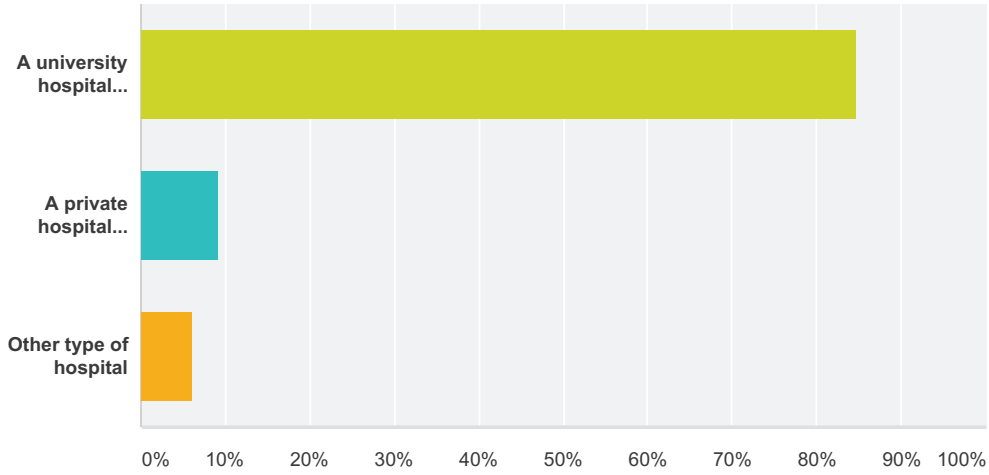
Q1 Is your institution:

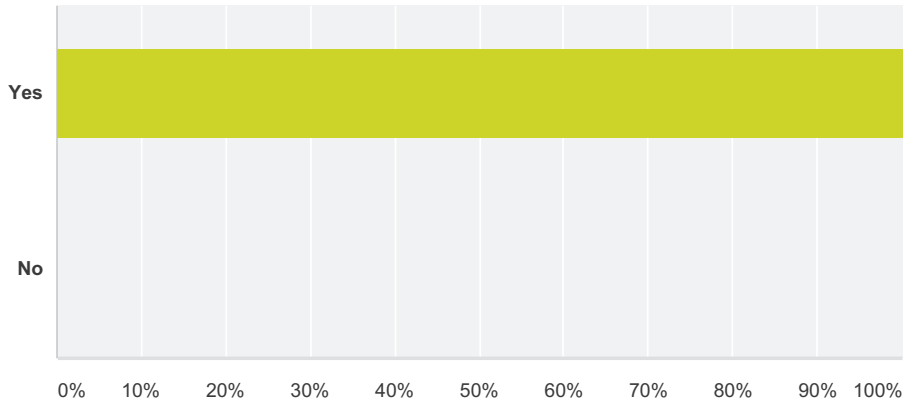
Answered: 33 Skipped: 1



Answer Choices	Responses	
A university hospital (academic)	**84.85%**	28
A private hospital (non-academic)	**9.09%**	3
Other type of hospital	**6.06%**	2
Total		**33**

Q4 Would you be comfortable if we acknowledge your centre in the Europace Journal and on the Website?

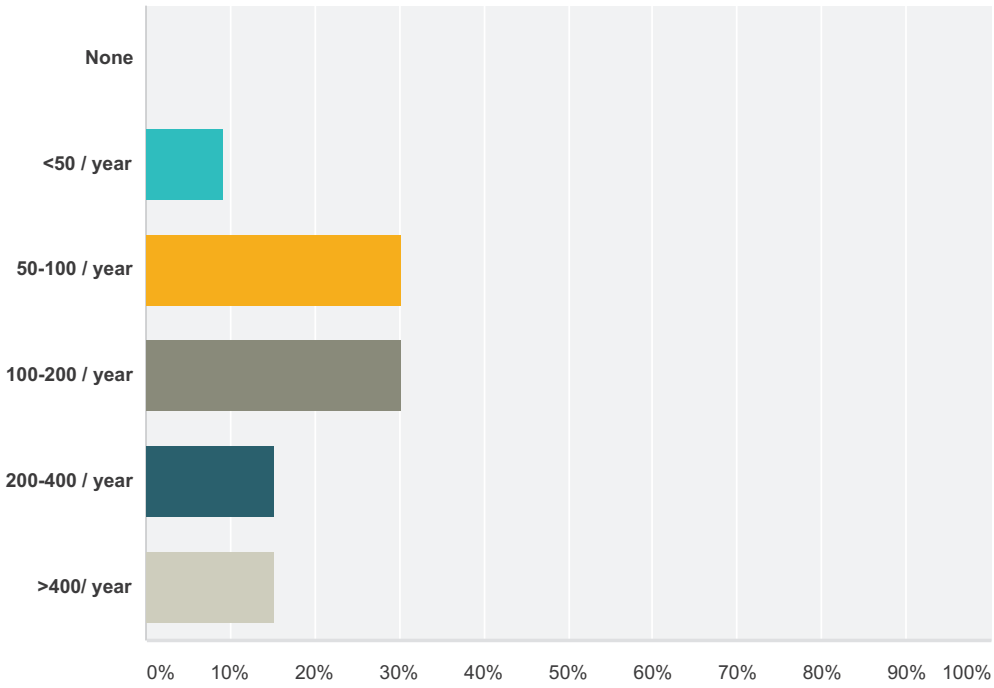
Answered: 33 Skipped: 1



Answer Choices	Responses	
Yes	**100.00%**	33
No	**0.00%**	0
Total		**33**

Q5 How many VT patients do you treat in your centre (including treatments of AADs, ICD and ablation)?

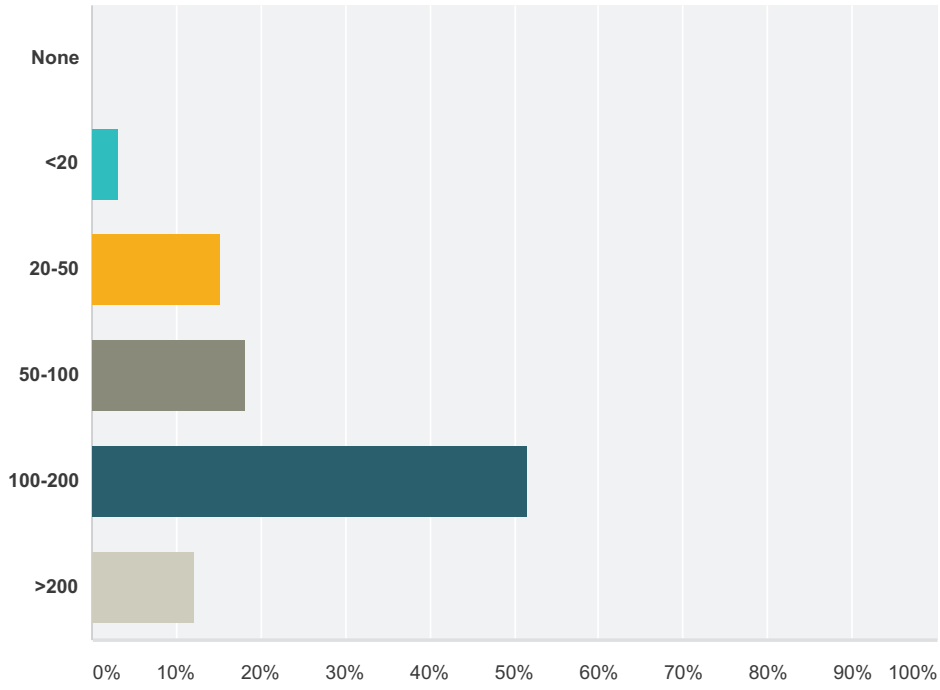
Answered: 33 Skipped: 1



Answer Choices	Responses	
None	**0.00%**	0
<50 / year	**9.09%**	3
50-100 / year	**30.30%**	10
100-200 / year	**30.30%**	10
200-400 / year	**15.15%**	5
>400/ year	**15.15%**	5
Total		**33**

Q6 How many ICD did you implant in your centre in the last calendar year?

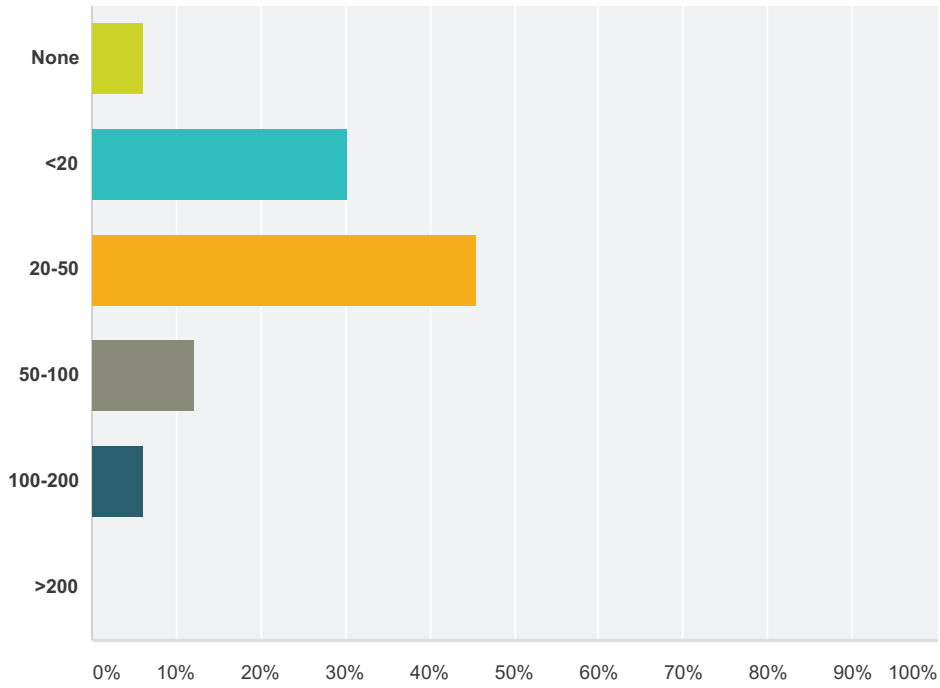
Answered: 33 Skipped: 1



Answer Choices	Responses	
None	**0.00%**	0
<20	**3.03%**	1
20-50	**15.15%**	5
50-100	**18.18%**	6
100-200	**51.52%**	17
>200	**12.12%**	4
Total		**33**

Q7 How many VT ablation procedures did you perform in your centre in the last calendar year?

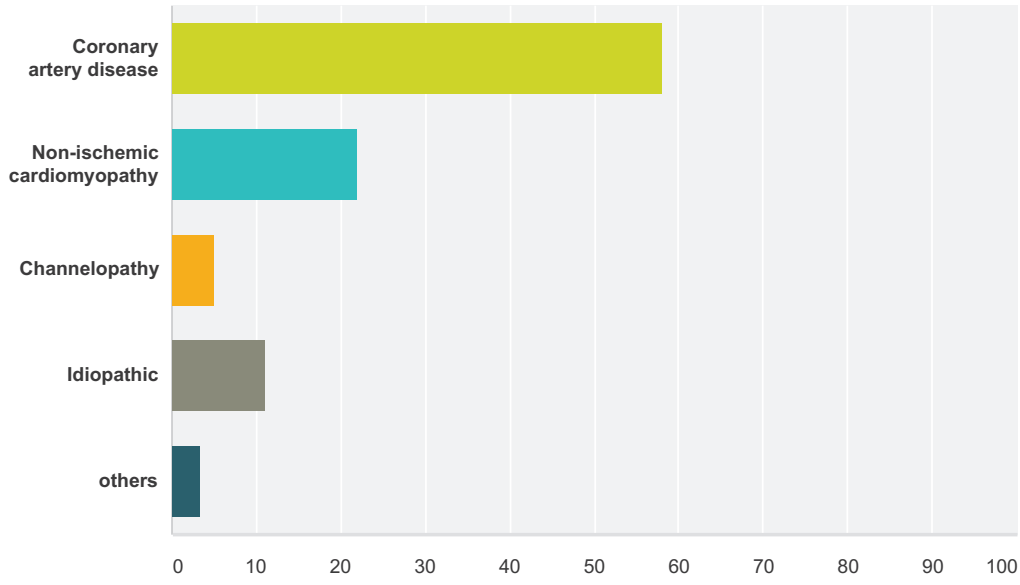
Answered: 33 Skipped: 1



Answer Choices	Responses	
None	**6.06%**	2
<20	**30.30%**	10
20-50	**45.45%**	15
50-100	**12.12%**	4
100-200	**6.06%**	2
>200	**0.00%**	0
Total		**33**

Q8 What is the distribution of etiologies of sustained VT in your centre? Please indicate percentage (total 100%).

