EHRA EP Wire on frailty and arrhythmias in everyday clinical practice

Q1 In which country and city is your centre based ?
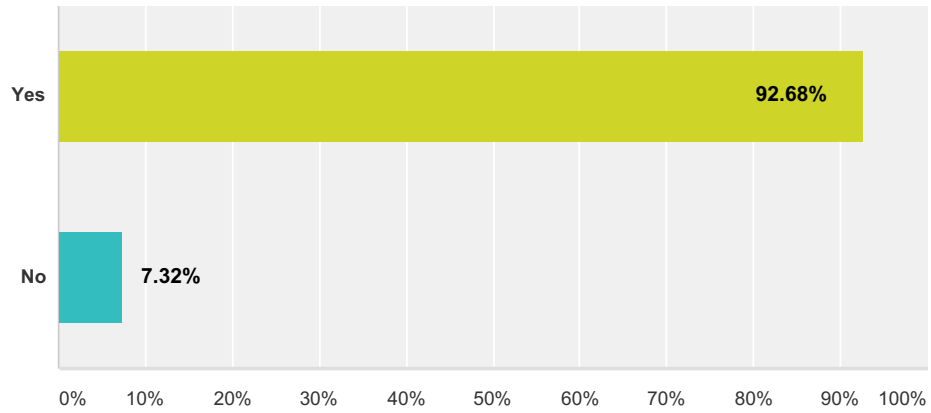
Answered: 41   Skipped: 0

#	Responses	Date
1	Poland, Warsaw	7/2/2017 11:55 PM
2	Poland, Polanica Zdrój	7/2/2017 10:08 PM
3	Poland	6/30/2017 11:34 PM
4	italy	6/30/2017 10:48 AM
5	Germany	6/28/2017 8:56 AM
6	France, Marseilles	6/27/2017 11:03 AM
7	The Netherlands, Hengelo-Almelo	6/26/2017 5:14 PM
8	Italy	6/23/2017 6:15 PM
9	Poland	6/23/2017 9:42 AM
10	Italy Bolzano	6/22/2017 11:31 AM
11	Italy	6/20/2017 10:54 AM
12	Birmingham, UK	6/20/2017 10:17 AM
13	Mercogliano (AV), Italy	6/19/2017 9:18 AM
14	Czech Republic	6/19/2017 6:37 AM
15	Spain	6/18/2017 9:46 AM
16	Italy, Lavagna	6/17/2017 12:01 PM
17	Linz, Austria	6/15/2017 9:06 PM
18	Italy, Florence	6/15/2017 8:07 PM
19	Norway	6/15/2017 12:48 PM
20	Firenze Italy	6/15/2017 10:05 AM
21	netherlands	6/15/2017 8:48 AM
22	Italy	6/13/2017 12:17 AM
23	Italy	6/10/2017 9:53 AM
24	Poland	6/8/2017 10:28 PM
25	Belgrade, Serbia	6/5/2017 5:26 PM
26	SPAIN MADRID	6/3/2017 1:01 AM
27	Lodz, Poland	6/2/2017 4:34 PM
28	Oslo, Norway	6/2/2017 4:04 PM
29	italy	6/2/2017 11:02 AM
30	Switzerland	6/1/2017 10:45 PM
31	Germany	6/1/2017 6:37 PM
32	France, Toulouse	6/1/2017 6:10 PM
33	Poland, Zabrze	6/1/2017 3:25 PM
34	Spain	6/1/2017 1:30 PM
35	Netherlands, Maastricht	6/1/2017 11:55 AM

36	Scotland		6/1/2017 11:06 AM
37	denmark		6/1/2017 9:52 AM
38	Germany		6/1/2017 9:06 AM
39	Tbilisi, Georgia		6/1/2017 8:15 AM
40	Serbia, Kragujevac		6/1/2017 8:03 AM
41	Netherlands		6/1/2017 8:02 AM

Q2 Would you like acknowledgment of your centre in the EP Europace Journal and on the website ?

Answered: 41   Skipped: 0

Answer Choices	Responses	
Yes	**92.68%**	38
No	**7.32%**	3
Total		**41**

Q3 Your email address is

Answered: 41   Skipped: 0

#	Responses	Date
1	piotr.lodzinski@me.com	7/2/2017 11:55 PM
2	andtatar@icloud.com	7/2/2017 10:08 PM
3	mkiliszek@wim.mil.pl	6/30/2017 11:34 PM
4	giuseppe.boriani@unimore.it	6/30/2017 10:48 AM
5	tilz6@hotmail.com	6/28/2017 8:56 AM
6	jean-claude.deharo@ap-hm.fr	6/27/2017 11:03 AM
7	s.said@zgt.nl	6/26/2017 5:14 PM
8	gmascioli63@gmail.com	6/23/2017 6:15 PM
9	radle@poczta.onet.pl	6/23/2017 9:42 AM
10	marco.tomaino@sabes.it	6/22/2017 11:31 AM
11	roberto.deponti@uninsubria.it	6/20/2017 10:54 AM
12	g.y.h.lip@bham.ac.uk	6/20/2017 10:17 AM
13	gius.mascia@gmail.com	6/19/2017 9:18 AM
14	milos.taborsky@seznam.cz	6/19/2017 6:37 AM
15	arcadi@secardiologia.es	6/18/2017 9:46 AM
16	mbrignole@asl4.liguria.it	6/17/2017 12:01 PM
17	helmut.puererfellner@ordensklinikum.at	6/15/2017 9:06 PM
18	nmarchionni@unifi.it	6/15/2017 8:07 PM
19	kristina.haugaa@medisin.uio.no	6/15/2017 12:48 PM
20	luigipadeletti@gmail.com	6/15/2017 10:05 AM
21	hjgm.crijns@mumc.nl	6/15/2017 8:48 AM
22	m.g.bongiorni@med.unipi.it	6/13/2017 12:17 AM
23	fumadue@tin.it	6/10/2017 9:53 AM
24	mkostkiewicz@o2.pl	6/8/2017 10:28 PM
25	tanjapotpara@gmail.com	6/5/2017 5:26 PM
26	ANTONIOMADRI@GMAIL.COM	6/3/2017 1:01 AM
27	pawel.ptaszynski@umed.lodz.pl	6/2/2017 4:34 PM
28	kristina.haugaa@rr-research.no	6/2/2017 4:04 PM
29	alessandro.proclemer@asuiud.sanita.fvg.it	6/2/2017 11:02 AM
30	Christian.Sticherling@usb.ch	6/1/2017 10:45 PM
31	erol.tueluemen@umm.de	6/1/2017 6:37 PM
32	sboveda@clinique-pasteur.com	6/1/2017 6:10 PM
33	ewajczyk@op.pl	6/1/2017 3:25 PM
34	jlmerino@arritmias.net	6/1/2017 1:30 PM
35	hjgm.crijns@mumc.nl	6/1/2017 11:55 AM

36	paul.broadhurst@nhs.net	6/1/2017 11:06 AM
37	ccc	6/1/2017 9:52 AM
38	Heidi.estner@med.uni-Muenchen.de	6/1/2017 9:06 AM
39	giorgi.papiashvili@gmail.com	6/1/2017 8:15 AM
40	simovicst@gmail.com	6/1/2017 8:03 AM
41	n.m.s.degroto@erasmusmc.nl	6/1/2017 8:02 AM

36	paul.broadhurst@nhs.net	6/1/2017 11:06 AM

Q4 What type of institution do you work in ?

