

Response to Letter Regarding Article, “Percutaneous Left-Ventricular Support With the Impella-2.5-Assist Device in Acute Cardiogenic Shock Results of the Impella-EUROSHOCK- Registry”

We appreciate the comments by Dr Maini regarding our recent article on outcome of percutaneous left-ventricular support with the Impella-2.5 assist device in acute cardiogenic shock.¹ In this article, we summarize the results of real-world Impella-2.5 use in Europe outside of randomized trials, where the device is frequently used as last resort option in patients unresponsive to vasopressors, revascularization, and intra-aortic balloon pump support.

We agree with Dr Maini in emphasizing the fact that the disappointing data of the EUROSHOCK Registry likely reflects the selection of the most severely ill patients who have failed first-line treatment of cardiogenic shock. The lack of a control group in this registry hampers definite conclusions on efficacy of Impella-2.5 support at this point. However, decrease in plasma lactate after the beginning of Impella support suggests at least partial reversal of hypoperfusion and supports the hemodynamic efficacy of the device. As suggested in the article, earlier institution of support and rapid escalation to more powerful assist devices could be a recommended strategy in patients failing to improve, which, however, is currently rather based on experience than actual data.^{1,2}

Disclosures

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Alexander Lauten, MD

Department of Internal Medicine I
(Cardiology, Angiology, and Pneumology)
Friedrich-Schiller University
Jena, Germany

Annemarie E. Engström, MD

Department of Cardiology
Academic Medical Center
University of Amsterdam
Amsterdam, The Netherlands

Christian Jung, MD

Department of Internal Medicine I
(Cardiology, Angiology, and Pneumology)
Friedrich-Schiller University
Jena, Germany

Klaus Empen, MD

Department of Cardiology
Ernst-Moritz-Arndt University
Greifswald, Germany

Paul Erne, MD

Division of Cardiology
Luzerner Kantonsspital
Luzern 16, Switzerland

Stéphane Cook, MD

Stephan Windecker, MD
Swiss Cardiovascular Center
Bern, Switzerland

Martin W. Bergmann, MD

Department of Cardiology

Asklepios Klinik St. Georg
Hamburg, Germany

Roland Klingenberg, MD

Thomas F. Lüscher, MD
Department of Cardiology
University Hospital Zurich
Zurich, Switzerland

Michael Haude, MD

Städtische Kliniken Neuss
Lukaskrankenhaus
Neuss, Germany

Dierk Rulands, MD

Kliniken Maria Hilf
Moenchengladbach, Germany

Christian Butter, MD

Heart Center Brandenburg
Bernau, Germany

Bengt Ullman, MD

Department of Cardiology
Södersjukhuset
Stockholm, Sweden

Laila Hellgren, MD

University Hospital Uppsala
Uppsala, Sweden

Maria Grazia Modena, MD

University Hospital of Modena
Modena, Italy

Giovanni Pedrazzini, MD

Division of Cardiology
Fondazione Cardiocentro Ticino
Lugano, Switzerland

Jose P.S. Henriques, MD

Department of Cardiology
Academic Medical Center
University of Amsterdam
Amsterdam, The Netherlands

Hans R. Figulla, MD

Markus Ferrari, MD

Department of Internal Medicine I
(Cardiology, Angiology, and Pneumology)
Friedrich-Schiller University
Jena, Germany

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Alexander Lauten, Annemarie E. Engström, Christian Jung, Klaus Empen, Paul Erne, Stéphane Cook, Stephan Windecker, Martin W. Bergmann, Roland Klingenberg, Thomas F. Lüscher, Michael Haude, Dierk Rulands, Christian Butter, Bengt Ullman, Laila Hellgren, Maria Grazia Modena, Giovanni Pedrazzini, Jose P.S. Henriques, Hans R. Figulla and Markus Ferrari

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