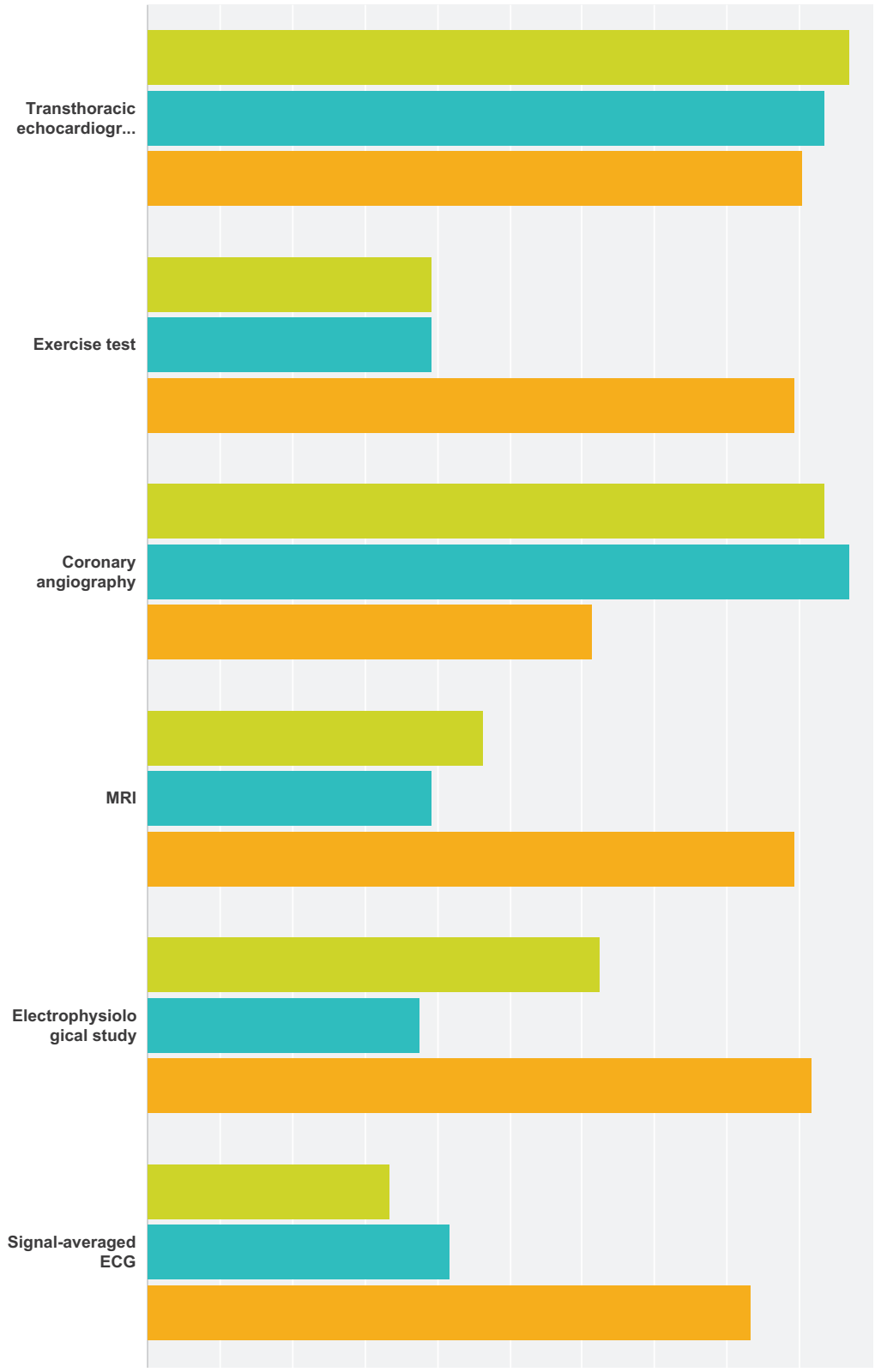
Answered: 31 Skipped: 3

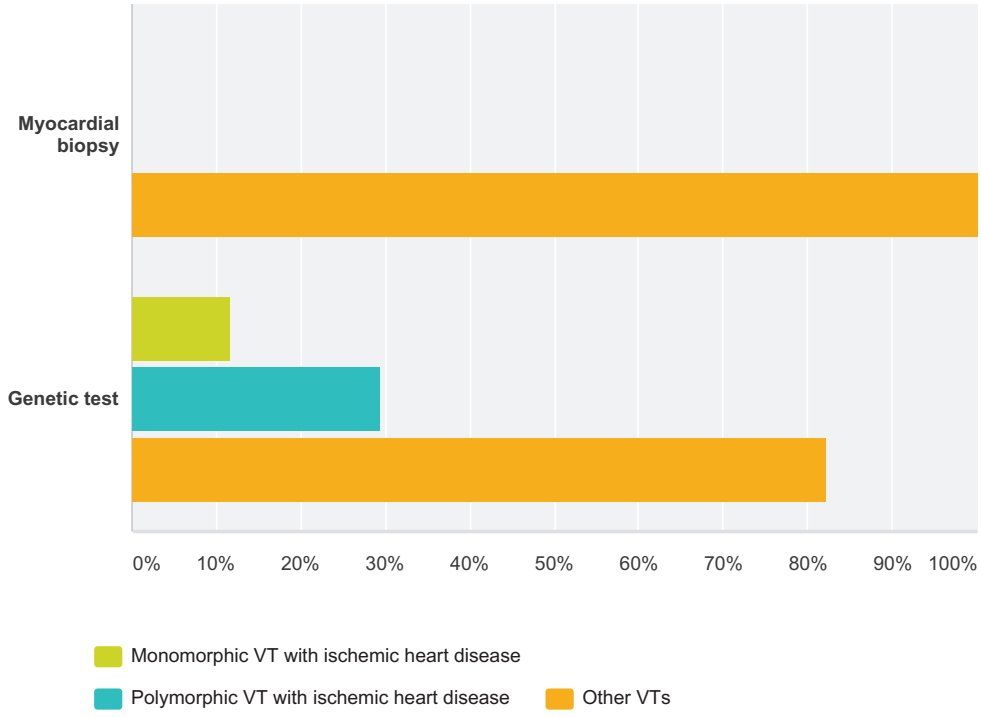


Answer Choices	Average Number	Total Number	Responses
Coronary artery disease	58	1,802	31
Non-ischemic cardiomyopathy	22	679	31
Channelopathy	5	157	31
Idiopathic	11	342	31
others	3	104	31
Total Respondents: 31			

Q9 Which examinations do you perform in different patients after the first VT episode is documented? (multiple choices allowed)

Answered: 31 Skipped: 3

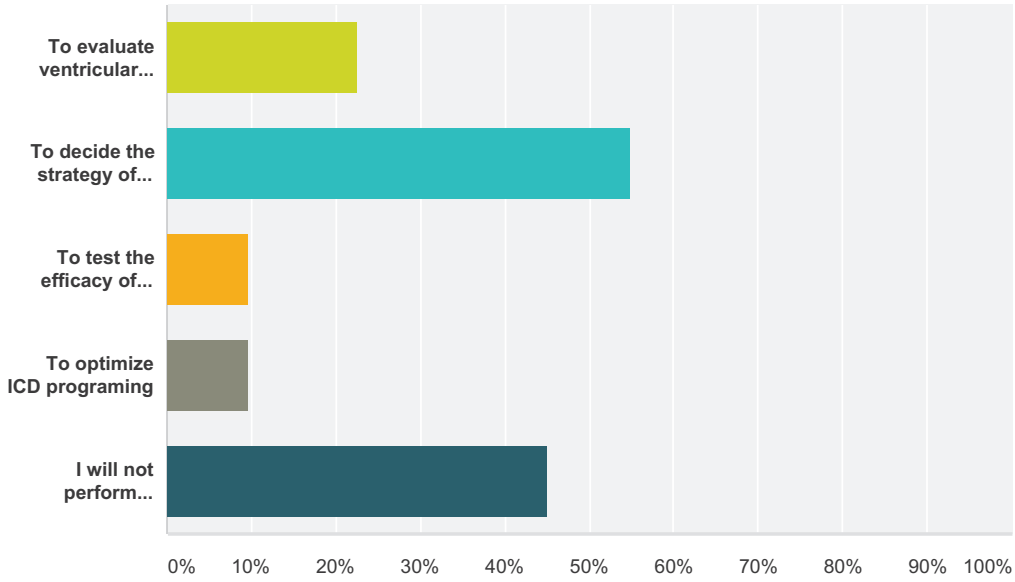




	Monomorphic VT with ischemic heart disease	Polymorphic VT with ischemic heart disease	Other VTs	Total Respondents
Transthoracic echocardiography	**96.77%** 30	**93.55%** 29	**90.32%** 28	31
Exercise test	**39.29%** 11	**39.29%** 11	**89.29%** 25	28
Coronary angiography	**93.55%** 29	**96.77%** 30	**61.29%** 19	31
MRI	**46.43%** 13	**39.29%** 11	**89.29%** 25	28
Electrophysiological study	**62.50%** 15	**37.50%** 9	**91.67%** 22	24
Signal-averaged ECG	**33.33%** 4	**41.67%** 5	**83.33%** 10	12
Myocardial biopsy	**0.00%** 0	**0.00%** 0	**100.00%** 9	9
Genetic test	**11.76%** 2	**29.41%** 5	**82.35%** 14	17

Q10 What is the purpose of invasive electrophysiological study if a clinical sustained VT is documented by ECG? (Multiple choices allowed)

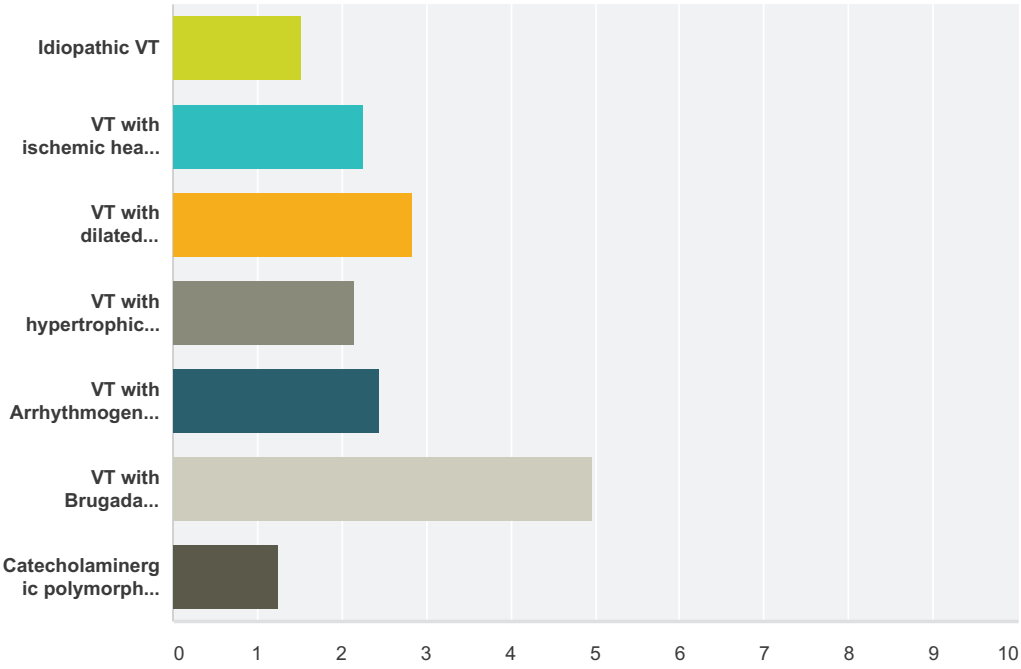
Answered: 31 Skipped: 3



Answer Choices	Responses	
To evaluate ventricular electrical instability	**22.58%**	7
To decide the strategy of treatment	**54.84%**	17
To test the efficacy of antiarrhythmic drugs	**9.68%**	3
To optimize ICD programing	**9.68%**	3
I will not perform electrophysiological study	**45.16%**	14
Total Respondents: 31		

Q11 What is the first choice of antiarrhythmic drugs to prevent recurrent hemodynamically stable VTs (ICD will be additionally implanted if there is indication)?