Answered: 41   Skipped: 0
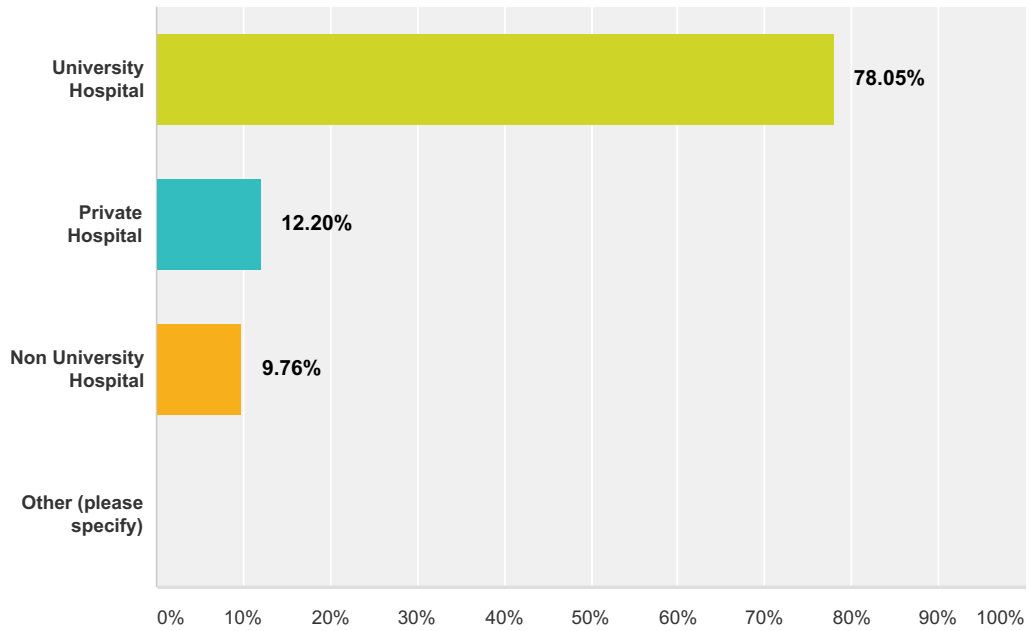
Answer Choices	Responses	
University Hospital	78.05%	32
Private Hospital	12.20%	5
Non University Hospital	9.76%	4
Other (please specify)	0.00%	0
Total		**41**

#	Other (please specify)	Date
	There are no responses.	

Q5 What was the proportion of advanced age patients that you managed in the last 12 months?

Answered: 36   Skipped: 5

Answer Choices	Responses	
70-79 years (%):	**100.00%**	36
80-85 years (%):	**100.00%**	36
>85 years (%):	**100.00%**	36

#	70-79 years (%):	Date
1	30	7/2/2017 10:12 PM
2	20	6/30/2017 11:36 PM
3	15	6/30/2017 10:49 AM
4	20	6/28/2017 8:57 AM
5	70	6/27/2017 11:06 AM
6	70-80%	6/26/2017 5:16 PM
7	25	6/23/2017 6:16 PM
8	10	6/23/2017 9:44 AM
9	50	6/22/2017 11:37 AM
10	70	6/20/2017 10:57 AM
11	30	6/20/2017 10:18 AM
12	35	6/19/2017 9:23 AM
13	30	6/19/2017 6:38 AM
14	50	6/17/2017 12:06 PM
15	30	6/15/2017 9:08 PM
16	20%	6/15/2017 8:09 PM
17	10	6/15/2017 12:49 PM
18	50	6/15/2017 10:06 AM
19	40	6/15/2017 8:58 AM
20	50	6/13/2017 12:18 AM
21	45	6/10/2017 10:00 AM
22	20	6/8/2017 10:31 PM
23	50	6/5/2017 5:27 PM
24	20	6/3/2017 1:02 AM
25	70	6/2/2017 4:36 PM
26	10	6/2/2017 4:05 PM
27	15	6/2/2017 11:04 AM
28	20	6/1/2017 10:47 PM
29	20-30	6/1/2017 6:39 PM

30	25	6/1/2017 6:12 PM
31	15	6/1/2017 3:26 PM
32	30	6/1/2017 1:32 PM
33	20	6/1/2017 11:08 AM
34	50	6/1/2017 9:07 AM
35	7	6/1/2017 8:26 AM
36	65	6/1/2017 8:05 AM
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2	10	6/30/2017 11:36 PM
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10	25	6/20/2017 10:57 AM
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15	20	6/15/2017 9:08 PM
16	15%	6/15/2017 8:09 PM
17	5	6/15/2017 12:49 PM
18	10	6/15/2017 10:06 AM
19	10	6/15/2017 8:58 AM
20	35	6/13/2017 12:18 AM
21	45	6/10/2017 10:00 AM
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24	5	6/3/2017 1:02 AM
25	20	6/2/2017 4:36 PM
26	5	6/2/2017 4:05 PM
27	15	6/2/2017 11:04 AM
28	10	6/1/2017 10:47 PM
29	5-10	6/1/2017 6:39 PM
30	20	6/1/2017 6:12 PM
31	5	6/1/2017 3:26 PM
32	10	6/1/2017 1:32 PM
33	10	6/1/2017 11:08 AM

#		Date
34	30	6/1/2017 9:07 AM
35	5	6/1/2017 8:26 AM
36	20	6/1/2017 8:05 AM
#	>85 years (%):	Date
1	15	7/2/2017 10:12 PM
2	5	6/30/2017 11:36 PM
3	10	6/30/2017 10:49 AM
4	10	6/28/2017 8:57 AM
5	5	6/27/2017 11:06 AM
6	5-10%	6/26/2017 5:16 PM
7	10	6/23/2017 6:16 PM
8	5	6/23/2017 9:44 AM
9	25	6/22/2017 11:37 AM
10	5	6/20/2017 10:57 AM
11	5	6/20/2017 10:18 AM
12	8	6/19/2017 9:23 AM
13	15	6/19/2017 6:38 AM
14	10	6/17/2017 12:06 PM
15	10	6/15/2017 9:08 PM
16	8%	6/15/2017 8:09 PM
17	5	6/15/2017 12:49 PM
18	2	6/15/2017 10:06 AM
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21	10	6/10/2017 10:00 AM
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23	5	6/5/2017 5:27 PM
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25	10	6/2/2017 4:36 PM
26	5	6/2/2017 4:05 PM
27	10	6/2/2017 11:04 AM
28	5	6/1/2017 10:47 PM
29	2-3	6/1/2017 6:39 PM
30	15	6/1/2017 6:12 PM
31	1	6/1/2017 3:26 PM
32	5	6/1/2017 1:32 PM
33	5	6/1/2017 11:08 AM
34	20	6/1/2017 9:07 AM
35	1	6/1/2017 8:26 AM
36	15	6/1/2017 8:05 AM

