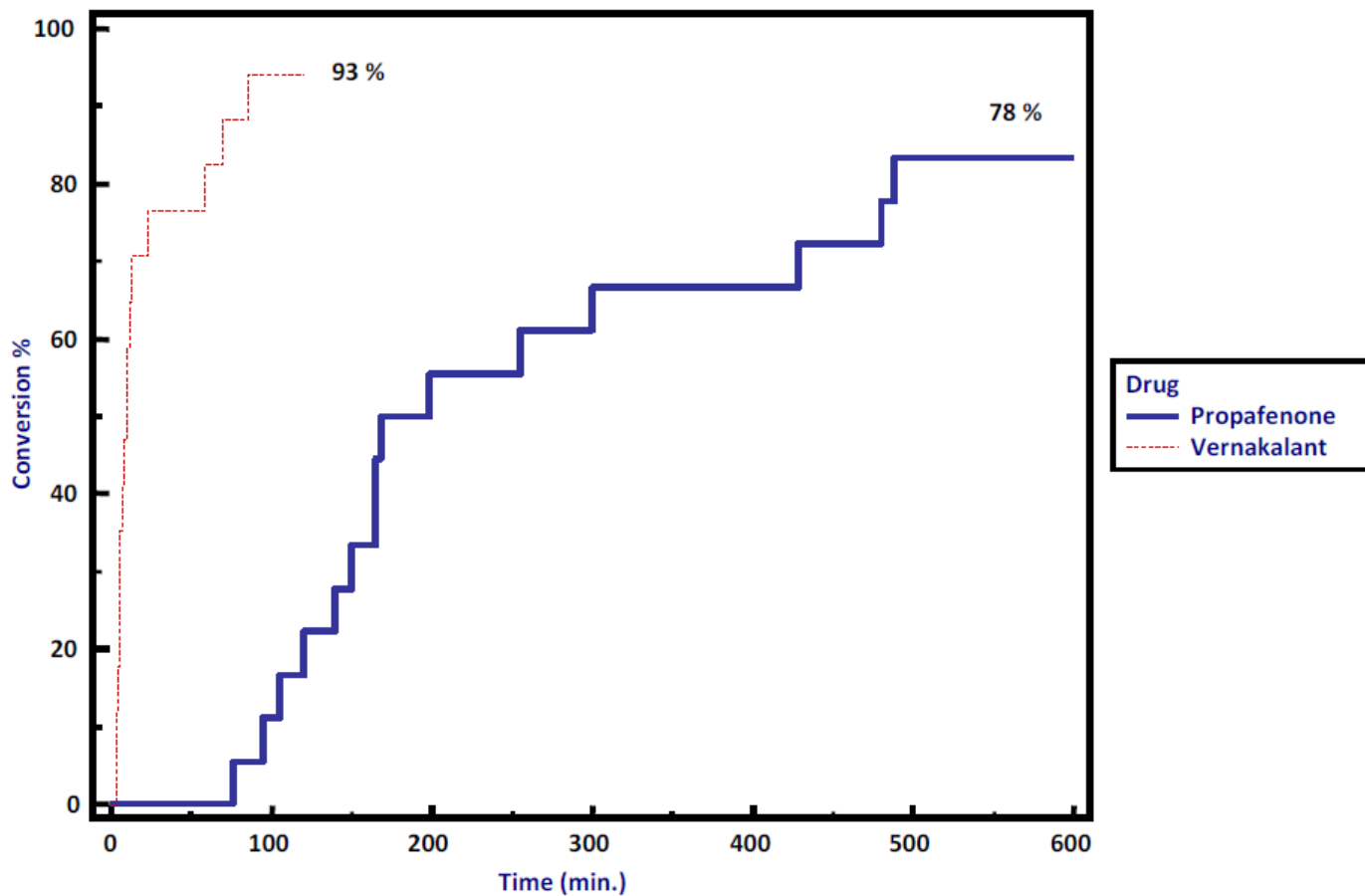
VERNAKALANT vs OTHER AAD's

VERNAKALANT (iv) vs FLECAINIDE (po)