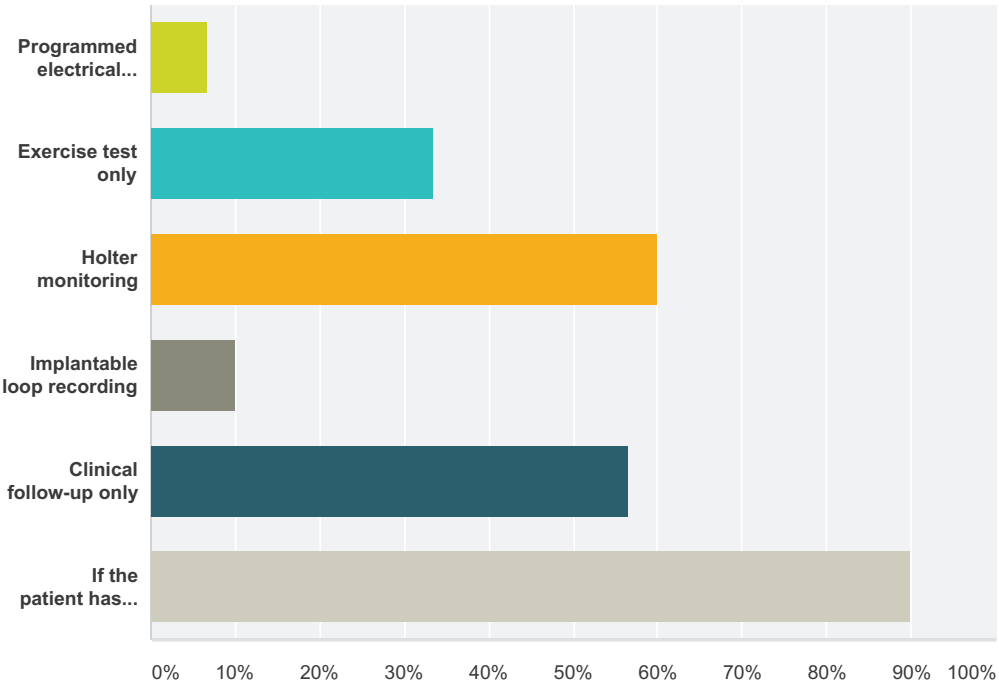
Answered: 31 Skipped: 3



	Beta-blocker	Ca-channel blocker	Flecainide	Amiodarone	Sotalol	Disopyramide	Other	None	Total	Weighted Average
Idiopathic VT	**77.42%** 24	**9.68%** 3	**9.68%** 3	**0.00%** 0	**0.00%** 0	**0.00%** 0	**0.00%** 0	**3.23%** 1	31	1.52
VT with ischemic heart disease	**58.06%** 18	**0.00%** 0	**0.00%** 0	**41.94%** 13	**0.00%** 0	**0.00%** 0	**0.00%** 0	**0.00%** 0	31	2.26
VT with dilated cardiomyopathy	**40.00%** 12	**0.00%** 0	**0.00%** 0	**56.67%** 17	**3.33%** 1	**0.00%** 0	**0.00%** 0	**0.00%** 0	30	2.83
VT with hypertrophic cardiomyopathy	**67.74%** 21	**0.00%** 0	**0.00%** 0	**25.81%** 8	**0.00%** 0	**3.23%** 1	**0.00%** 0	**3.23%** 1	31	2.16
VT with Arrhythmogenic right ventricular cardiomyopathy	**58.06%** 18	**0.00%** 0	**3.23%** 1	**16.13%** 5	**22.58%** 7	**0.00%** 0	**0.00%** 0	**0.00%** 0	31	2.45
VT with Brugada syndrome	**35.48%** 11	**0.00%** 0	**0.00%** 0	**3.23%** 1	**3.23%** 1	**3.23%** 1	**25.81%** 8	**29.03%** 9	31	4.97
Catecholaminergic polymorphic VT	**93.55%** 29	**0.00%** 0	**3.23%** 1	**0.00%** 0	**0.00%** 0	**0.00%** 0	**3.23%** 1	**0.00%** 0	31	1.26

Q12 If an antiarrhythmic drug (AAD) is prescribed to a patient due to recurrent VT, how do you test the efficacy of the drug? (multiple choice allowed)