Q6 You define "frail" a patient when problems in the following features are present (multiple answers):
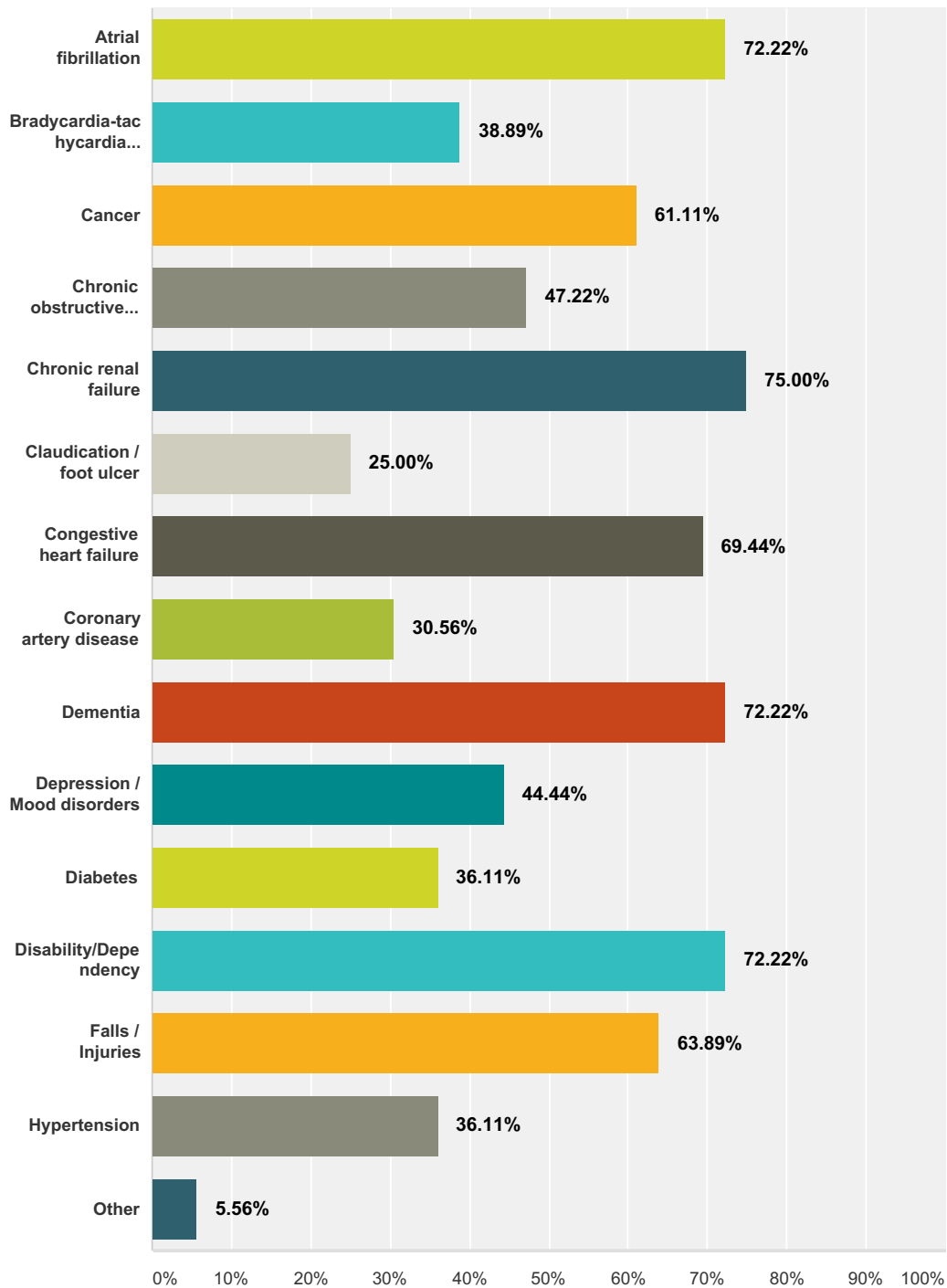
Answered: 36   Skipped: 5
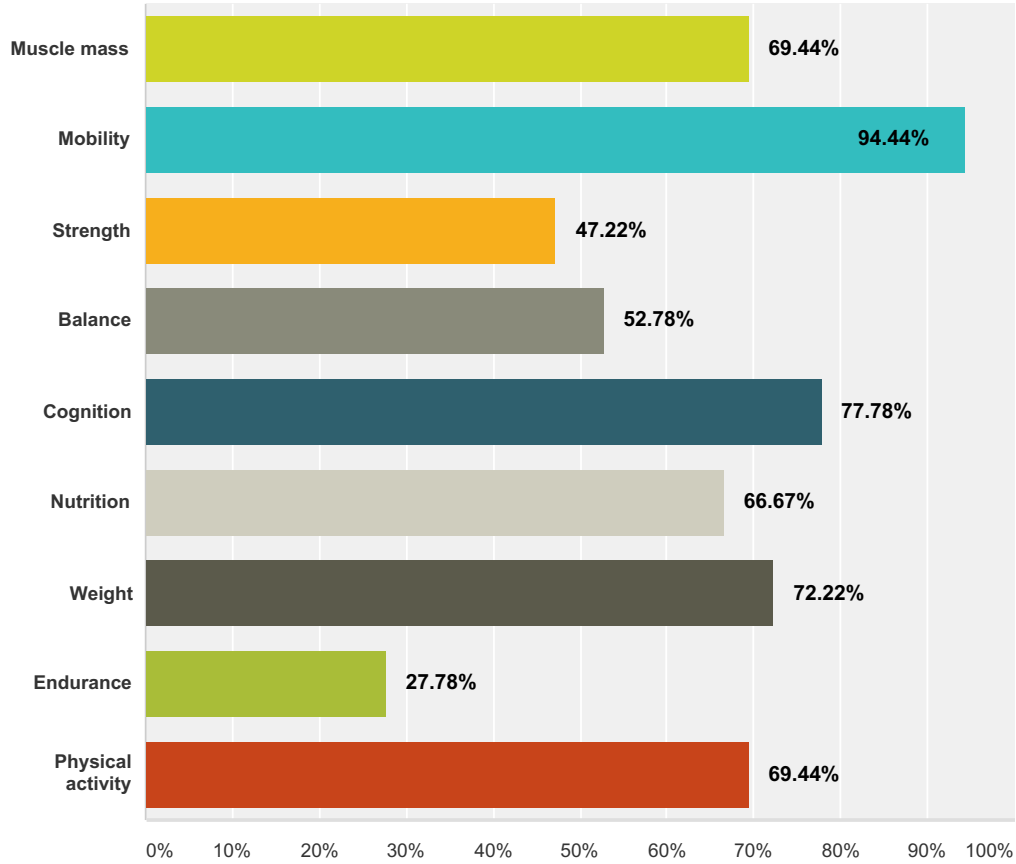
Answer Choices	Responses	
Muscle mass	**69.44%**	25
Mobility	**94.44%**	34
Strength	**47.22%**	17
Balance	**52.78%**	19
Cognition	**77.78%**	28
Nutrition	**66.67%**	24
Weight	**72.22%**	26
Endurance	**27.78%**	10
Physical activity	**69.44%**	25
Total Respondents: 36		

Q7 Which comorbidities are more common when you define a patient to be "frail" ?

Answered: 36   Skipped: 5

Answer Choices	Responses	
Atrial fibrillation	72.22%	26
Bradycardia-tachycardia syndrome	38.89%	14

Cancer	**61.11%**	22
Chronic obstructive pulmonary disease	**47.22%**	17
Chronic renal failure	**75.00%**	27
Claudication / foot ulcer	**25.00%**	9
Congestive heart failure	**69.44%**	25
Coronary artery disease	**30.56%**	11
Dementia	**72.22%**	26
Depression / Mood disorders	**44.44%**	16
Diabetes	**36.11%**	13
Disability/Dependency	**72.22%**	26
Falls / Injuries	**63.89%**	23
Hypertension	**36.11%**	13
Other	**5.56%**	2
Total Respondents: 36		

Q8 Did you manage "frail" patients in the last 12 months?

Answered: 36   Skipped: 5
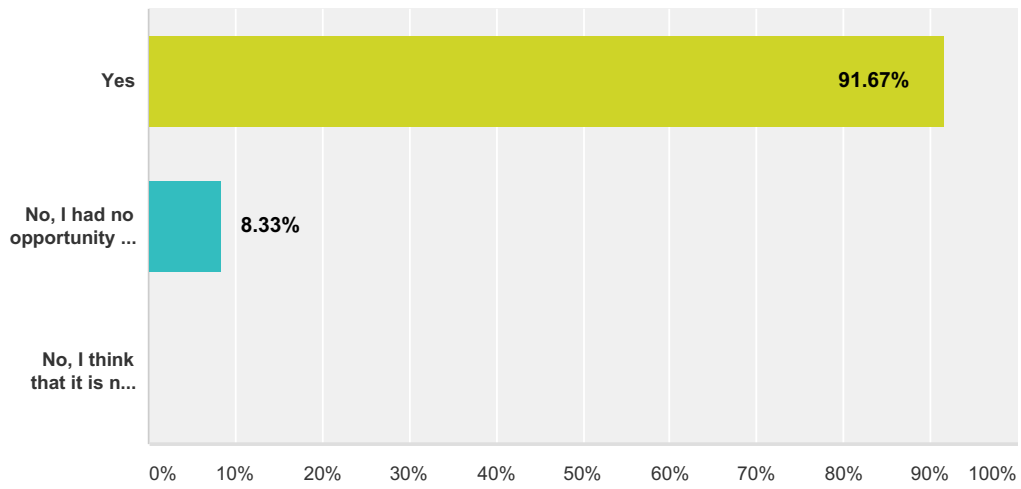
Answer Choices	Responses	
Yes	**91.67%**	33
No, I had no opportunity to manage them	**8.33%**	3
No, I think that it is not particularly useful and cost-effective	**0.00%**	0
Total		**36**