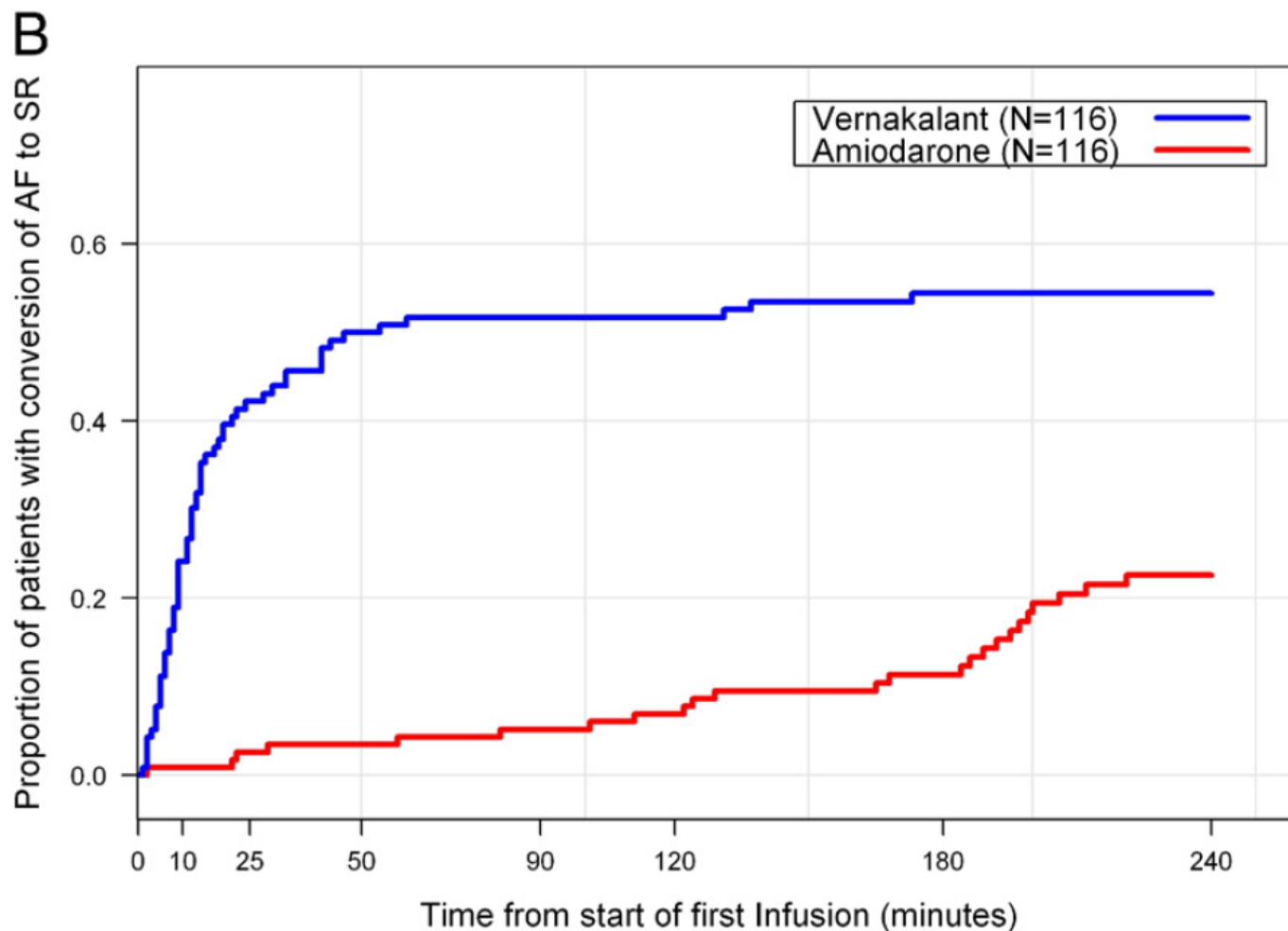
VERNAKALANT vs OTHER AAD's

VERNAKALANT (iv) vs PROPAFENONE (po)



VERNAKALANT vs OTHER AAD's

AMIODARONE (iv) vs VERNAKALANT (iv)