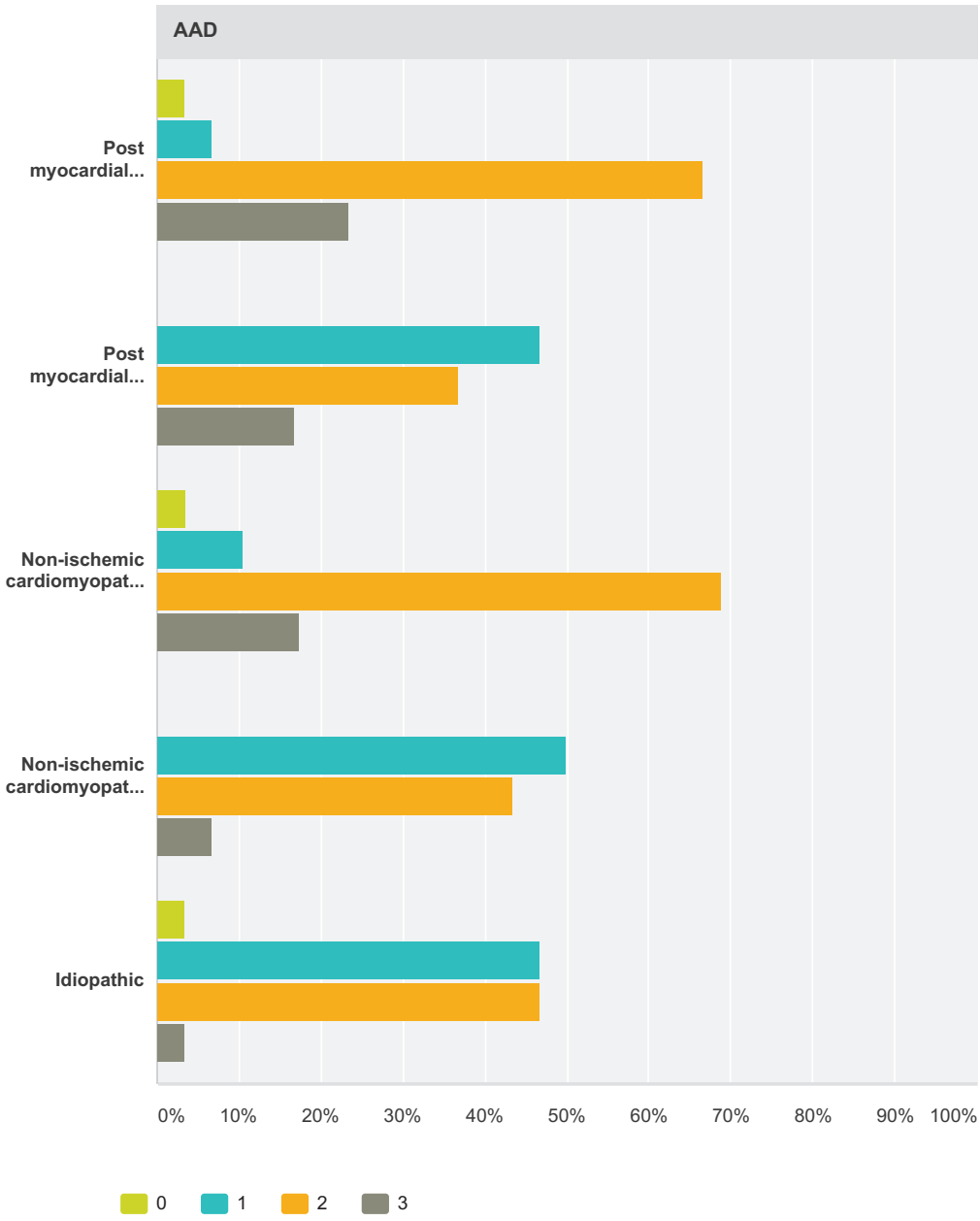
Answered: 30 Skipped: 4

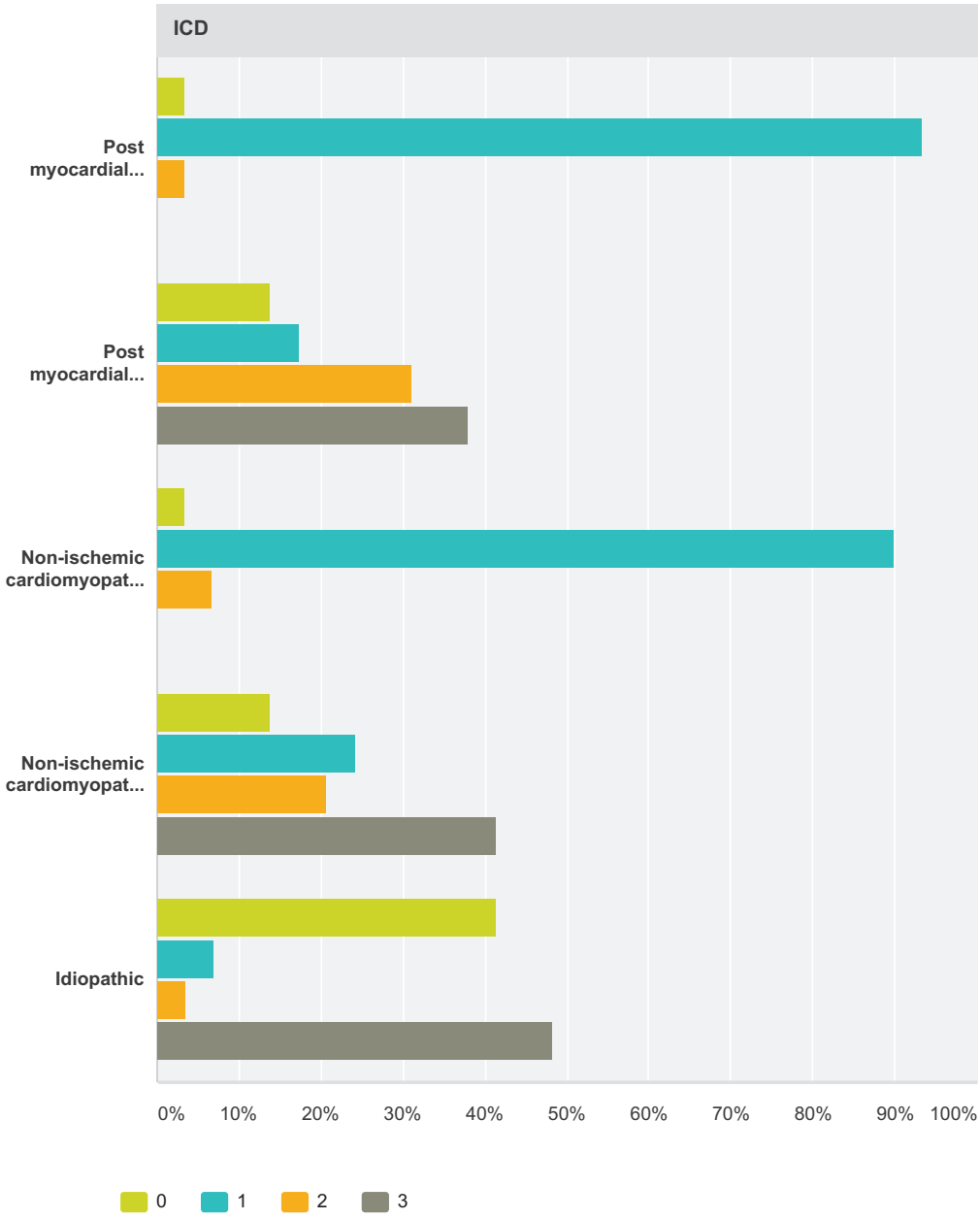


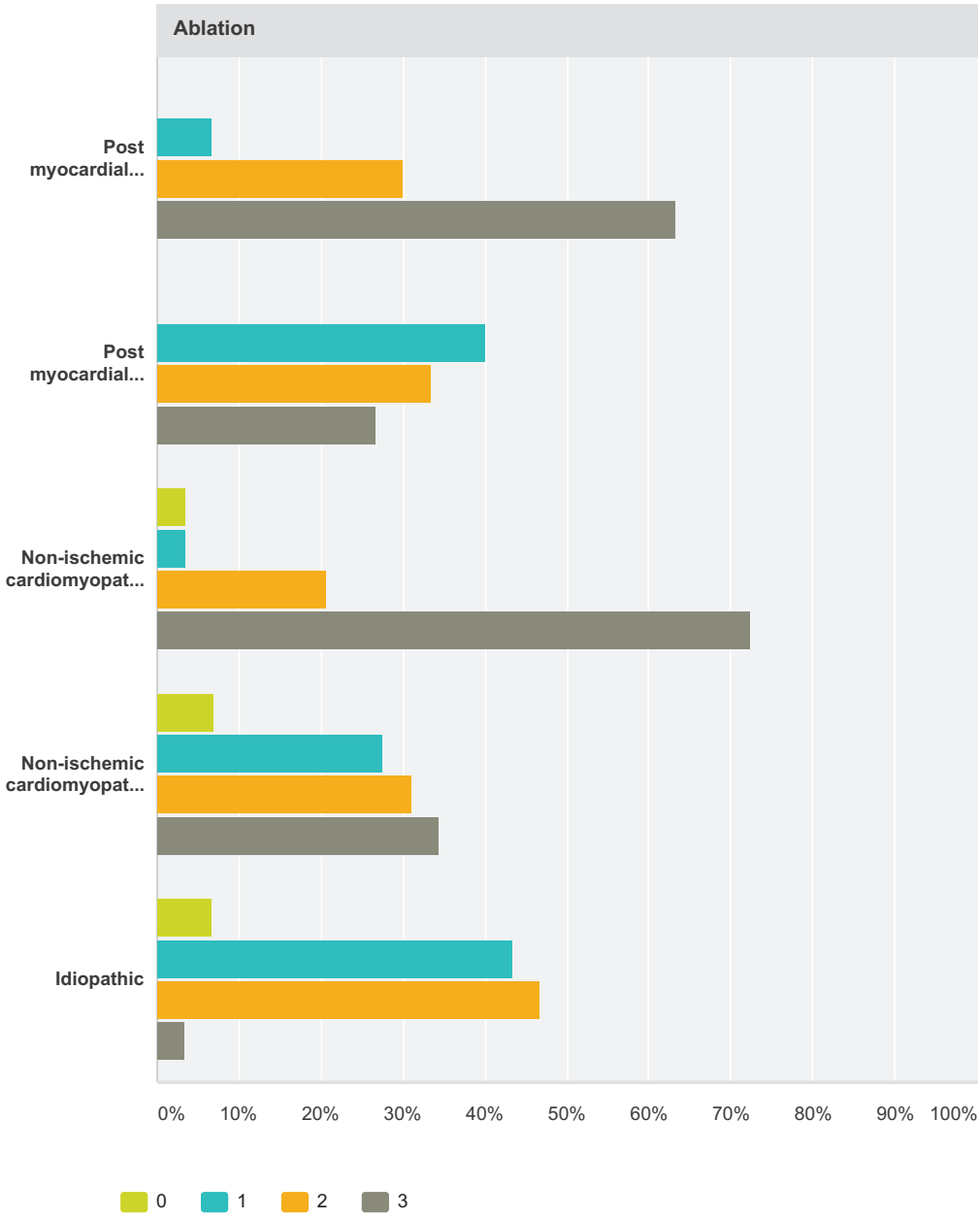
Answer Choices	Responses	
Programmed electrical stimulation	**6.67%**	2
Exercise test only	**33.33%**	10
Holter monitoring	**60.00%**	18
Implantable loop recording	**10.00%**	3
Clinical follow-up only	**56.67%**	17
If the patient has ICD, interrogate the device	**90.00%**	27
Total Respondents: 30		

Q13 Which therapeutic options do you choose for recurrent sustained monomorphic VT in different patients if hemodynamically stable? Please rank with number 1, 2 and 3 as first, second and third choice, respectively. Please choose 0 if alternative is not an option.

Answered: 30 Skipped: 4




ICD
Post myocardial...
Post myocardial...
Non-ischemic cardiomyopat...
Non-ischemic cardiomyopat...
Idiopathic
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
0
1
2
3



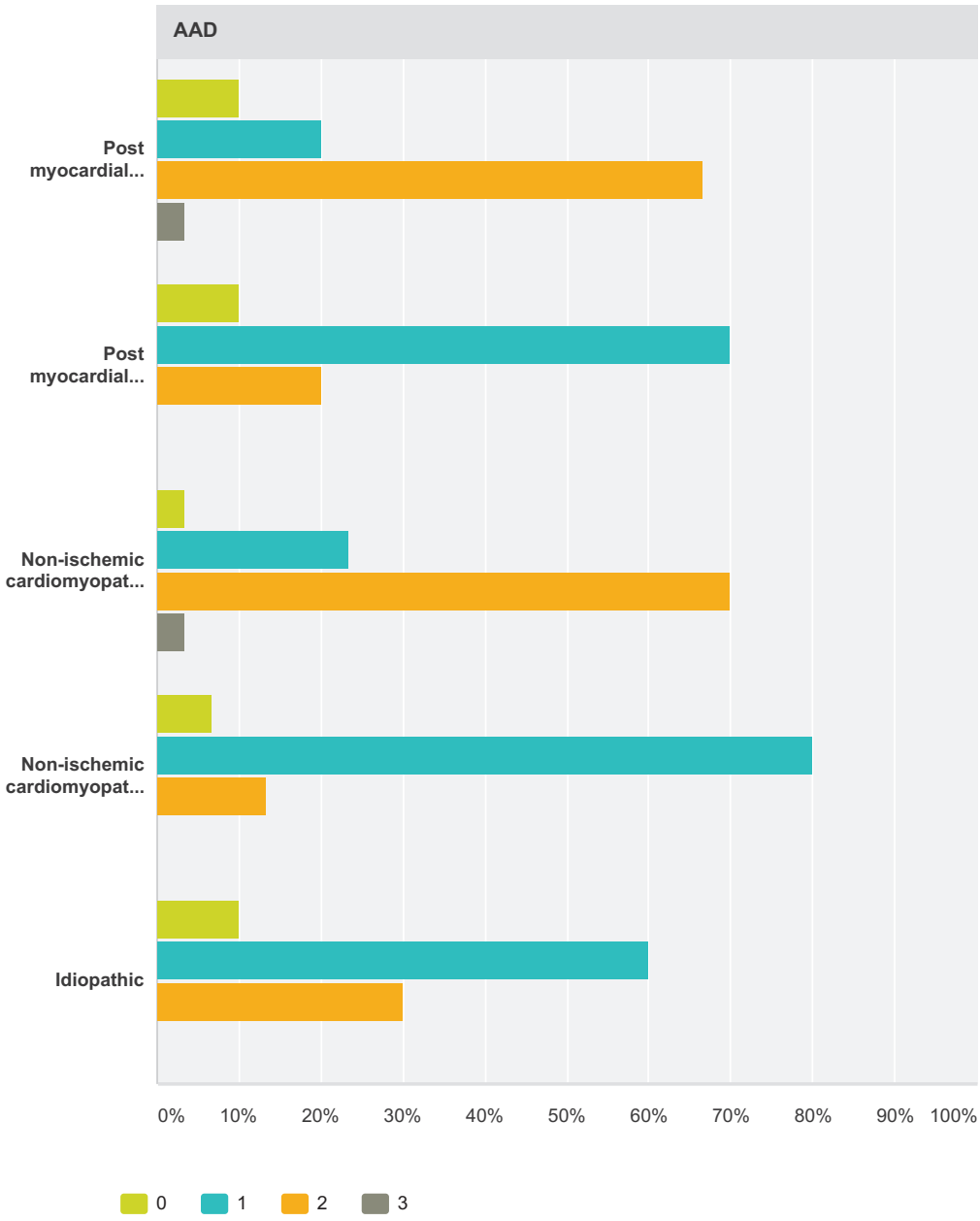
AAD					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**3.33%** 1	**6.67%** 2	**66.67%** 20	**23.33%** 7	30
Post myocardial infarction LVEF normal	**0.00%** 0	**46.67%** 14	**36.67%** 11	**16.67%** 5	30
Non-ischemic cardiomyopathy LVEF ≤35%	**3.45%** 1	**10.34%** 3	**68.97%** 20	**17.24%** 5	29
Non-ischemic cardiomyopathy LVEF normal	**0.00%** 0	**50.00%** 15	**43.33%** 13	**6.67%** 2	30
Idiopathic	**3.33%** 1	**46.67%** 14	**46.67%** 14	**3.33%** 1	30

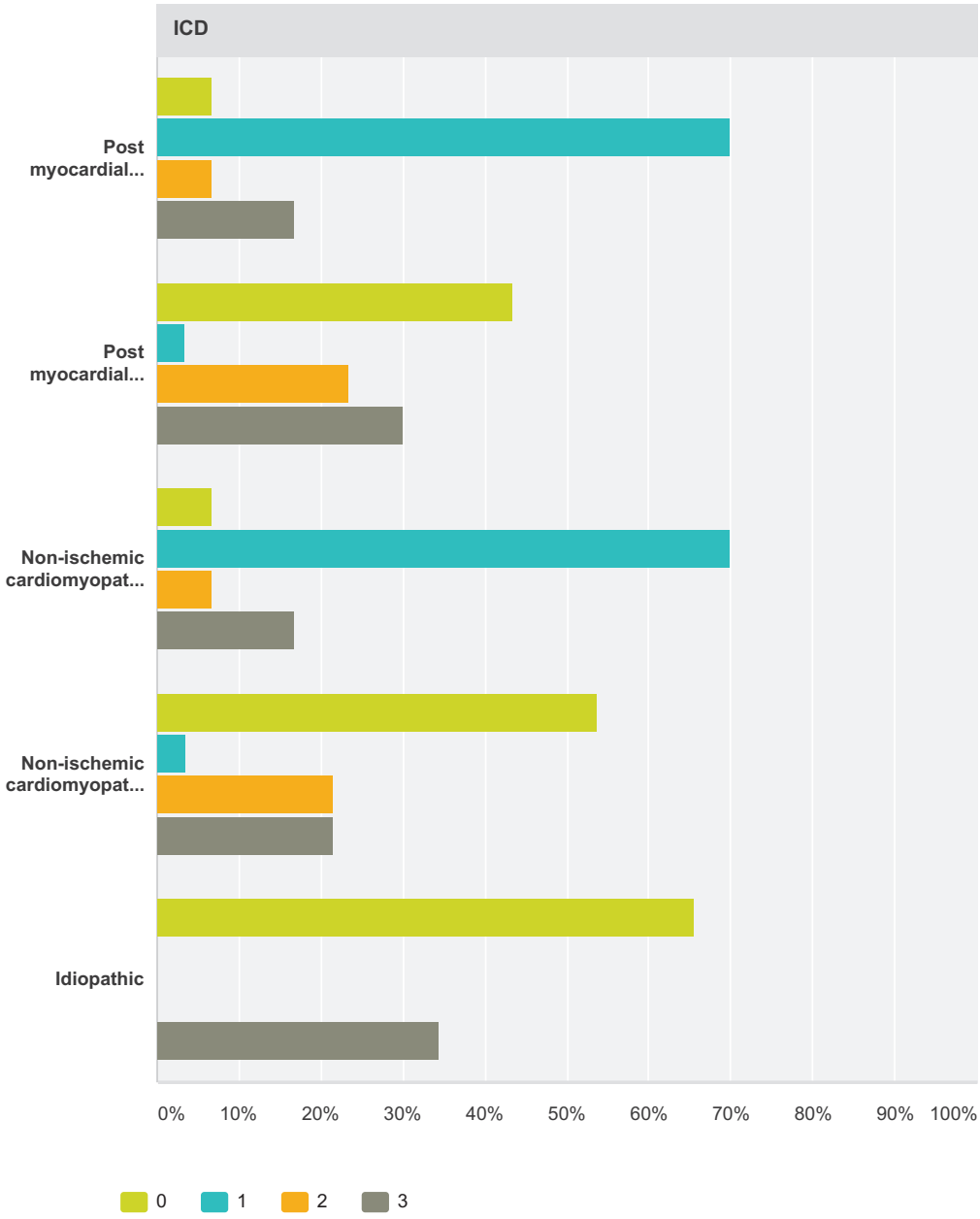
ICD					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**3.33%** 1	**93.33%** 28	**3.33%** 1	**0.00%** 0	30
Post myocardial infarction LVEF normal	**13.79%** 4	**17.24%** 5	**31.03%** 9	**37.93%** 11	29
Non-ischemic cardiomyopathy LVEF ≤35%	**3.33%** 1	**90.00%** 27	**6.67%** 2	**0.00%** 0	30
Non-ischemic cardiomyopathy LVEF normal	**13.79%** 4	**24.14%** 7	**20.69%** 6	**41.38%** 12	29
Idiopathic	**41.38%** 12	**6.90%** 2	**3.45%** 1	**48.28%** 14	29