Q9 **In your opinion, which of the following categories of patients could have a major benefit from a medical intervention for rhythm disturbances (i.e. control of rate/rhythm in atrial fibrillation, pacemaker implantation) (multiple answers)?**

Answered: 35   Skipped: 6
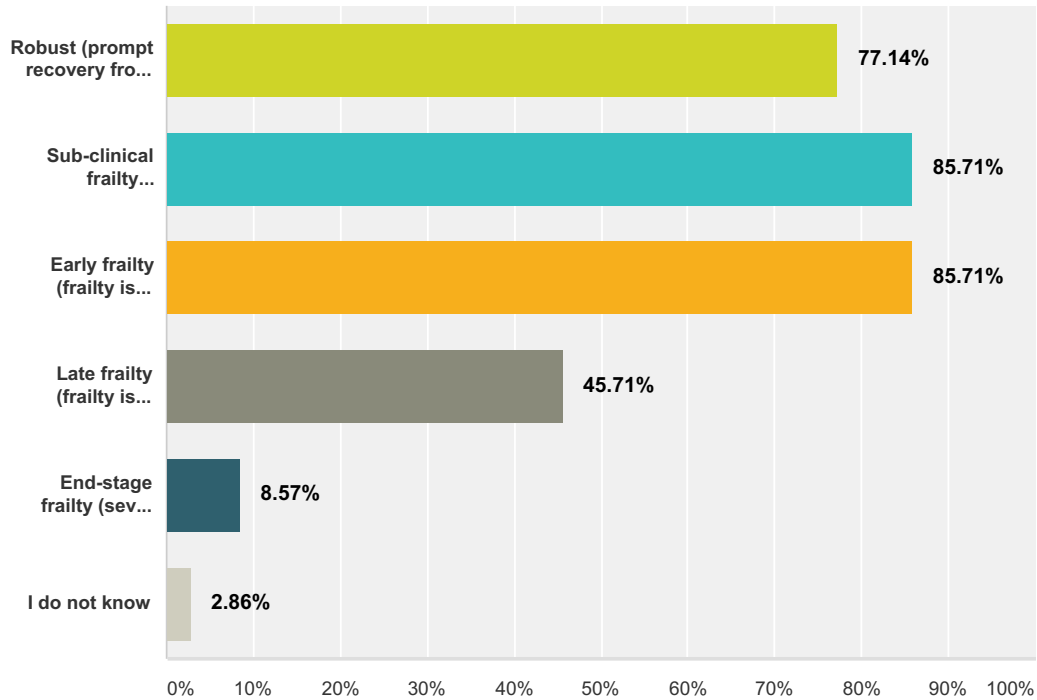
Answer Choices	Responses	
Robust (prompt recovery from stressors)	**77.14%**	27
Sub-clinical frailty (resilient, with slow/incomplete recovery from stressors)	**85.71%**	30
Early frailty (frailty is manifest, poor tolerance to stressors, no disability)	**85.71%**	30
Late frailty (frailty is manifest, poor tolerance to stressors, very slow recovery, disability development)	**45.71%**	16
End-stage frailty (severe frailty is manifest, dependency development, high risk of death in the next 12 months)	**8.57%**	3
I do not know	**2.86%**	1
Total Respondents: 35		

Q10 Could an Arrhythmia team exert a positive role in the decision making process of frail individuals with cardiac rhythm disturbances?
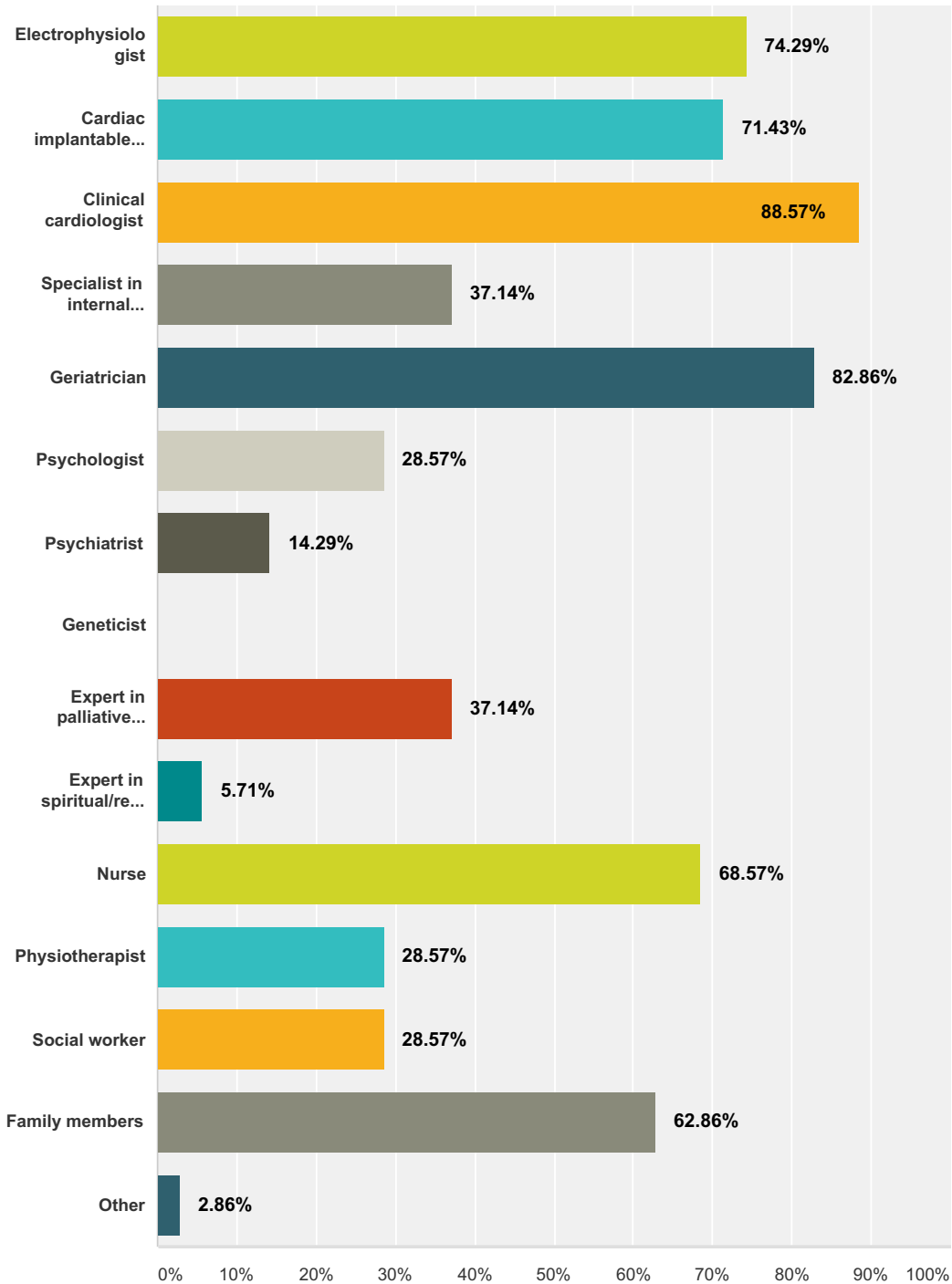
Answered: 35   Skipped: 6
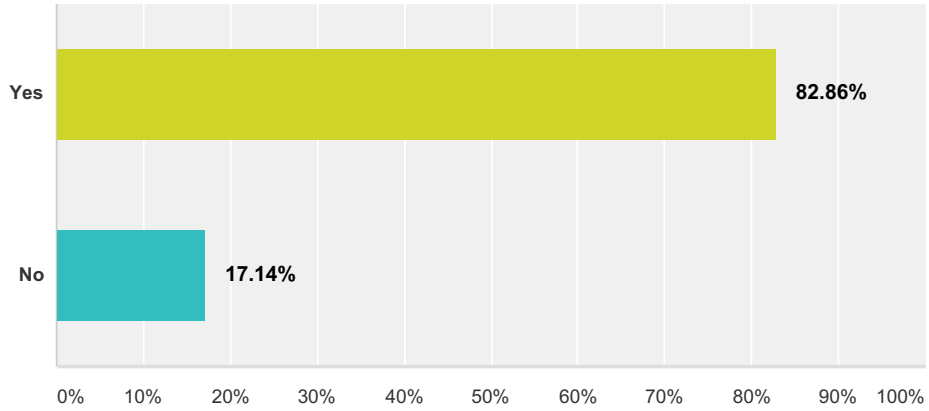
Answer Choices	Responses	
Yes	82.86%	29
No	17.14%	6
Total		**35**