ANTIARRHYTHMIC DRUGS FOR AF CARDIOVERSION

Amiodarone

Slow

Suitable for pts with heart disease

Flecainide

Rapid

Not for pts with heart disease

Propafenone

Rapid

Not for pts with heart disease

Vernakalant

Very rapid

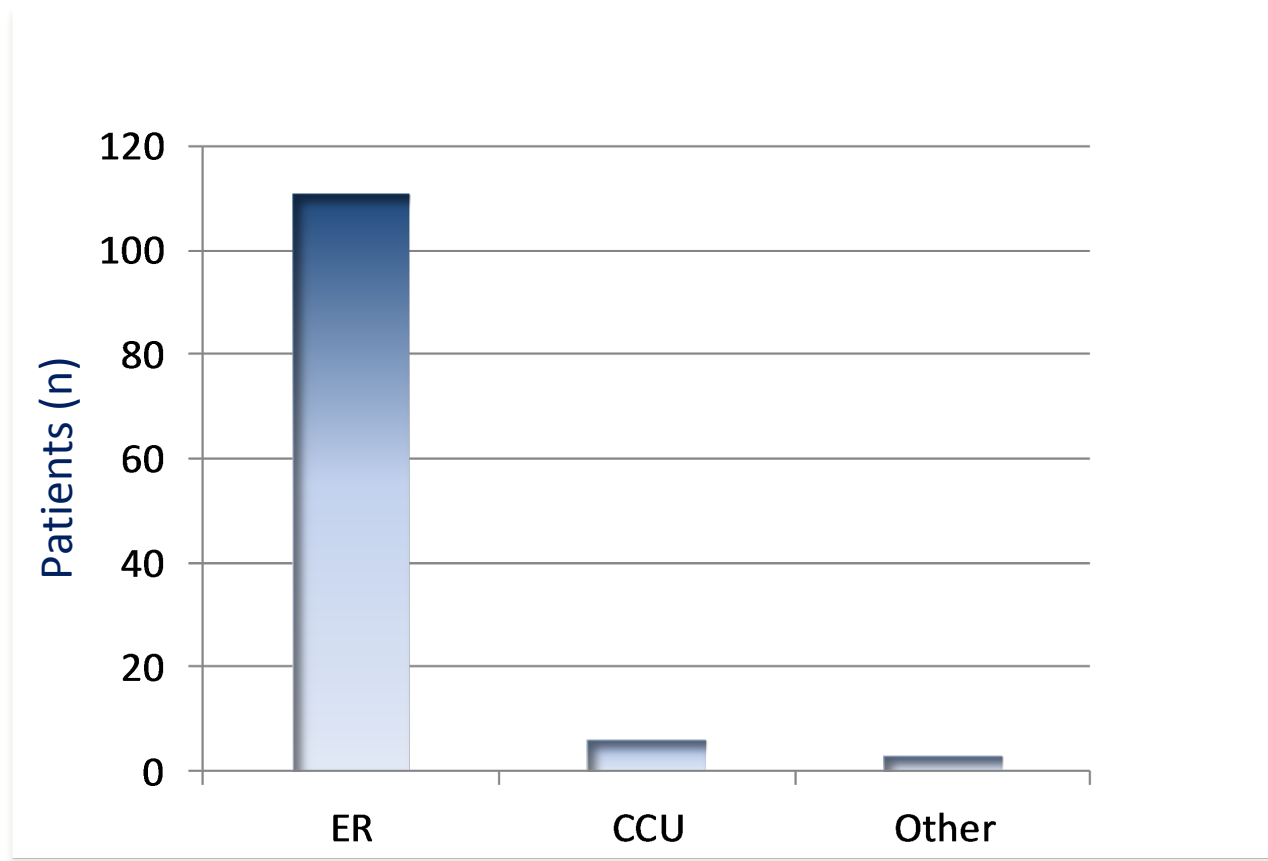
Suitable for pts with mild/moderate

heart disease

VERNAKALANT IN ACUTE AF

ER, CCU, GENERAL WARD

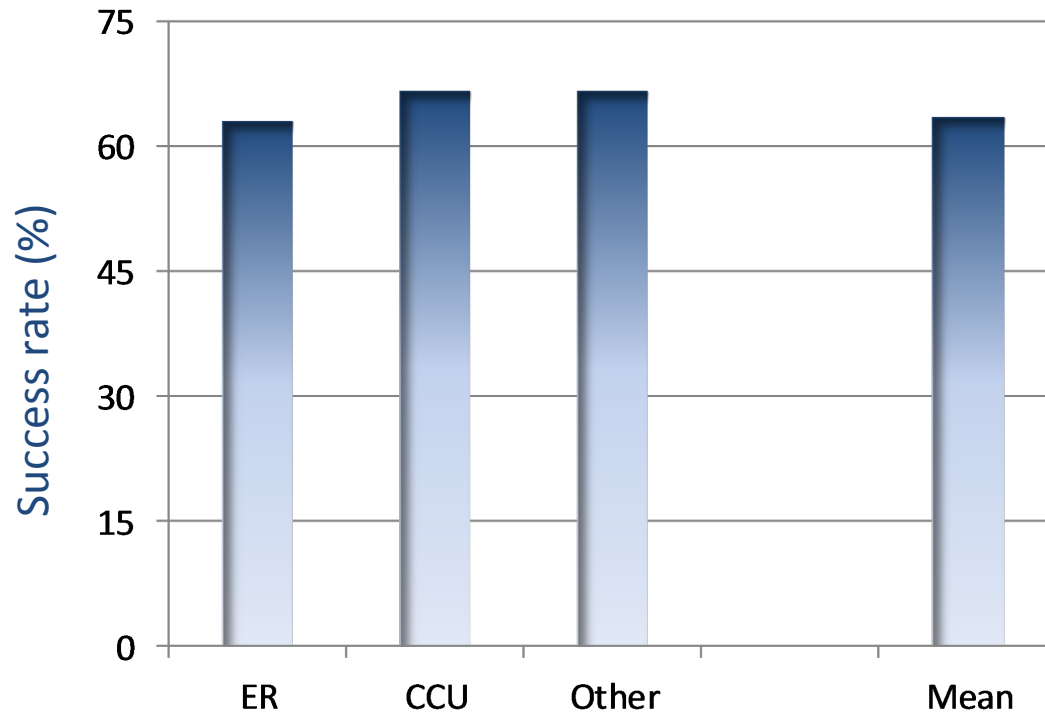
KUH 2011-2013



VERNAKALANT IN ACUTE AF