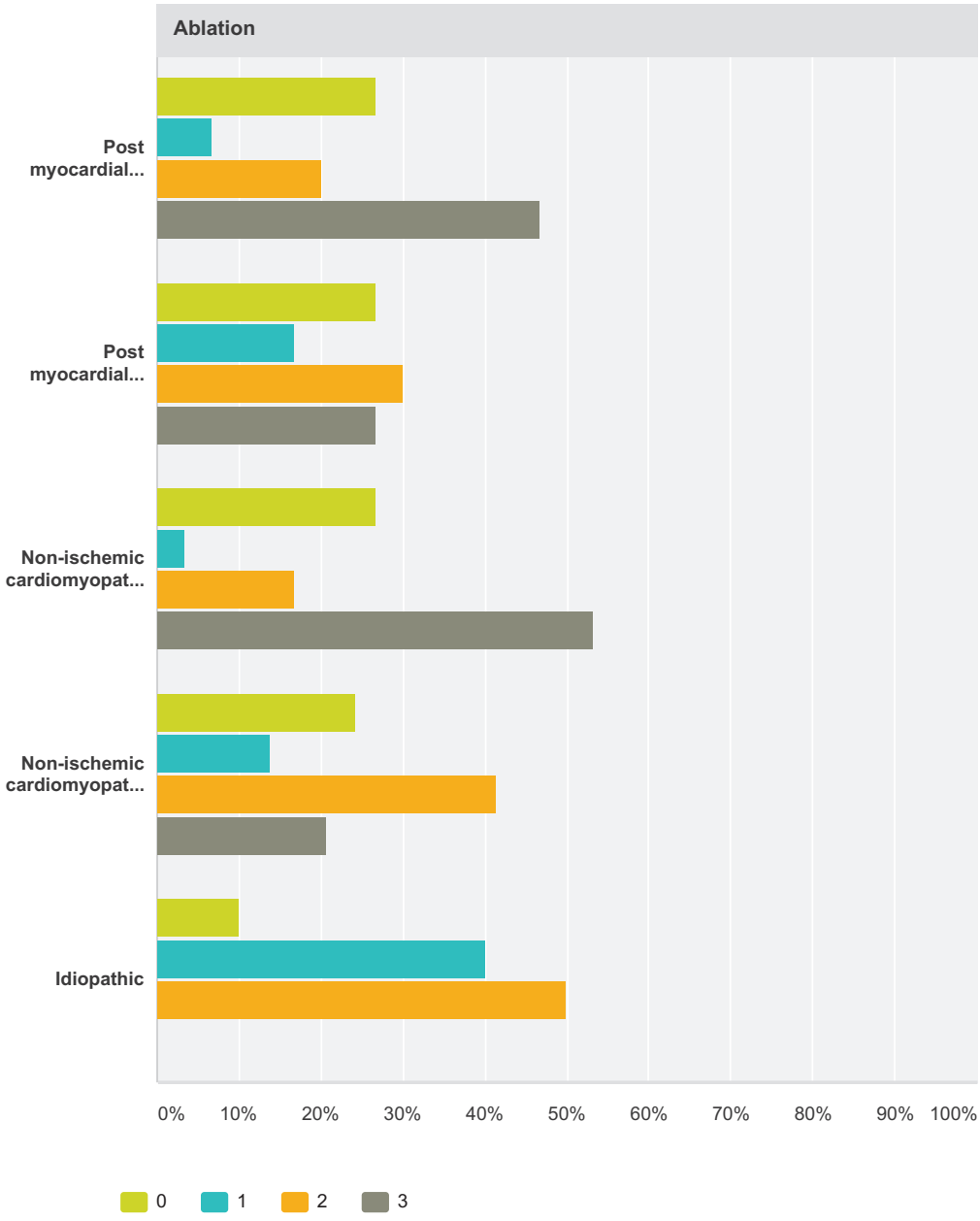
Ablation					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**0.00%** 0	**6.67%** 2	**30.00%** 9	**63.33%** 19	30
Post myocardial infarction LVEF normal	**0.00%** 0	**40.00%** 12	**33.33%** 10	**26.67%** 8	30
Non-ischemic cardiomyopathy LVEF ≤35%	**3.45%** 1	**3.45%** 1	**20.69%** 6	**72.41%** 21	29
Non-ischemic cardiomyopathy LVEF normal	**6.90%** 2	**27.59%** 8	**31.03%** 9	**34.48%** 10	29
Idiopathic	**6.67%** 2	**43.33%** 13	**46.67%** 14	**3.33%** 1	30

Q14 How do you manage recurrent symptomatic non-sustained monomorphic VT in different patients if hemodynamically stable? Please rank with number 1, 2 and 3 as first, second and third choice, respectively. Please choose 0 if alternative is not an option.

Answered: 30 Skipped: 4




ICD
Post myocardial...
Post myocardial...
Non-ischemic cardiomyopat...
Non-ischemic cardiomyopat...
Idiopathic
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
0
1
2
3

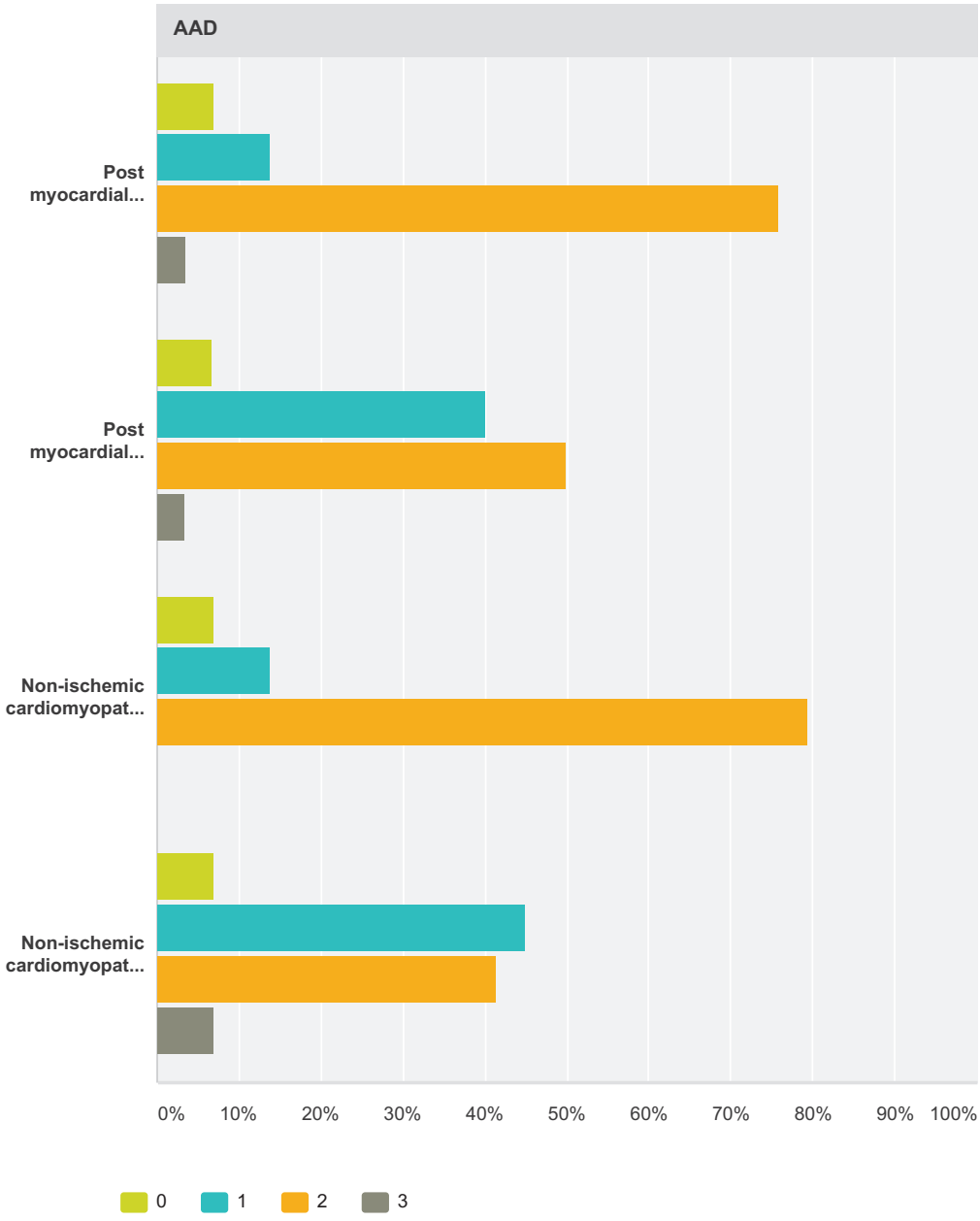


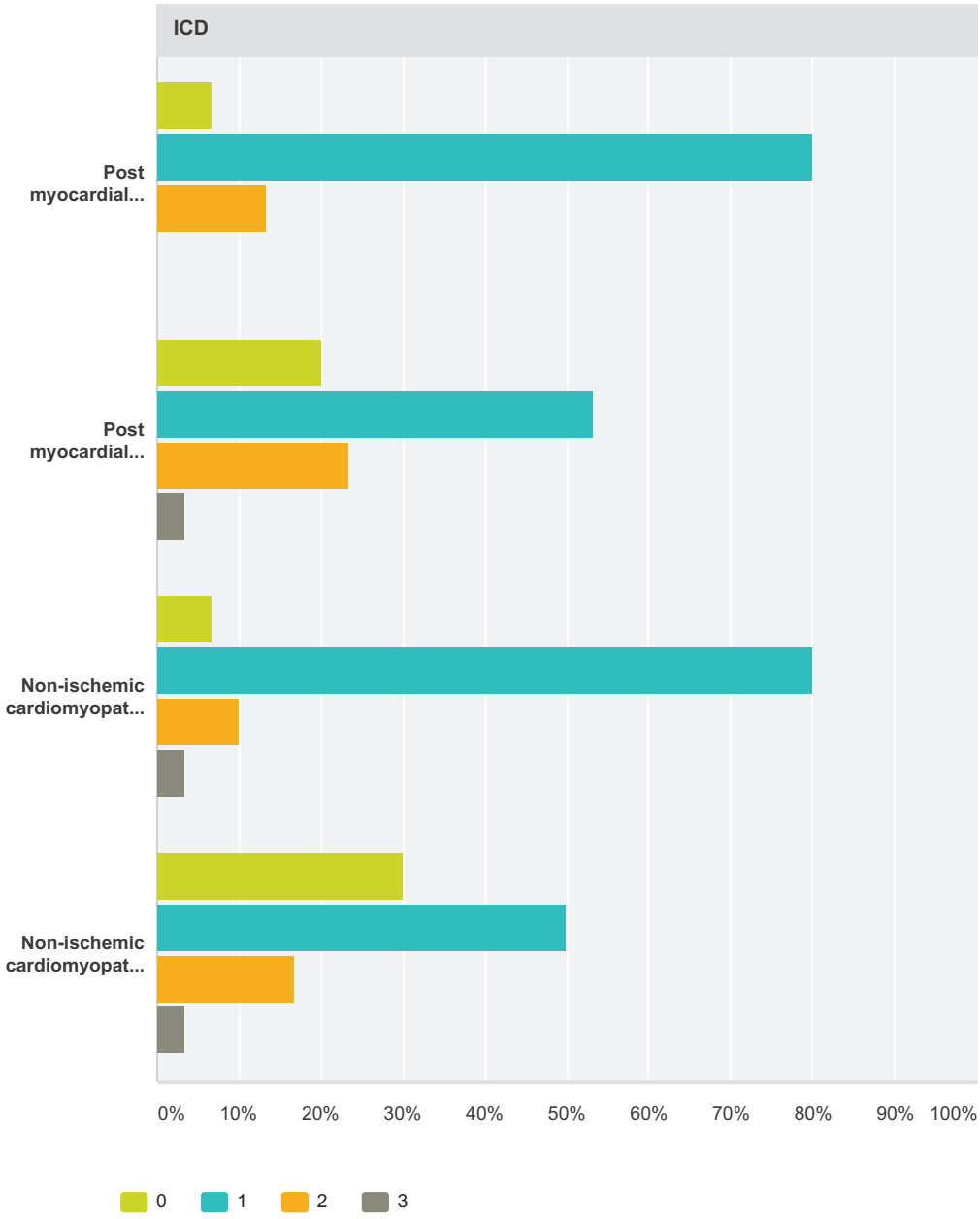
AAD					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**10.00%** 3	**20.00%** 6	**66.67%** 20	**3.33%** 1	30
Post myocardial infarction LVEF normal	**10.00%** 3	**70.00%** 21	**20.00%** 6	**0.00%** 0	30
Non-ischemic cardiomyopathy LVEF ≤35%	**3.33%** 1	**23.33%** 7	**70.00%** 21	**3.33%** 1	30
Non-ischemic cardiomyopathy LVEF normal	**6.67%** 2	**80.00%** 24	**13.33%** 4	**0.00%** 0	30
Idiopathic	**10.00%** 3	**60.00%** 18	**30.00%** 9	**0.00%** 0	30