Q11 Who should be involved in the Arrhythmia Team to treat frail subjects? (Multiple answers)

Answered: 35   Skipped: 6

Answer Choices		Responses	
Electrophysiologist		**74.29%**	26

Cardiac implantable electrical device (CIED) specialist	**71.43%**	25
Clinical cardiologist	**88.57%**	31
Specialist in internal medicine	**37.14%**	13
Geriatrician	**82.86%**	29
Psychologist	**28.57%**	10
Psychiatrist	**14.29%**	5
Geneticist	**0.00%**	0
Expert in palliative medicine	**37.14%**	13
Expert in spiritual/religious matters	**5.71%**	2
Nurse	**68.57%**	24
Physiotherapist	**28.57%**	10
Social worker	**28.57%**	10
Family members	**62.86%**	22
Other	**2.86%**	1
Total Respondents: 35		

## Q12 In your opinion, what is the best strategy to manage atrial fibrillation in a frail patient?

Answered: 35   Skipped: 6
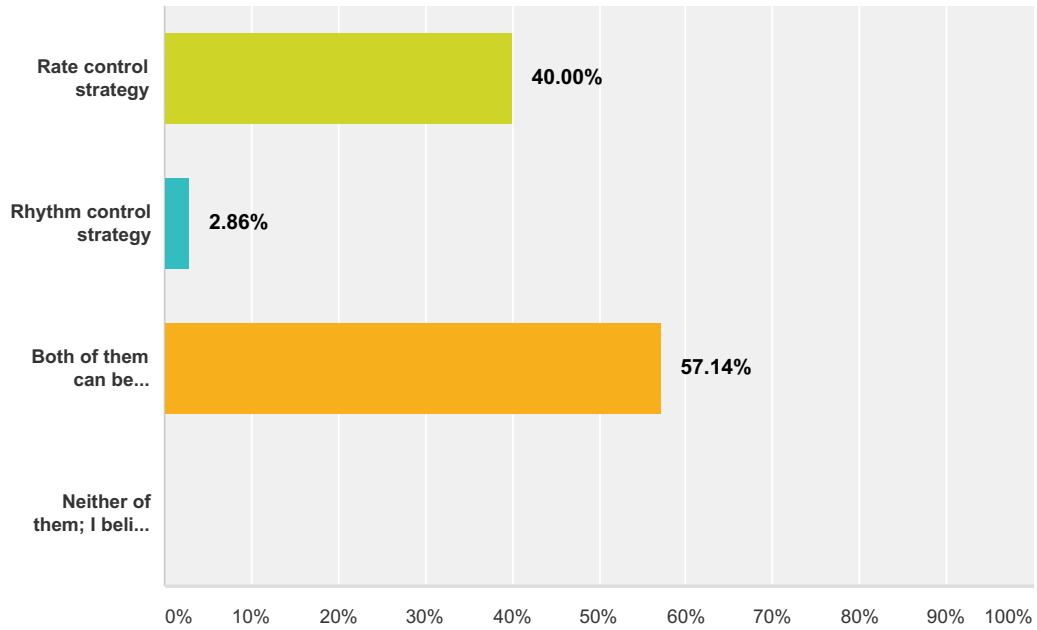
Answer Choices	Responses	
Rate control strategy	**40.00%**	14
Rhythm control strategy	**2.86%**	1
Both of them can be considered, according to clinical situation	**57.14%**	20
Neither of them; I believe it is too late to have some clinical benefit	**0.00%**	0
Total		**35**

Q13 Which strategy do you prefer to prevent thromboembolic complications in a frail patient with atrial fibrillation? (Multiple answers)

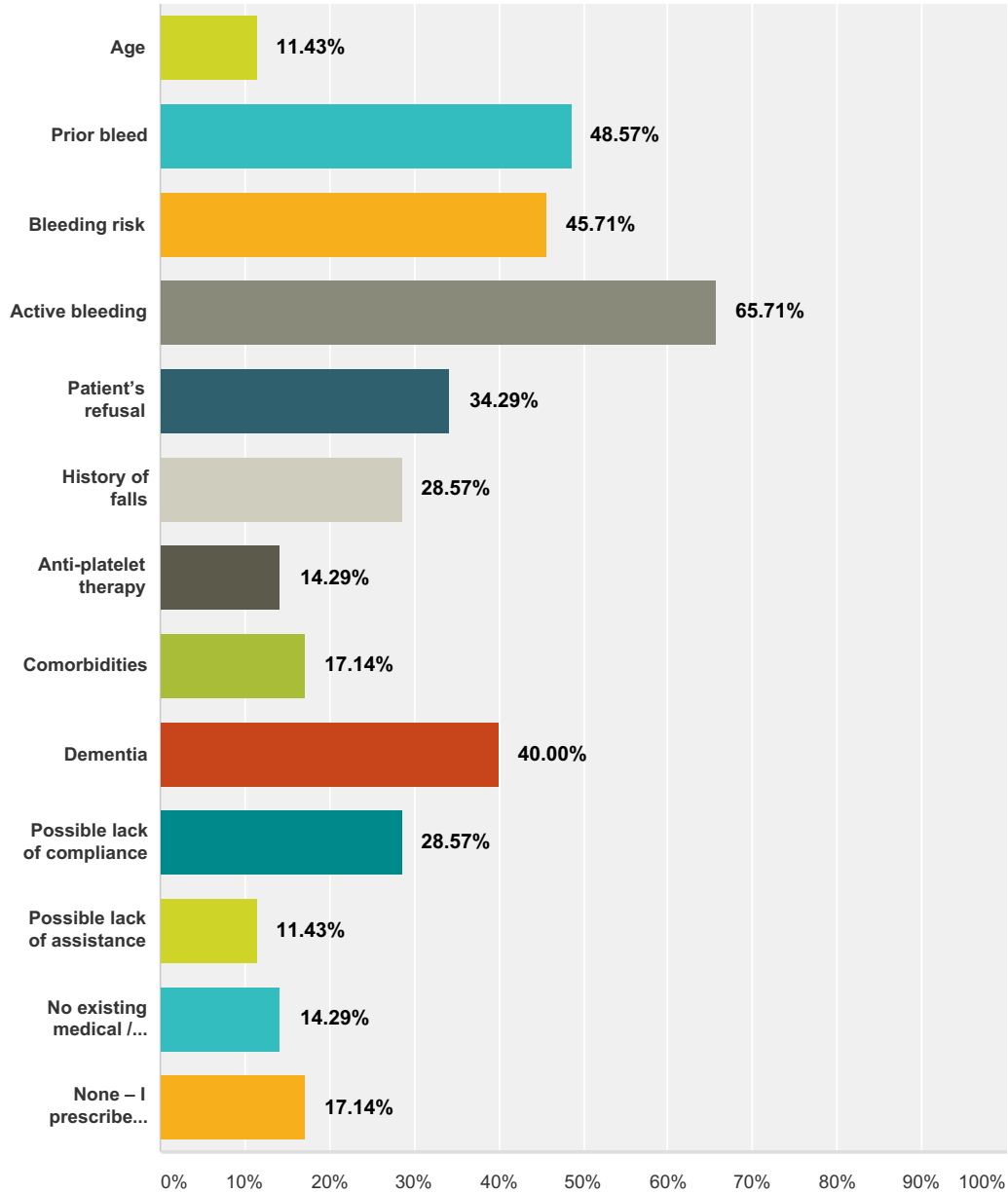Answered: 35   Skipped: 6
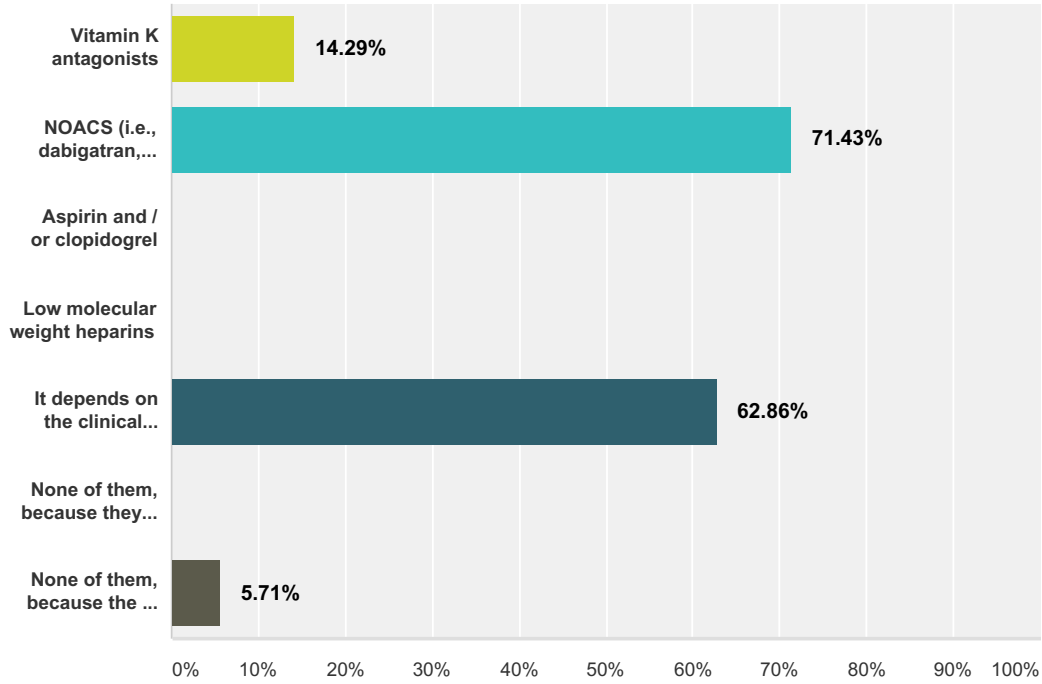
Answer Choices	Responses	
Vitamin K antagonists	**14.29%**	5
NOACS (i.e., dabigatran, rivaroxaban, apixaban or edoxaban)	**71.43%**	25
Aspirin and / or clopidogrel	**0.00%**	0
Low molecular weight heparins	**0.00%**	0
It depends on the clinical characteristics of the patient (i.e., renal function, weight, patients' compliance and the ability to repeatedly measure INR and / or to adjust the dose of VKA, etc.)	**62.86%**	22
None of them, because they are not safe in frail patients	**0.00%**	0
None of them, because the net clinical benefit may not be positive in frail patients	**5.71%**	2
Total Respondents: 35		