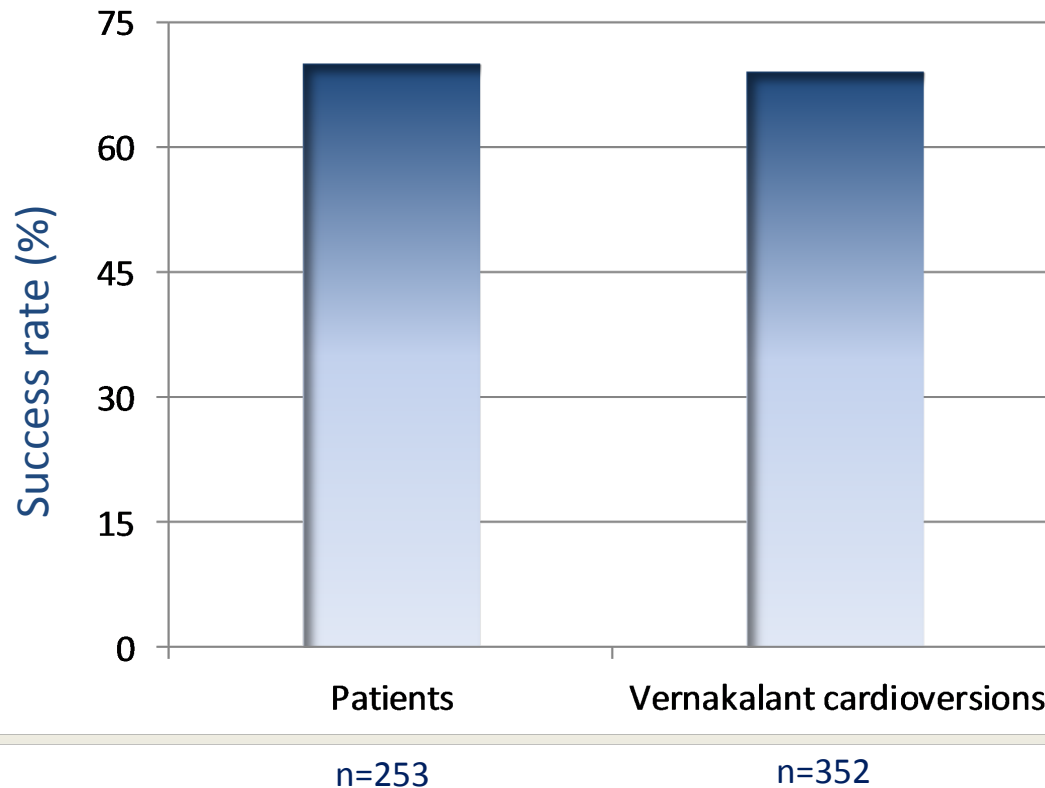
ER, CCU, GENERAL WARD

KUH 2011-2013



VERNAKALANT IN ACUTE AF

ER SUCCESS RATE MALMÖ DATA

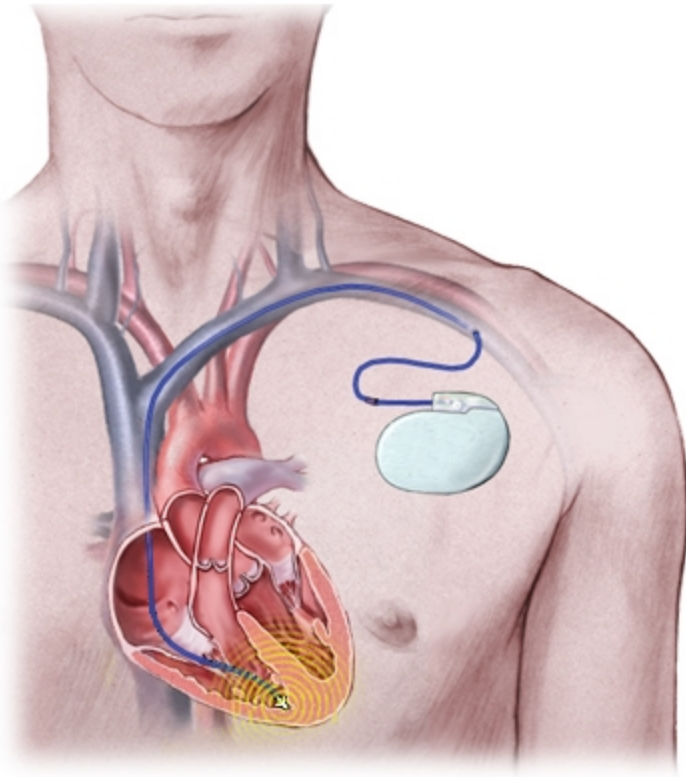


CARDIOVERSION OF ATRIAL FIBRILLATION PACEMAKER PATIENTS

FACTS TO CONSIDER

PACEMAKER PATIENTS

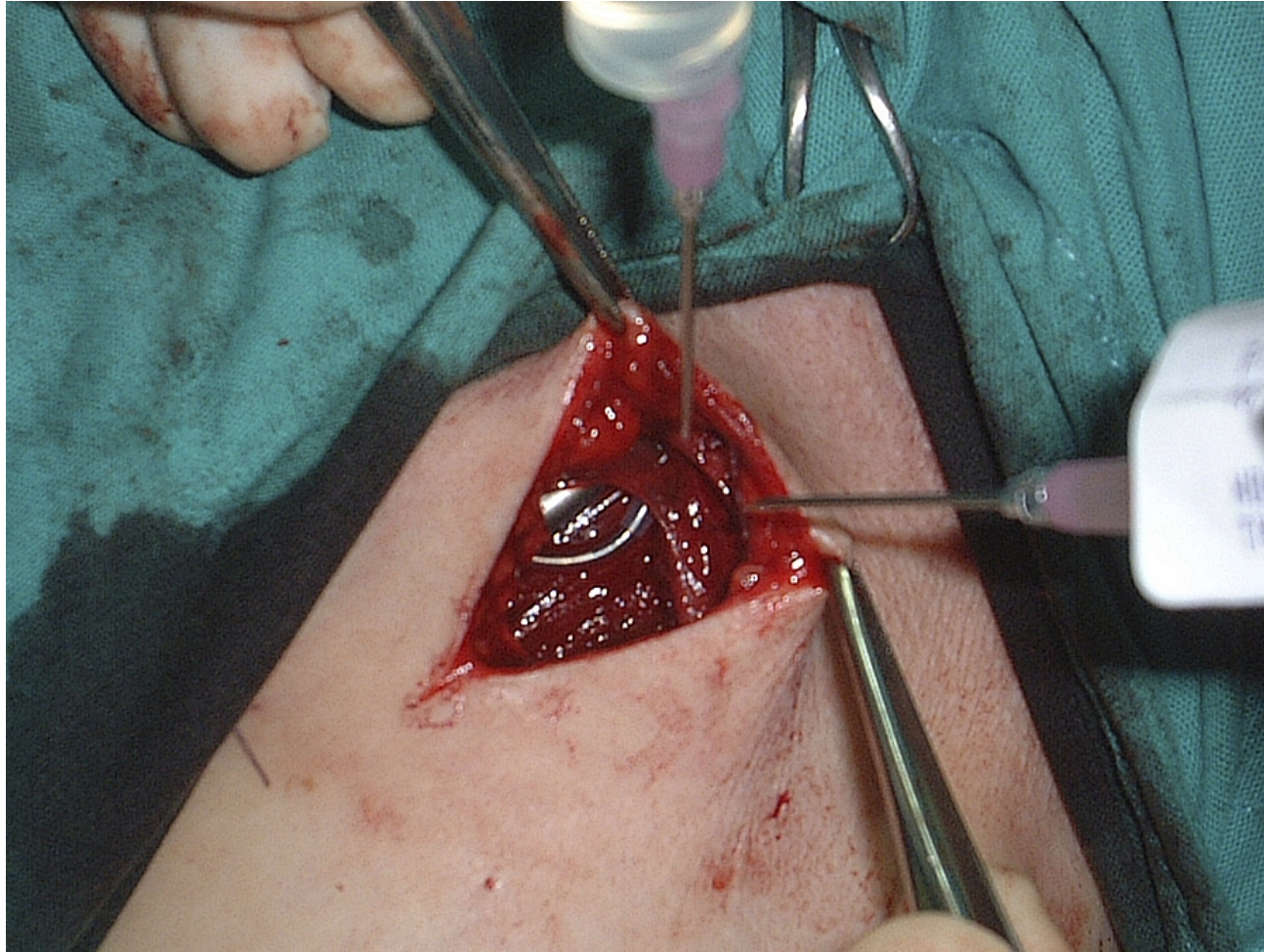
PM INTERROGATION AFTER DC



FACTS TO CONSIDER

CARDIOVERSION STRATEGY

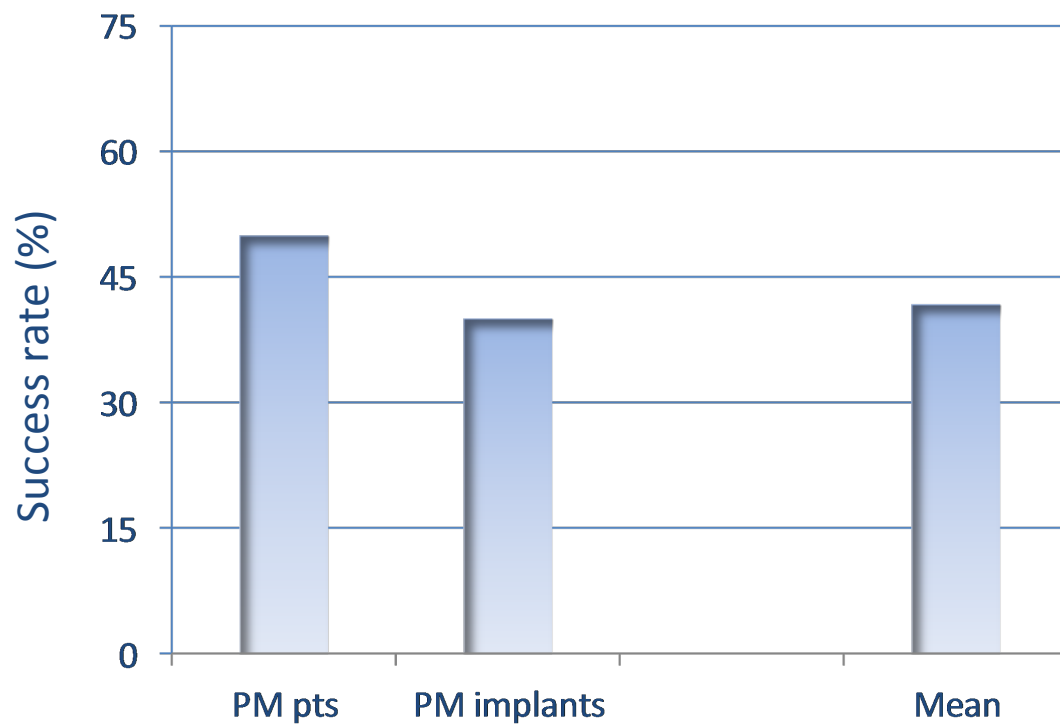
IMPLANTATION DURING CARDIOVERSION