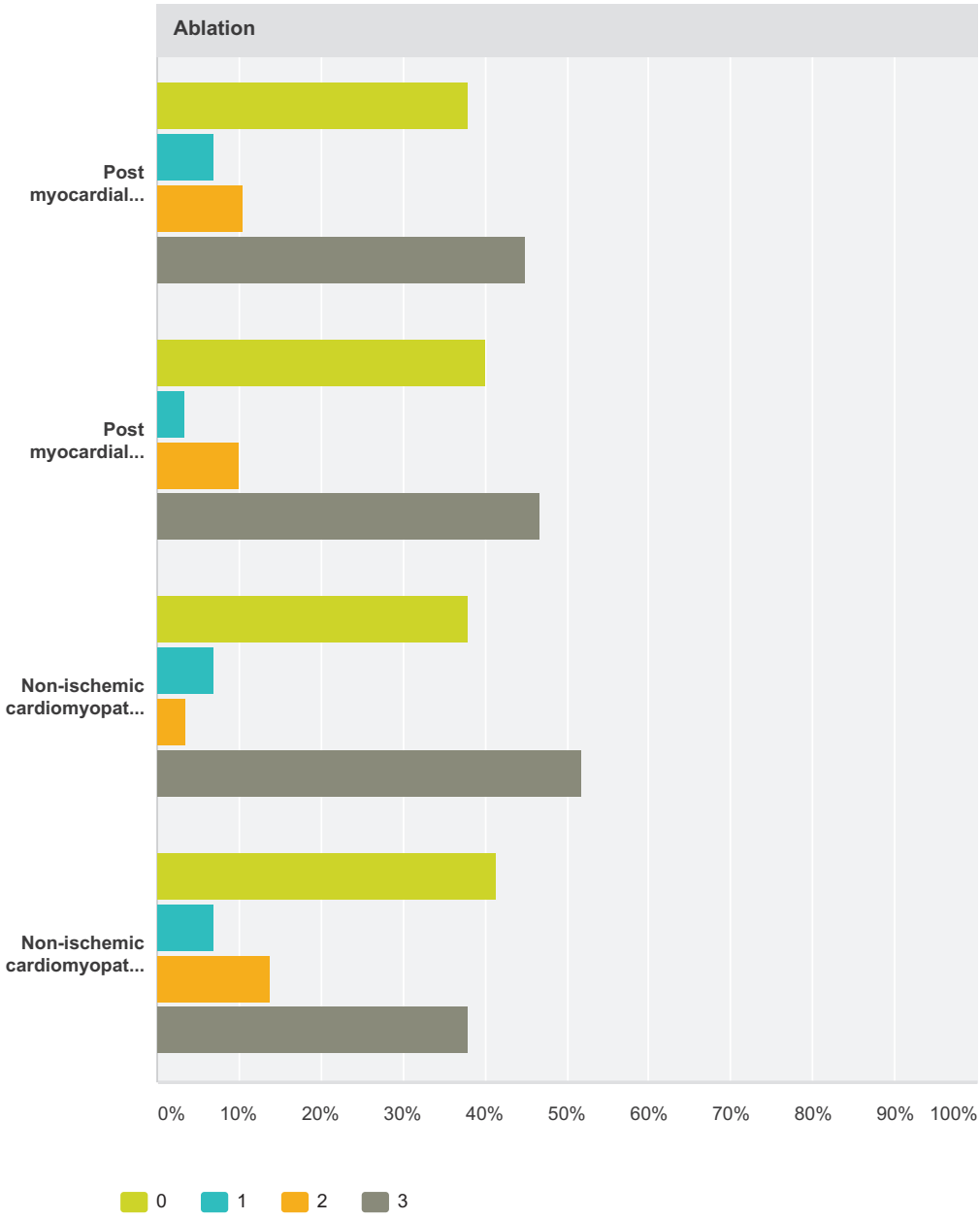
ICD					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**6.67%** 2	**70.00%** 21	**6.67%** 2	**16.67%** 5	30
Post myocardial infarction LVEF normal	**43.33%** 13	**3.33%** 1	**23.33%** 7	**30.00%** 9	30
Non-ischemic cardiomyopathy LVEF ≤35%	**6.67%** 2	**70.00%** 21	**6.67%** 2	**16.67%** 5	30
Non-ischemic cardiomyopathy LVEF normal	**53.57%** 15	**3.57%** 1	**21.43%** 6	**21.43%** 6	28
Idiopathic	**65.52%** 19	**0.00%** 0	**0.00%** 0	**34.48%** 10	29
Ablation					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**26.67%** 8	**6.67%** 2	**20.00%** 6	**46.67%** 14	30
Post myocardial infarction LVEF normal	**26.67%** 8	**16.67%** 5	**30.00%** 9	**26.67%** 8	30
Non-ischemic cardiomyopathy LVEF ≤35%	**26.67%** 8	**3.33%** 1	**16.67%** 5	**53.33%** 16	30
Non-ischemic cardiomyopathy LVEF normal	**24.14%** 7	**13.79%** 4	**41.38%** 12	**20.69%** 6	29
Idiopathic	**10.00%** 3	**40.00%** 12	**50.00%** 15	**0.00%** 0	30

Q15 How do you manage recurrent polymorphic VT in different patients if hemodynamically unstable? Please rank with number 1, 2 and 3 as first, second and third choice, respectively. Please choose 0 if alternative is not an option.

Answered: 30 Skipped: 4




ICD
Post myocardial...
Post myocardial...
Non-ischemic cardiomyopat...
Non-ischemic cardiomyopat...
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
0
1
2
3



AAD					
	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**6.90%** 2	**13.79%** 4	**75.86%** 22	**3.45%** 1	29
Post myocardial infarction LVEF normal	**6.67%** 2	**40.00%** 12	**50.00%** 15	**3.33%** 1	30
Non-ischemic cardiomyopathy LVEF ≤35%	**6.90%** 2	**13.79%** 4	**79.31%** 23	**0.00%** 0	29
Non-ischemic cardiomyopathy LVEF normal	**6.90%** 2	**44.83%** 13	**41.38%** 12	**6.90%** 2	29
ICD					
	0	**1**	**2**	**3**	**Total**

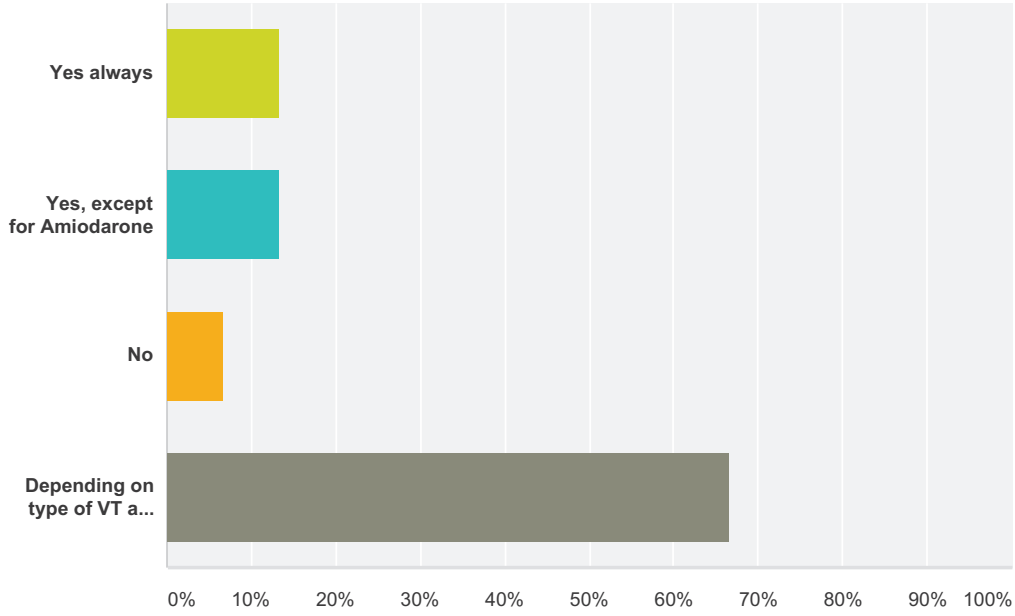
Post myocardial infarction LVEF ≤35%	**6.67%** 2	**80.00%** 24	**13.33%** 4	**0.00%** 0	30
Post myocardial infarction LVEF normal	**20.00%** 6	**53.33%** 16	**23.33%** 7	**3.33%** 1	30
Non-ischemic cardiomyopathy LVEF ≤35%	**6.67%** 2	**80.00%** 24	**10.00%** 3	**3.33%** 1	30
Non-ischemic cardiomyopathy LVEF normal	**30.00%** 9	**50.00%** 15	**16.67%** 5	**3.33%** 1	30

Ablation

	0	1	2	3	Total
Post myocardial infarction LVEF ≤35%	**37.93%** 11	**6.90%** 2	**10.34%** 3	**44.83%** 13	29
Post myocardial infarction LVEF normal	**40.00%** 12	**3.33%** 1	**10.00%** 3	**46.67%** 14	30
Non-ischemic cardiomyopathy LVEF ≤35%	**37.93%** 11	**6.90%** 2	**3.45%** 1	**51.72%** 15	29
Non-ischemic cardiomyopathy LVEF normal	**41.38%** 12	**6.90%** 2	**13.79%** 4	**37.93%** 11	29

Q16 Do you withdraw antiarrhythmic drugs before VT ablation procedure?

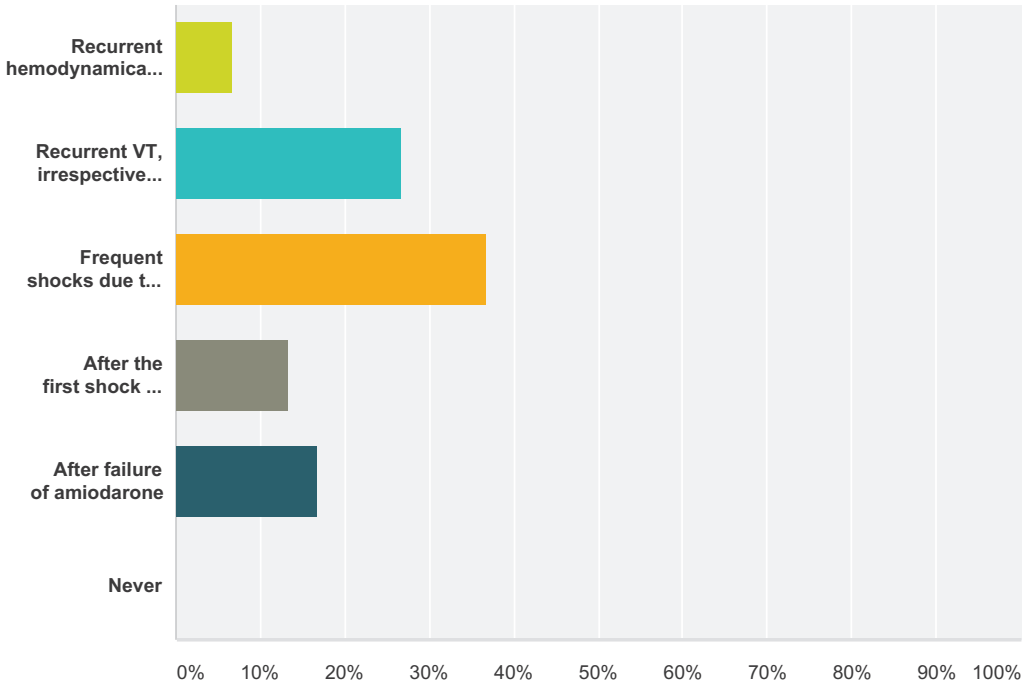
Answered: 30 Skipped: 4



Answer Choices	Responses	
Yes always	13.33%	4
Yes, except for Amiodarone	13.33%	4
No	6.67%	2
Depending on type of VT and presence of heart disease	66.67%	20
Total		30

Q17 In which situation would you refer a post-myocardial-infarction patient to catheter ablation if the patient has VT after ICD implantation?