Q14 In your daily practice, what are the most important reasons not to prescribe an anticoagulant drug to a frail patient with atrial fibrillation? (Multiple answers)

Answered: 35   Skipped: 6

Age	11.43%
Prior bleed	48.57%
Bleeding risk	45.71%
Active bleeding	65.71%
Patient's refusal	34.29%
History of falls	28.57%
Anti-platelet therapy	14.29%
Comorbidities	17.14%
Dementia	40.00%
Possible lack of compliance	28.57%
Possible lack of assistance	11.43%
No existing medical /...	14.29%
None – I prescribe...	17.14%

Answer Choices	Responses	
Age	**11.43%**	4
Prior bleed	**48.57%**	17
Bleeding risk	**45.71%**	16
Active bleeding	**65.71%**	23

Patient's refusal	**34.29%**	12
History of falls	**28.57%**	10
Anti-platelet therapy	**14.29%**	5
Comorbidities	**17.14%**	6
Dementia	**40.00%**	14
Possible lack of compliance	**28.57%**	10
Possible lack of assistance	**11.43%**	4
No existing medical / logistic justification	**14.29%**	5
None – I prescribe anticoagulants as much as possible to these patients	**17.14%**	6
Total Respondents: 35		

Q15 In your opinion, does a history of falls represent an absolute contraindication to anticoagulant therapy in a frail atrial fibrillation patient?

Answered: 35   Skipped: 6
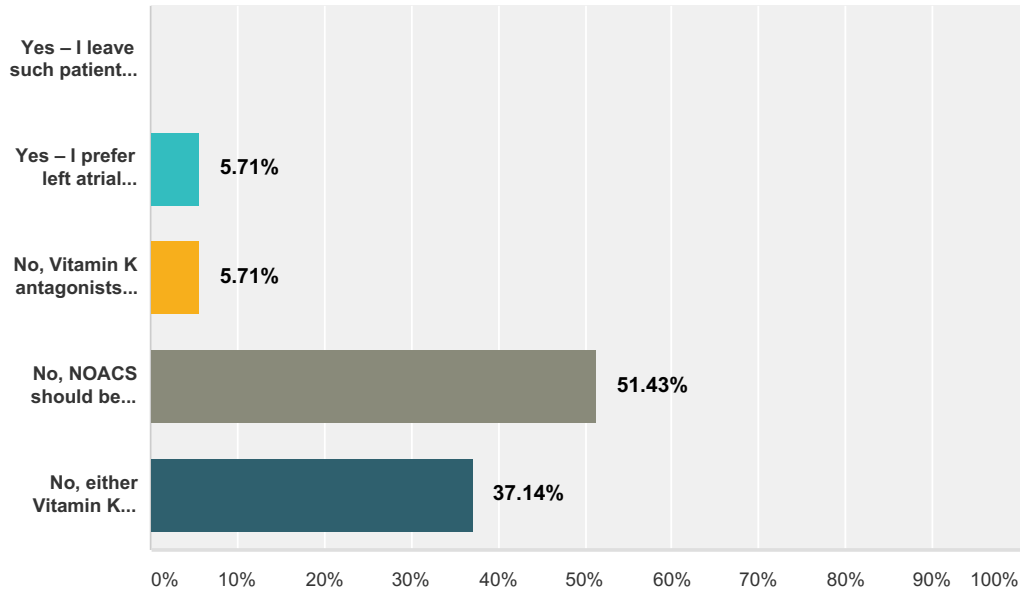
Answer Choices	Responses	
Yes – I leave such patients without any protection against stroke	**0.00%**	0
Yes – I prefer left atrial appendage closure in such patients	**5.71%**	2
No, Vitamin K antagonists should be preferred	**5.71%**	2
No, NOACS should be preferred	**51.43%**	18
No, either Vitamin K antagonists or NOACS can be used	**37.14%**	13
Total		**35**