VERNAKALANT IN ACUTE AF

PACEMAKER PATIENTS

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CARDIOVERSION OF ATRIAL FIBRILLATION

EP LABORATORY

FACTS TO CONSIDER

CARDIOVERSION STRATEGY

CARDIOVERSION WITH AAD



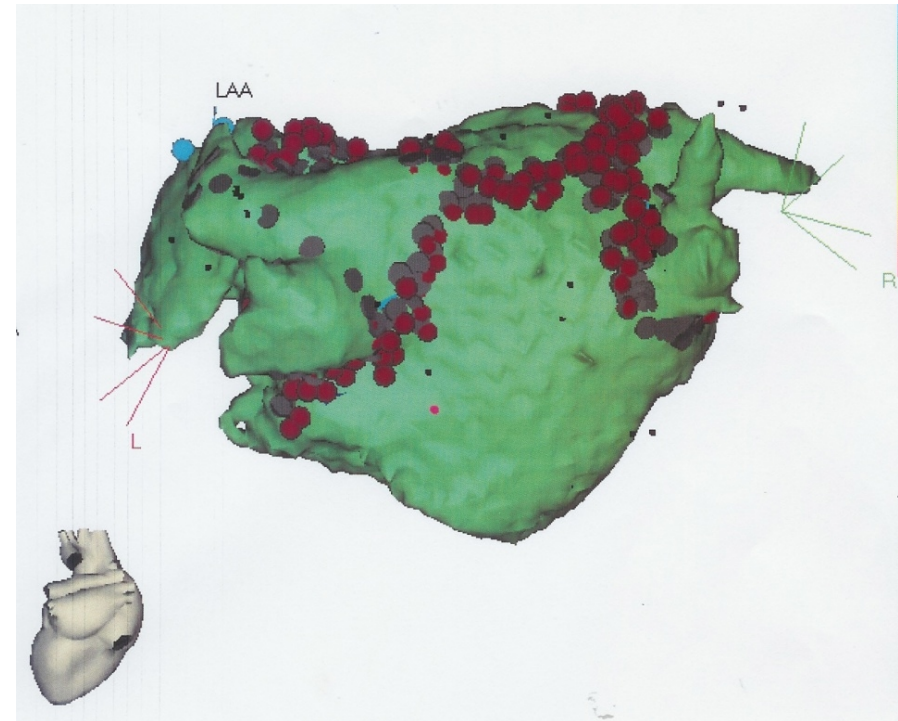
DC CARDIOVERSION



FACTS TO CONSIDER

CARDIOVERSION STRATEGY

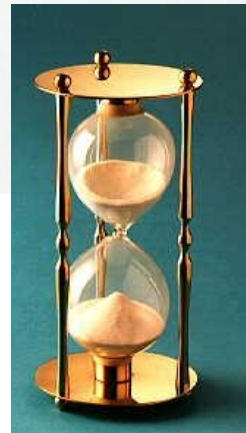
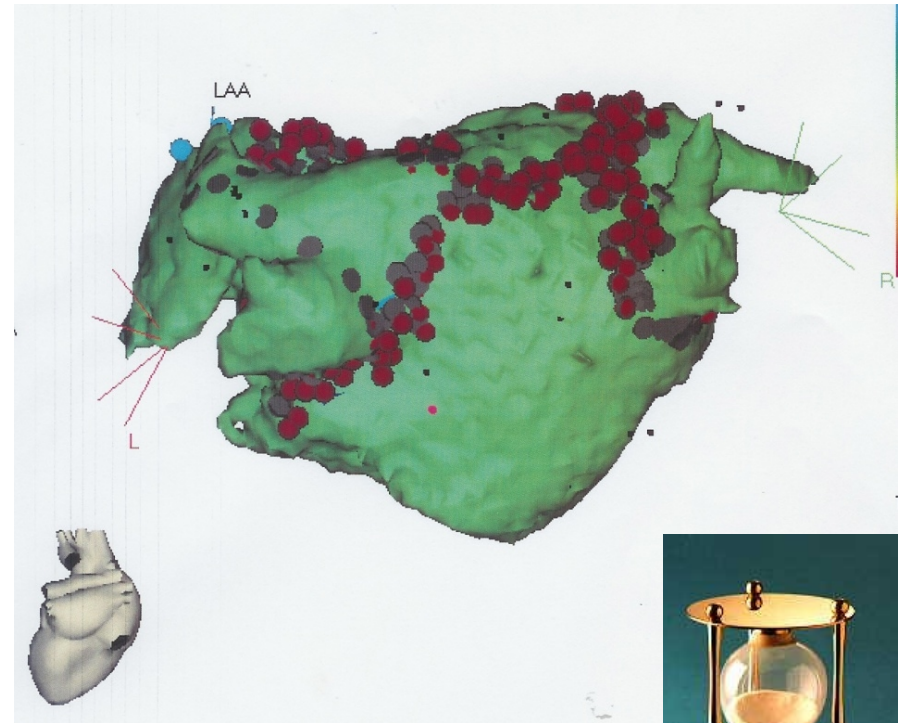
ELECTROANATOMIC MAPPING - PATIENT MOVEMENT