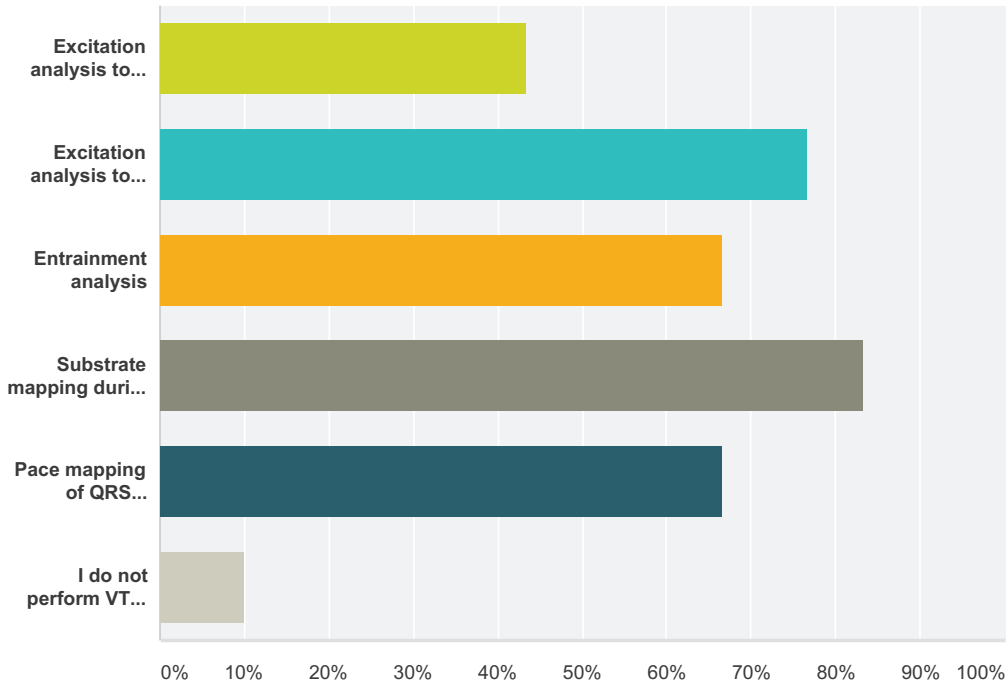
Answered: 30 Skipped: 4



Answer Choices	Responses	
Recurrent hemodynamically unstable VT	**6.67%**	2
Recurrent VT, irrespective hemodynamically response	**26.67%**	8
Frequent shocks due to VTs	**36.67%**	11
After the first shock due to VT	**13.33%**	4
After failure of amiodarone	**16.67%**	5
Never	**0.00%**	0
Total		**30**

Q18 Which techniques do you employ for ablation of scar-related VT? (Multiple choices allowed)

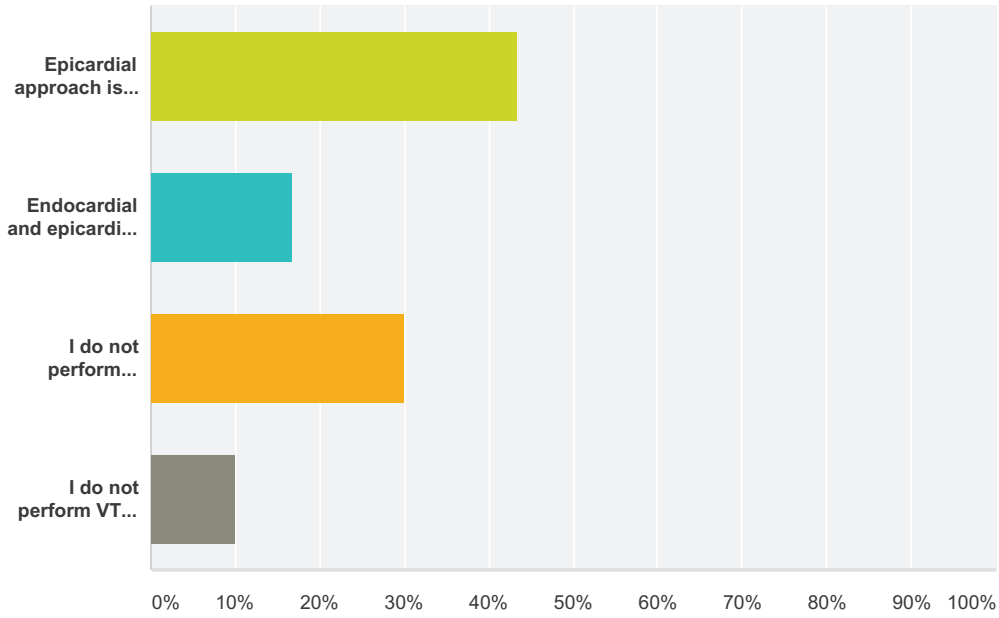
Answered: 30 Skipped: 4



Answer Choices	Responses	
Excitation analysis to find the earliest activation during VT	**43.33%**	13
Excitation analysis to find mid-diastolic potentials during VT	**76.67%**	23
Entrainment analysis	**66.67%**	20
Substrate mapping during sinus rhythm	**83.33%**	25
Pace mapping of QRS morphologies	**66.67%**	20
I do not perform VT ablation	**10.00%**	3
Total Respondents: 30		

Q19 When do you perform epicardial VT ablation in patients with structural heart disease?

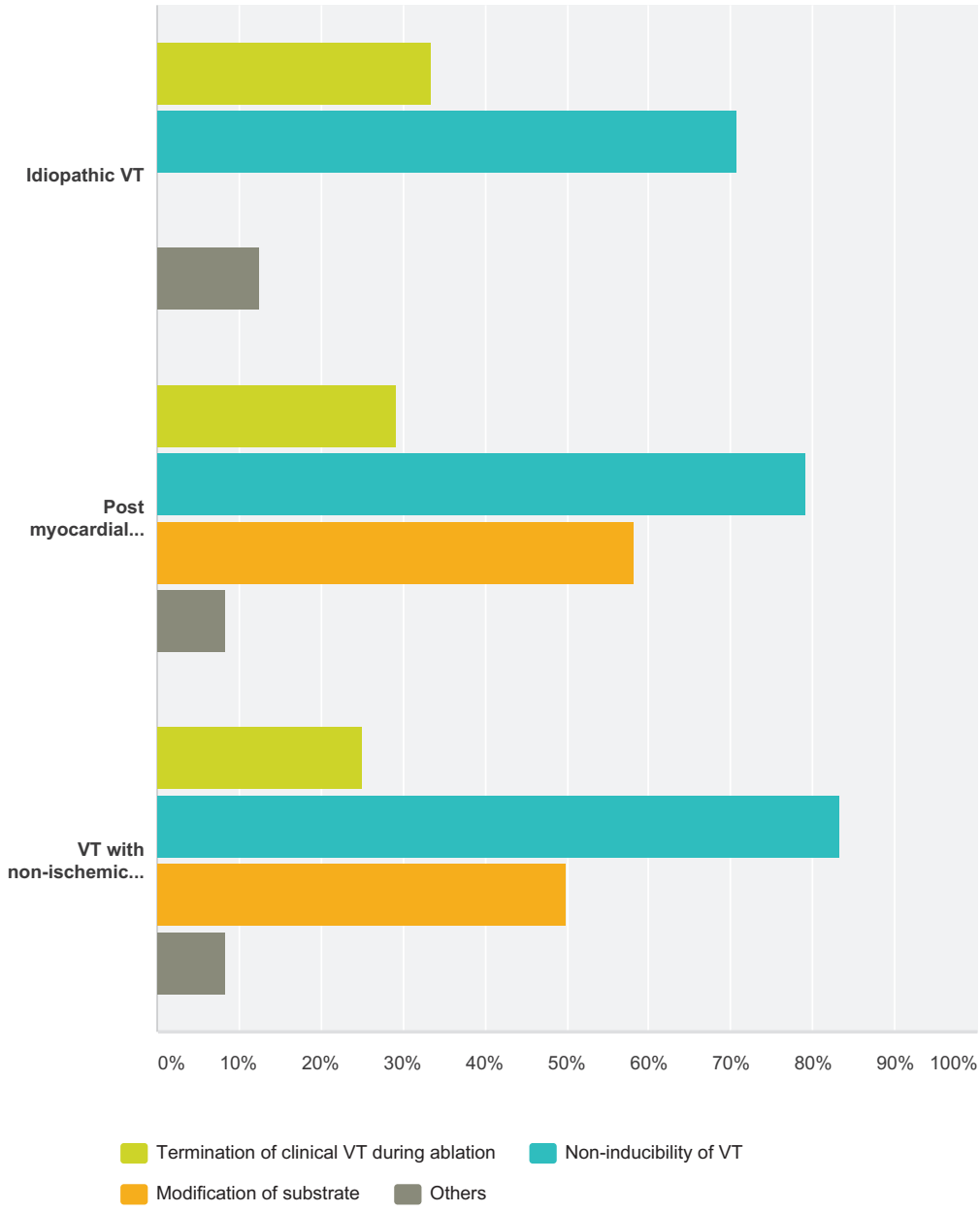
Answered: 30 Skipped: 4



Answer Choices	Responses	
Epicardial approach is applied only after failure of endocardial approach	**43.33%**	13
Endocardial and epicardial approach at the first procedure	**16.67%**	5
I do not perform epicardial VT ablation	**30.00%**	9
I do not perform VT ablation	**10.00%**	3
Total		**30**

Q20 What is the endpoint of VT ablation procedure in your centre?

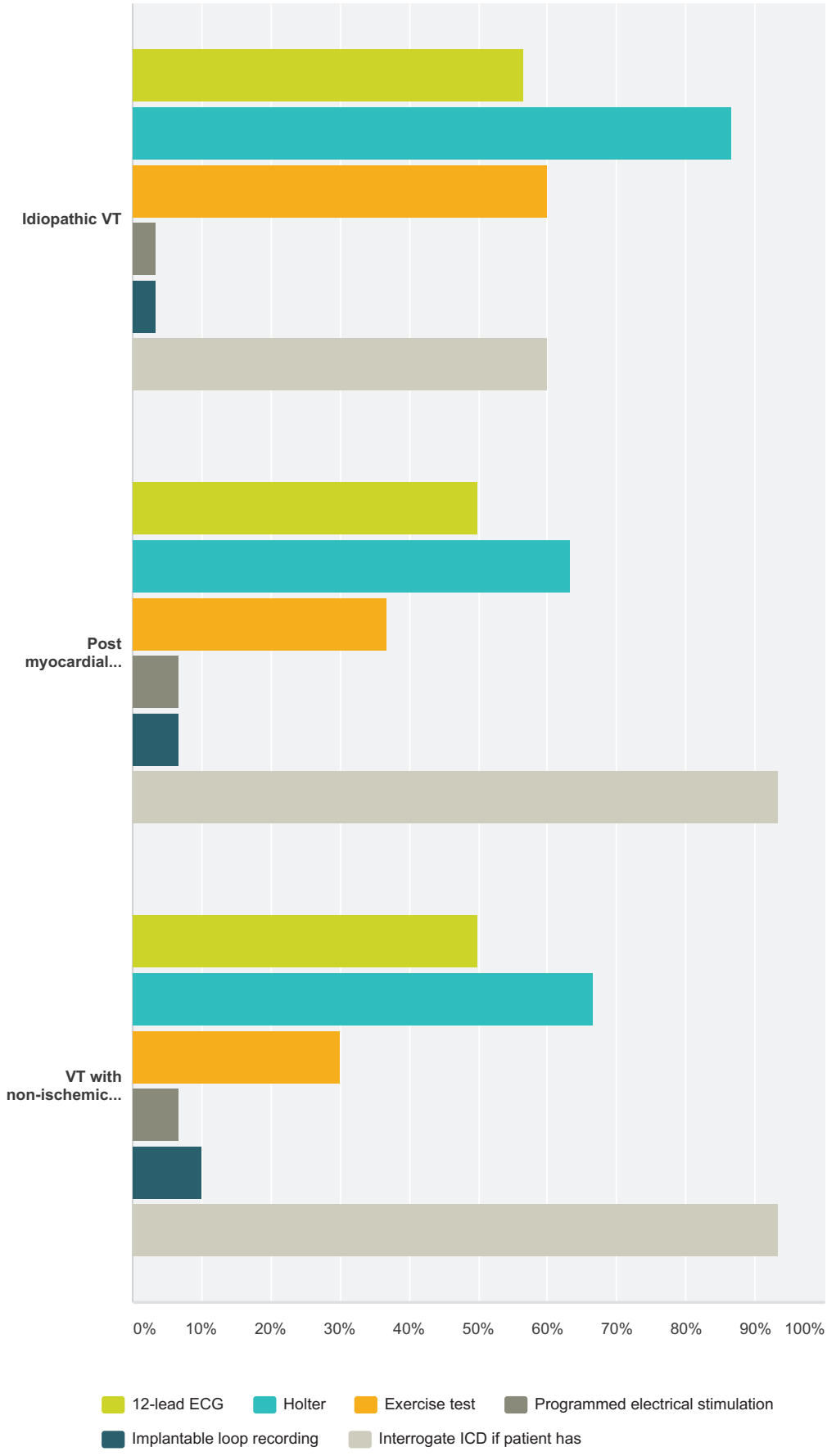
Answered: 24 Skipped: 10



	Termination of clinical VT during ablation	Non-inducibility of VT	Modification of substrate	Others	Total Respondents
Idiopathic VT	**33.33%** 8	**70.83%** 17	**0.00%** 0	**12.50%** 3	24
Post myocardial infarction VT	**29.17%** 7	**79.17%** 19	**58.33%** 14	**8.33%** 2	24
VT with non-ischemic cardiomyopathy	**25.00%** 6	**83.33%** 20	**50.00%** 12	**8.33%** 2	24