Q16 Thinking of all procedures which were performed in your centre in the last 12 months, what was the proportion of pre-frail or frail patients who received a cardiac implantable electrical device (CIED)? Please give your estimate
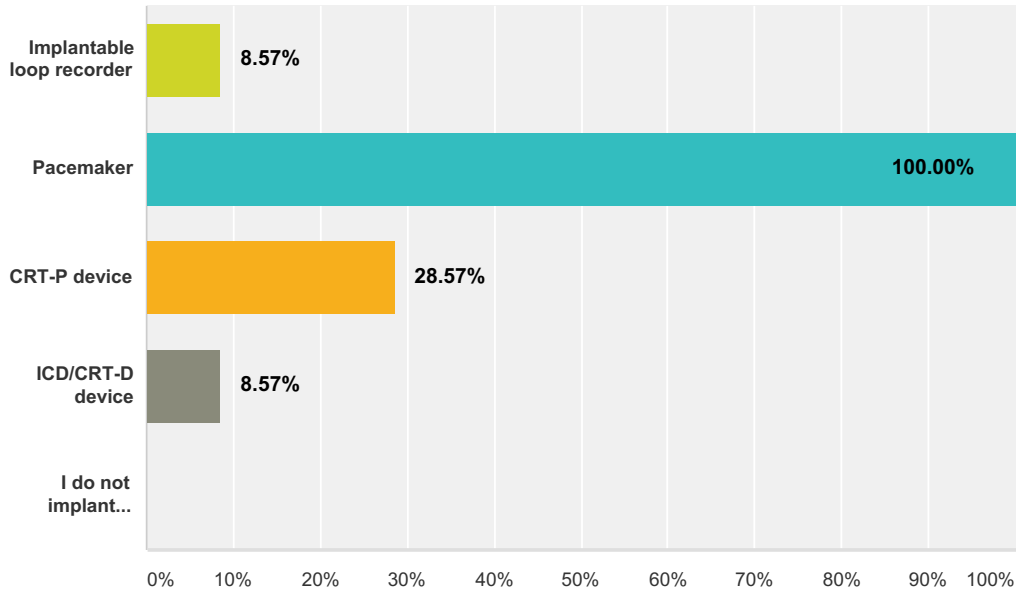
Answered: 35   Skipped: 6
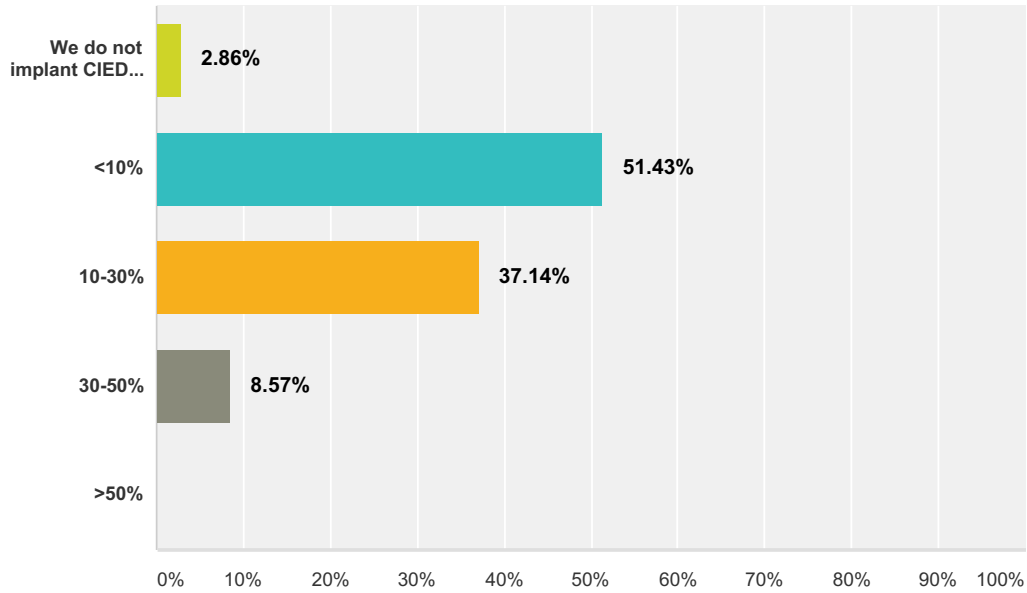
Answer Choices	Responses	
We do not implant CIED in frail patients	**2.86%**	1
<10%	**51.43%**	18
10-30%	**37.14%**	13
30-50%	**8.57%**	3
>50%	**0.00%**	0
Total		**35**

Q17 Which device do you use more frequently in frail/pre-frail individuals (multiple answers)?

Answered: 35   Skipped: 6

Answer Choices	Responses	
Implantable loop recorder	**8.57%**	3
Pacemaker	**100.00%**	35
CRT-P device	**28.57%**	10
ICD/CRT-D device	**8.57%**	3
I do not implant frail/pre-frail individuals	**0.00%**	0
Total Respondents: 35		

Q18 Do you think that the possibility to monitor patient's activity by the software of CIEDs might be of help to discover frailty development and to rapidly implement therapeutic strategies?
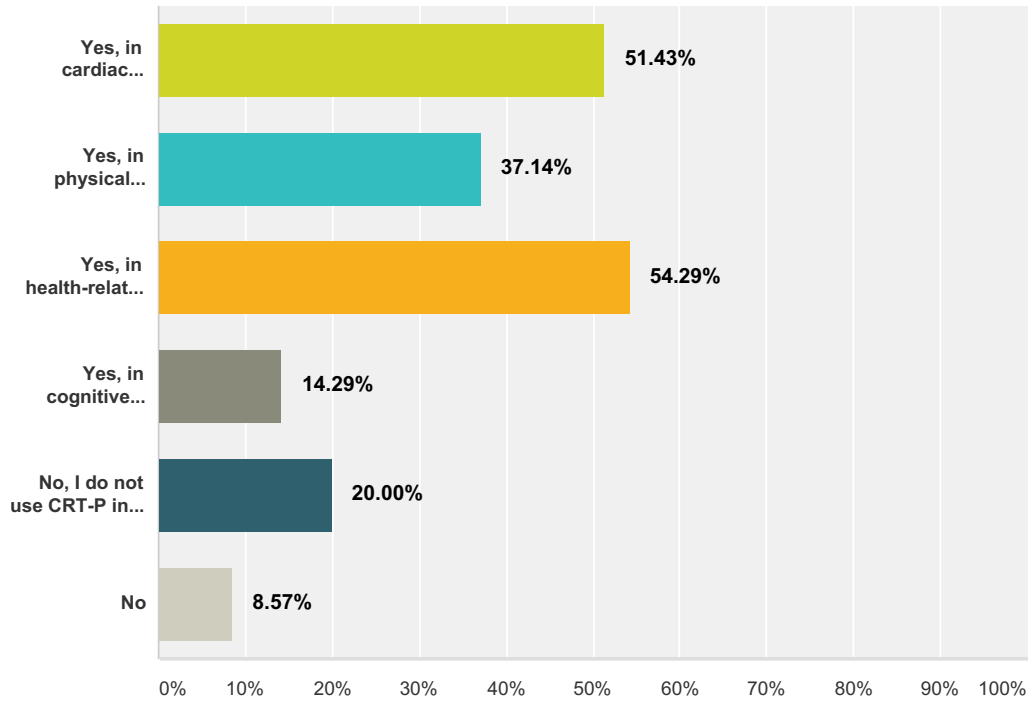
Answered: 35   Skipped: 6
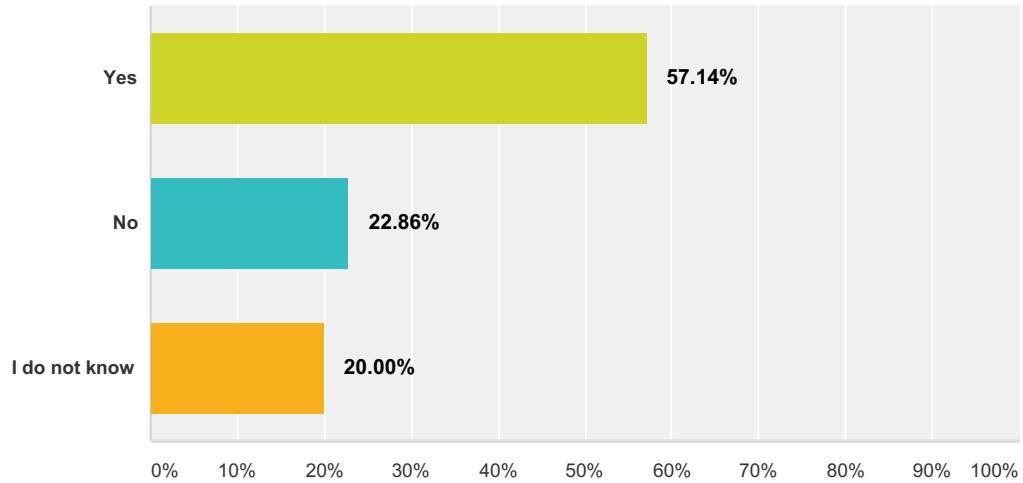
Answer Choices	Responses	
Yes	**57.14%**	20
No	**22.86%**	8
I do not know	**20.00%**	7
Total		**35**

Q19 Have you noticed CRT-P mediated improvements in frail elderly patients (multiple answers)?