FACTS TO CONSIDER

CARDIOVERSION STRATEGY

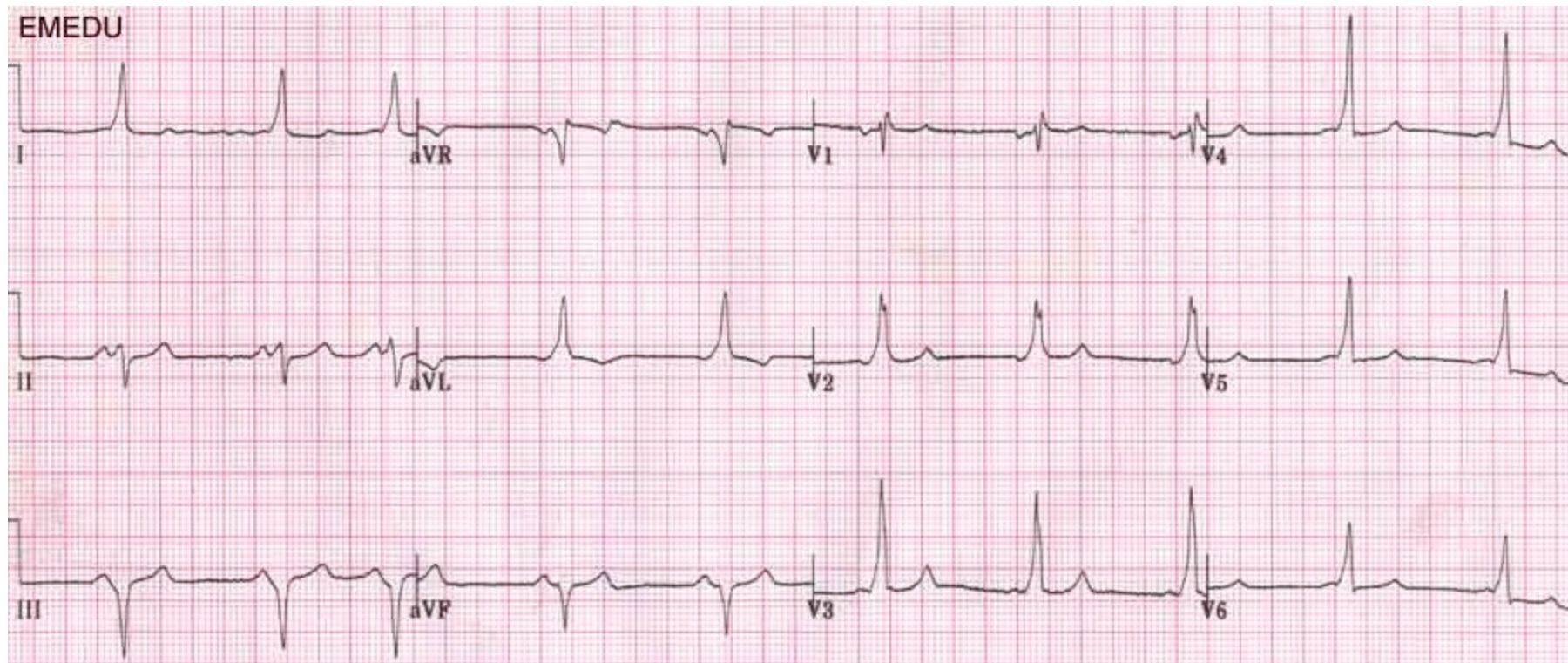
MAPPING AND ABLATION DURING CARDIOVERSION



FACTS TO CONSIDER

CARDIOVERSION STRATEGY

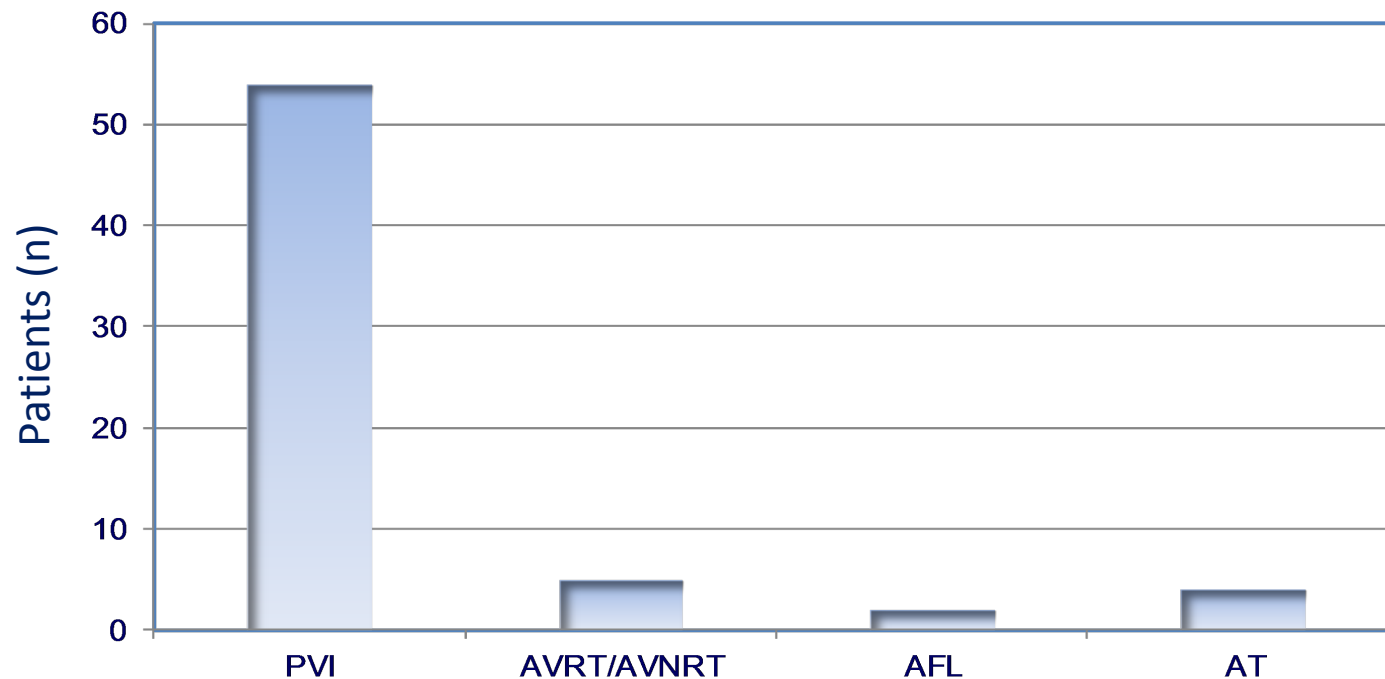
EFFECTS ON MAPPING/SUBSTRATE



VERNAKALANT USE IN ACUTE AF

EP LABORATORY

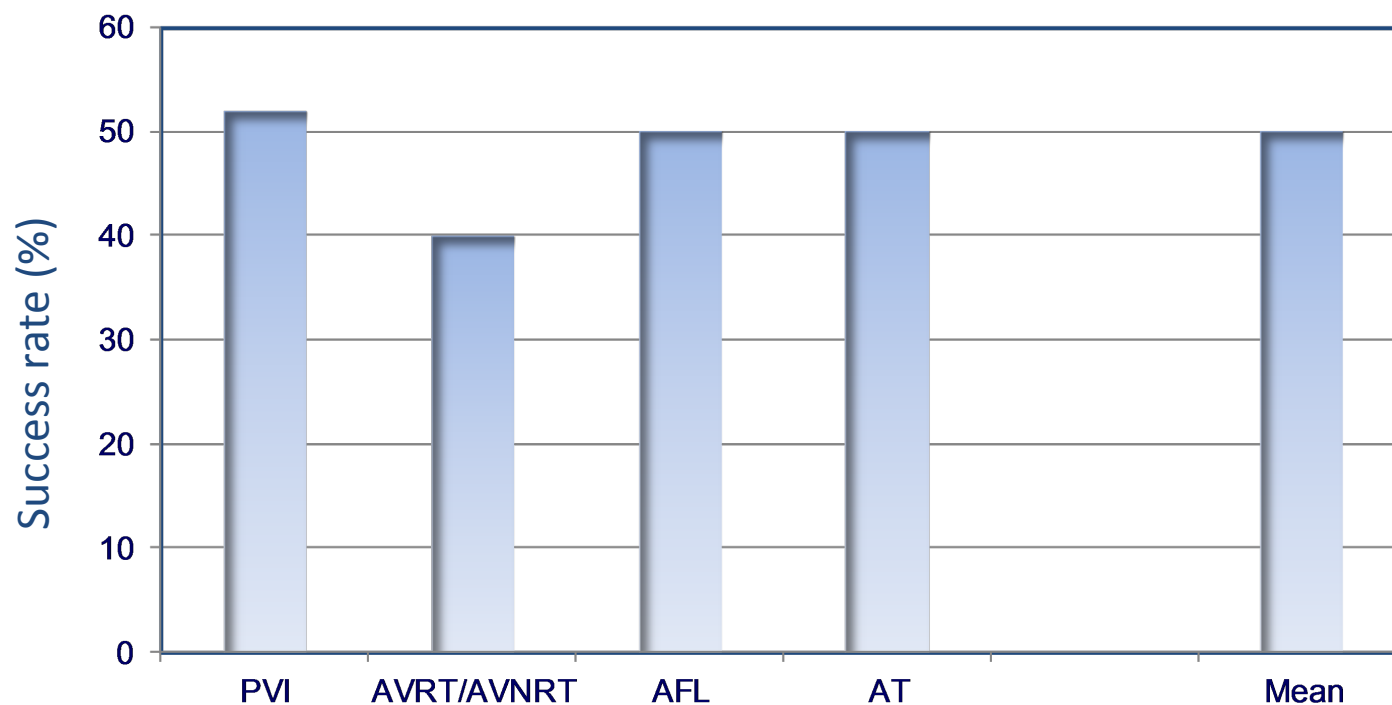
KUH 2011-2013



VERNAKALANT IN ACUTE AF

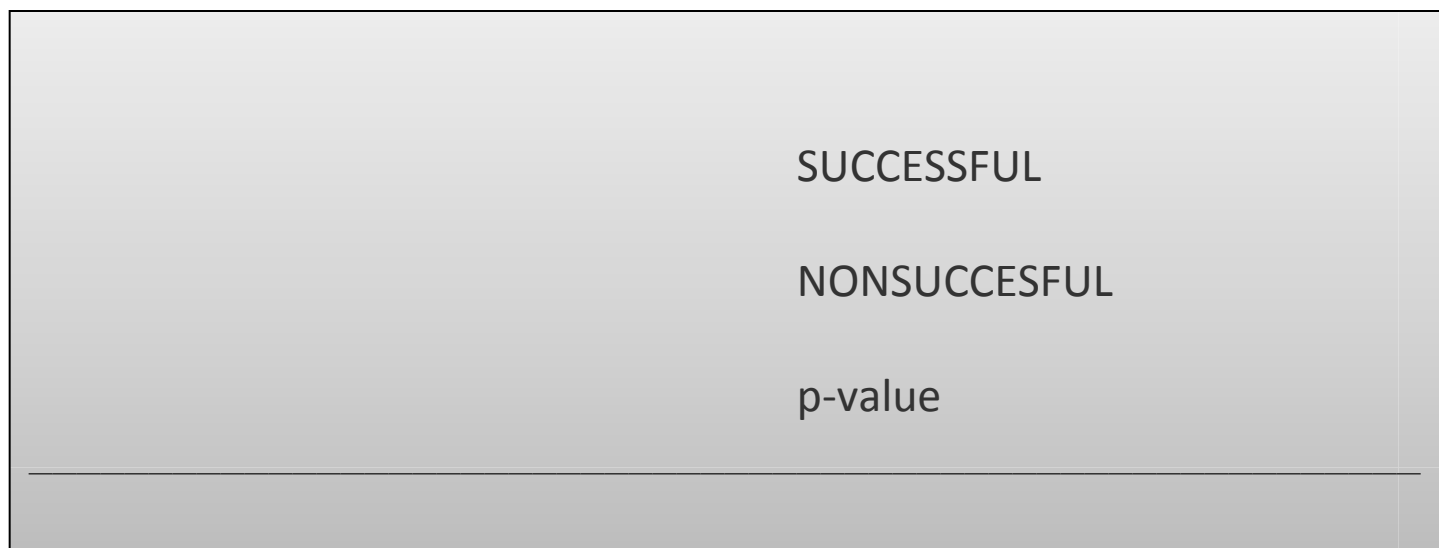
EP LABORATORY

KUH 2011-2013



VERNAKALANT IN ACUTE AF

EP LABORATORY SUCCESS RATE vs LA DIAM