Q21 Which examinations do you perform to evaluate the efficacy of catheter ablation during long-term follow-up? (Multiple choices allowed)

Answered: 30 Skipped: 4

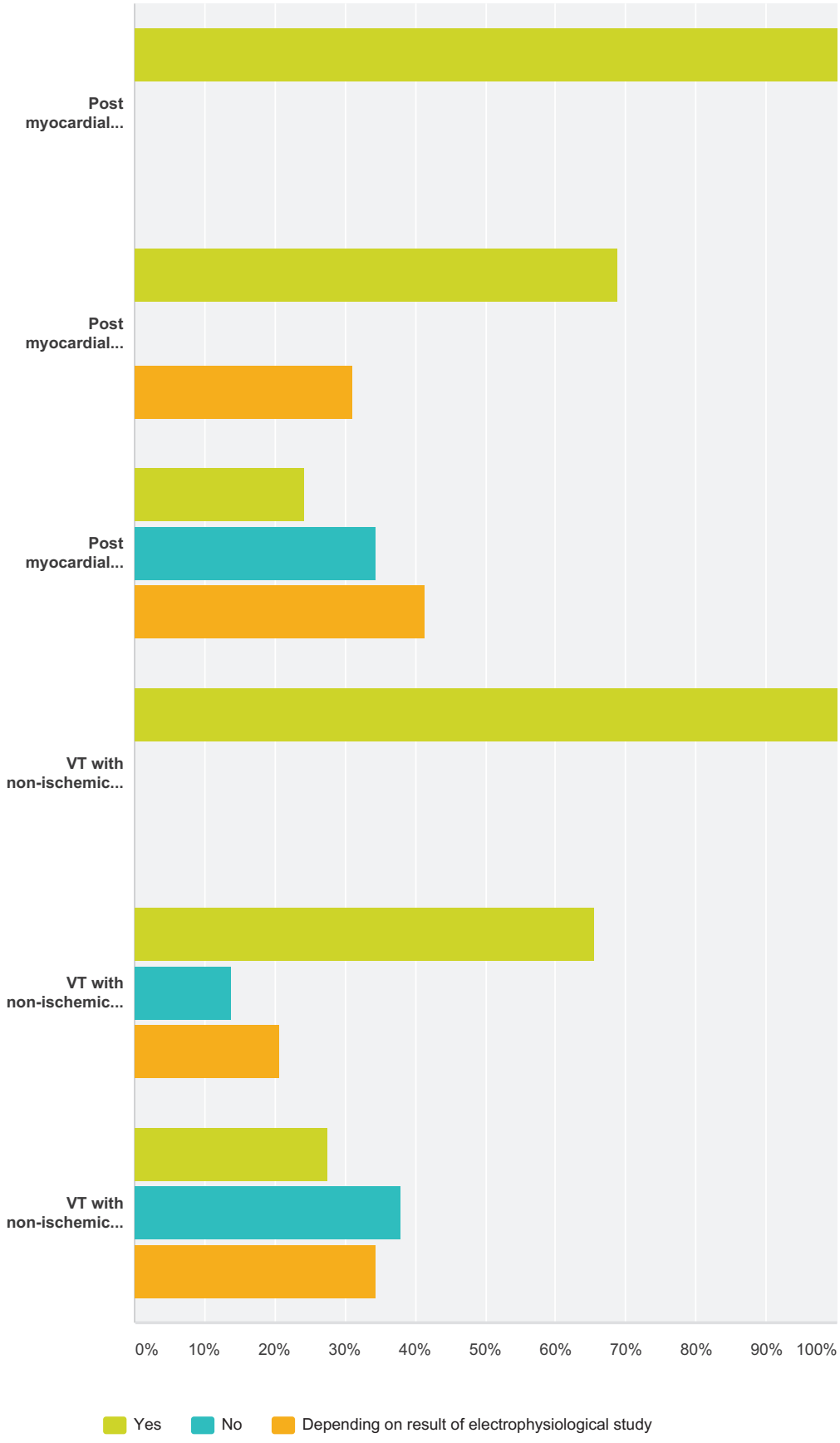

Idiopathic VT
Post myocardial...
VT with non-ischemic...
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
12-lead ECG
Holter
Exercise test
Programmed electrical stimulation
Implantable loop recording
Interrogate ICD if patient has

EP WIRE on Management of ventricular tachycardia – antiarrhythmic drugs, catheter ablation, ICD therapies

	12-lead ECG	Holter	Exercise test	Programmed electrical stimulation	Implantable loop recording	Interrogate ICD if patient has	Total Respondents
Idiopathic VT	**56.67%** 17	**86.67%** 26	**60.00%** 18	**3.33%** 1	**3.33%** 1	**60.00%** 18	30
Post myocardial infarction VT	**50.00%** 15	**63.33%** 19	**36.67%** 11	**6.67%** 2	**6.67%** 2	**93.33%** 28	30
VT with non-ischemic cardiomyopathy	**50.00%** 15	**66.67%** 20	**30.00%** 9	**6.67%** 2	**10.00%** 3	**93.33%** 28	30

Q22 Do you find indications for ICD implantation in different patients with clinically documented VTs?

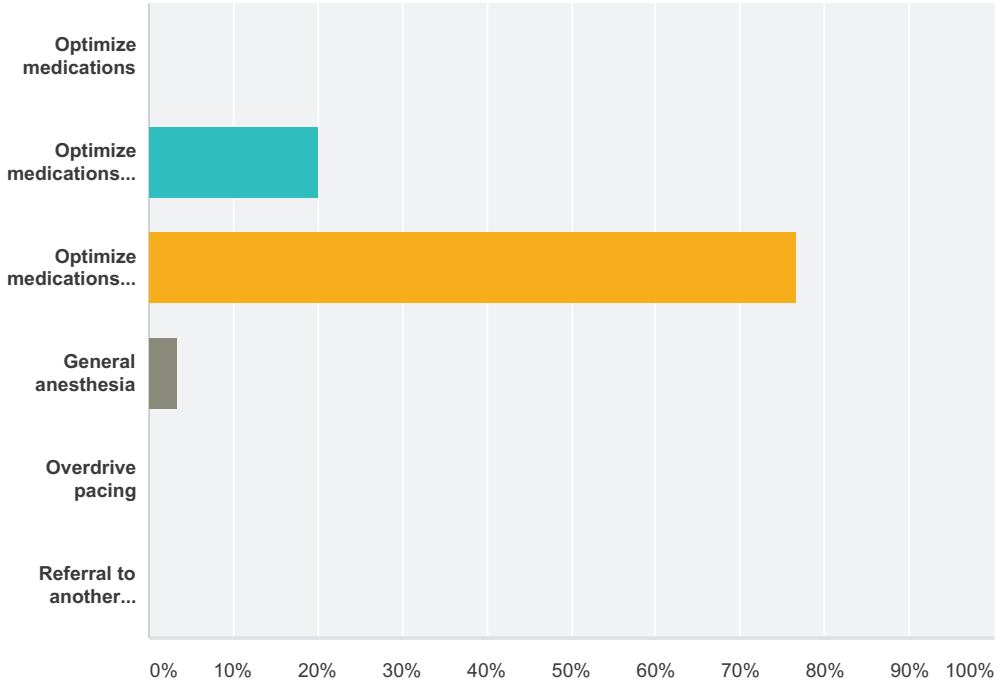
Answered: 29 Skipped: 5


Post myocardial...
Post myocardial...
Post myocardial...
VT with non-ischemic...
VT with non-ischemic...
VT with non-ischemic...
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Yes
No
Depending on result of electrophysiological study

	Yes	No	Depending on result of electrophysiological study	Total
Post myocardial infarction VT LVEF ≤35%	**100.00%** 29	**0.00%** 0	**0.00%** 0	29
Post myocardial infarction VT LVEF 35-40%	**68.97%** 20	**0.00%** 0	**31.03%** 9	29
Post myocardial infarction VT LVEF normal	**24.14%** 7	**34.48%** 10	**41.38%** 12	29
VT with non-ischemic cardiomyopathy LVEF ≤35%	**100.00%** 29	**0.00%** 0	**0.00%** 0	29
VT with non-ischemic cardiomyopathy LVEF 35-40%	**65.52%** 19	**13.79%** 4	**20.69%** 6	29
VT with non-ischemic cardiomyopathy LVEF normal	**27.59%** 8	**37.93%** 11	**34.48%** 10	29

Q23 How do you manage VT storm after ICD implantation without reversible causes?

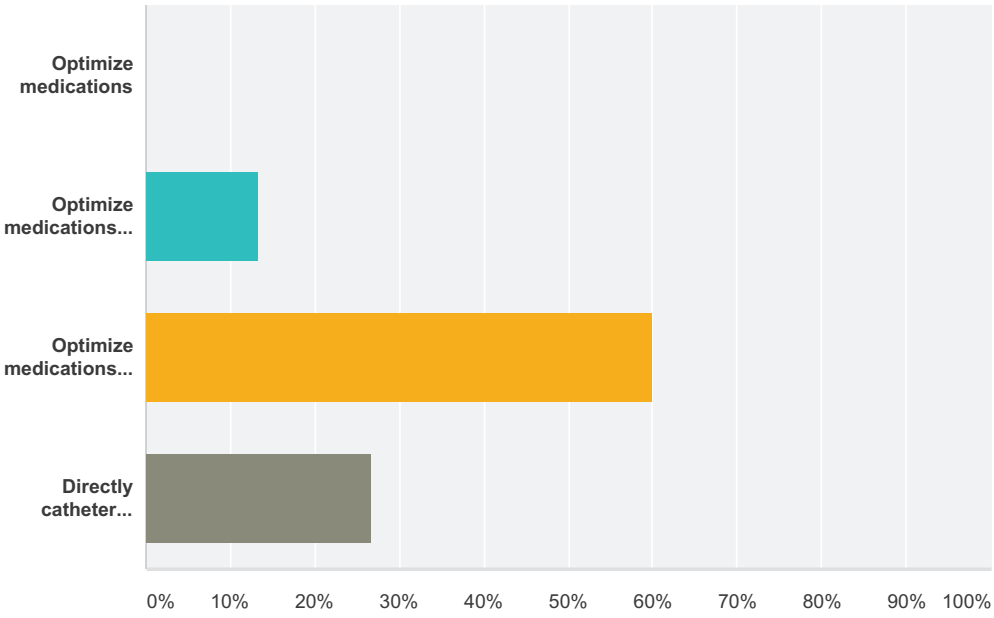
Answered: 30 Skipped: 4



Answer Choices	Responses	
Optimize medications	**0.00%**	0
Optimize medications first, and optimize ICD criteria for VT detection and shock	**20.00%**	6
Optimize medications first, followed by catheter ablation	**76.67%**	23
General anesthesia	**3.33%**	1
Overdrive pacing	**0.00%**	0
Referral to another hospital	**0.00%**	0
Total		**30**

Q24 How do you treat the patients with ICD who have recurrent ventricular tachycardia or with frequent shocks during long-term follow-up?

Answered: 30 Skipped: 4



Answer Choices	Responses	
Optimize medications	**0.00%**	0
Optimize medications first, and optimize ICD criteria for VT detection and shock.	**13.33%**	4
Optimize medications first, followed by catheter ablation	**60.00%**	18
Directly catheter ablation	**26.67%**	8
Total		**30**