Answered: 35   Skipped: 6

Answer Choices	Responses	
Yes, in cardiac performance	**51.43%**	18
Yes, in physical performance, with reduction of disability	**37.14%**	13
Yes, in health-related quality of life	**54.29%**	19
Yes, in cognitive performance	**14.29%**	5
No, I do not use CRT-P in frail elderly patients	**20.00%**	7
No	**8.57%**	3
Total Respondents: 35		

Q20 Do you think that CRT-P could be as useful in elderly "frail" patients as in younger and healthier ones?
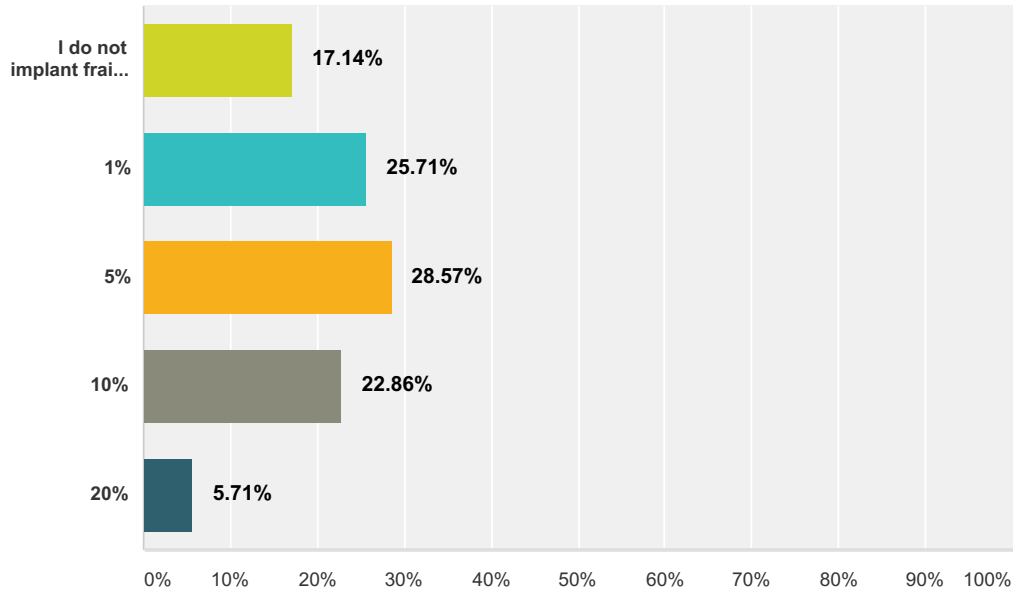
Answered: 35   Skipped: 6
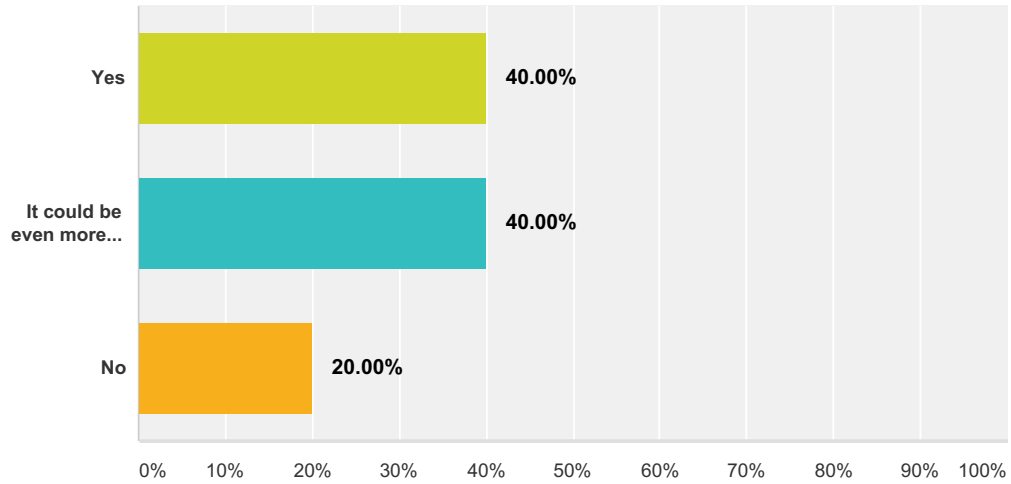
Answer Choices	Responses	
Yes	**40.00%**	14
It could be even more useful than CRT-D – because of cost issues and lower risk of inappropriate therapies (i.e., due to atrial fibrillation, etc.)	**40.00%**	14
No	**20.00%**	7
Total		35

Q21 In your laboratory, what is the prevalence of frail patients receiving an ICD on the total ICD implanted population?
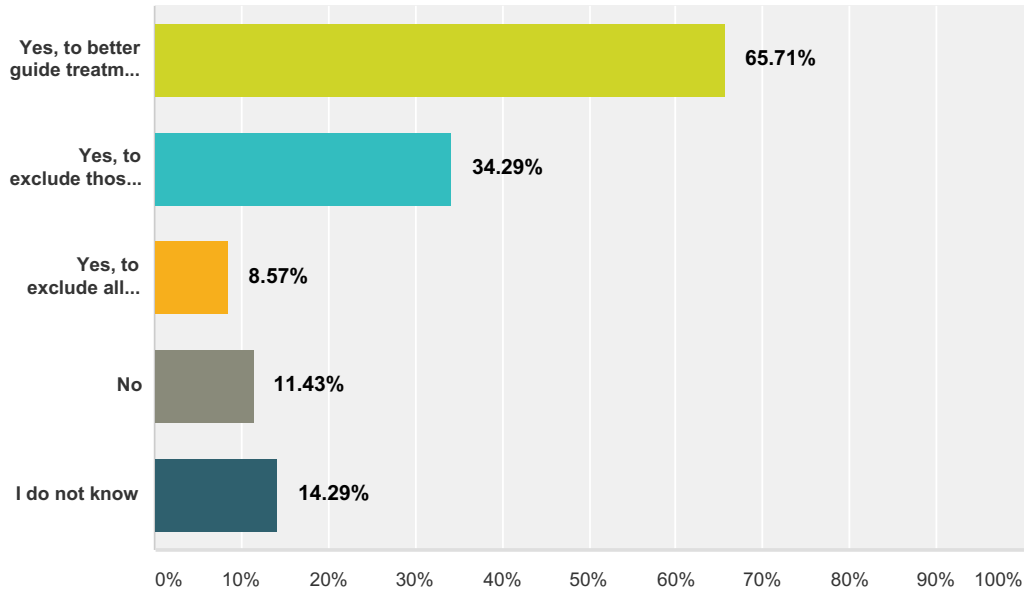
Answered: 35   Skipped: 6

Answer Choices	Responses	
I do not implant frail patients	**17.14%**	6
1%	**25.71%**	9
5%	**28.57%**	10
10%	**22.86%**	8
20%	**5.71%**	2
Total		35

Q22 Do you think that the use of a tool to quickly (10 minutes) assess the presence of frailty in patients with an ICD indication could be useful? (multiple answers)

Answered: 35   Skipped: 6

Answer Choices	Responses	
Yes, to better guide treatment (i.e., use of CRT, optimization of medical therapy, etc.)	**65.71%**	23
Yes, to exclude those subjects at higher risk of a futile and expensive procedure (i.e., device upgrade, substitution of a device, etc.)	**34.29%**	12
Yes, to exclude all frail individuals from device implantation and other related procedures	**8.57%**	3
No	**11.43%**	4
I do not know	**14.29%**	5
Total Respondents: 35		