LA SIZE

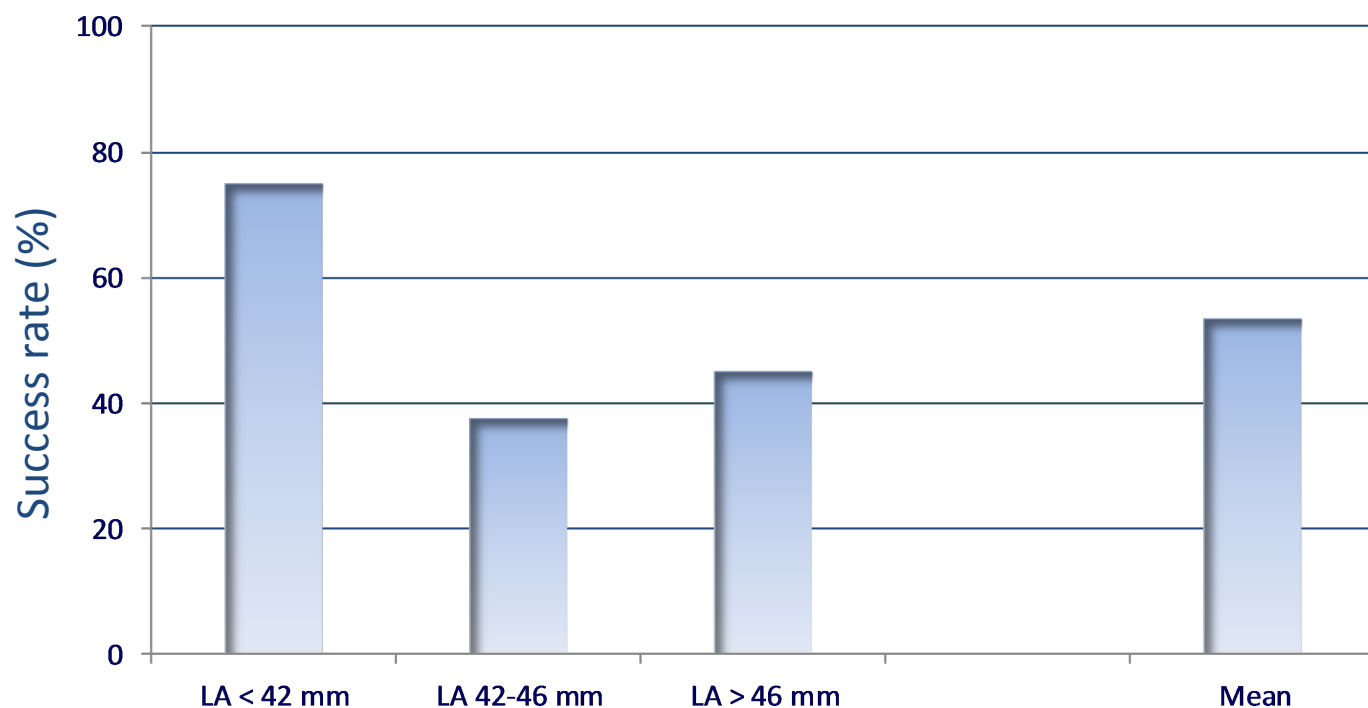
42.8 ± 5.2 mm

45.4 ± 3.7 mm

0.034

VERNAKALANT IN ACUTE AF

EP LABORATORY SUCCESS RATE vs LA DIAM



VERNAKALANT IN ACUTE AF

CONCLUSION

-EMERGENCY ROOM

- CV success RATE c. 65 -70 %**
- Can shorten the time to CV and discharge**

-PACEMAKER PATIENTS

- CV success rate c. 50 %**
- Implantation procedure can continue during CV (faster procedure)**
- No need for PM interrogation after CV (early discharge)**

-ELECTROPHYSIOLOGY LABORATORY

- CV success rate c. 50 %**
- Allows mapping and ablation during CV (faster procedure)**
- Patient movement can be avoided (more precise mapping)**
- Does not influence the "substrate" (PV-line, AVNRT, AVRT, AFL)**

A full-page background image showing a bright sun rising or setting over a layer of dark, textured clouds. The sun is positioned slightly to the right of the center, creating a strong lens flare that extends vertically across the frame. The sky above the clouds is a clear, deep blue.

THE END

jha/18.05.2011