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GLOBAL SURVEY SHOWS PHYSICIANS QUESTION SAFETY OF TREATMENT OPTIONS FOR COVID-19 PATIENTS WITH HEART RHYTHM DISORDERS

The Heart Rhythm Society's COVID-19 Rapid Response Task Force helps answer call for guidance during pandemic

WASHINGTON, D.C., June 16, 2020 – In response to the COVID-19 pandemic, the Heart Rhythm Society (HRS) led a global cross-sectional survey of more than 1,100 electrophysiologists (EPs) to better understand the prevalence of cardiac arrhythmias and treatment strategies in hospitalized COVID-19 patients. Executed and analyzed by HRS Communication Committee, the survey results confirmed adverse cardiac events due to COVID-19 treatments, ranging from benign to potentially life-threatening. The [full survey findings](#) are published in the June issue of the Journal of Interventional Cardiac Electrophysiology (JICE).

The data, which revealed 76 percent of EPs reported having COVID-19 patients in their hospital, underscores the need to further address the challenges facing the EP community and gain clarity around safe treatment plans for COVID-19 patients with heart rhythm disorders. To answer this evolving need, HRS launched [COVID-19 Challenges & Solutions](#) to share timely and reliable recommendations and guidance developed and curated by HRS's COVID-19 Rapid Response Task Force (Task Force). The Task Force aims to guide electrophysiology patient care and recommend best practices in this complex time when many physicians are navigating reopening procedures and adopting virtual-care and telemedicine models to deliver optimal care.

“The impact of COVID-19 on the electrophysiology field cannot be overstated – it has fundamentally altered how many physicians are approaching care delivery and management,” said Christine Albert, MD, MPH, FHRS president of the Heart Rhythm Society, founding Chair of the Department of Cardiology and the Lee and Harold Kapelovitz Distinguished Chair in Cardiology within the Smidt Heart Institute at Cedars-Sinai Medical Center. “There is still much we don’t know about COVID-19, but as many EPs are re-deployed to help care for COVID-19 patients, it is vital that we continue to provide guidance needed to deliver the safest and most effective patient outcomes.”

To coordinate efforts with the broader cardiology community, HRS leadership and the Task Force played an instrumental role in developing multi-societal recommendations with key organizations including the American Heart Association (AHA) and the American College of Cardiology (ACC). Notably, the societies created [guidance on conducting EP procedures](#) during the peak pandemic, which was published simultaneously by Circulation and Heart Rhythm. In addition, HRS collaborated with APHRS, EHRA, LAHRS, ACC and AHA to provide [guidance on monitoring](#). HRS also worked alongside 15 North American Societies to provide [guidance on the safe reintroduction of cardiovascular procedures](#) as communities begin to reopen.

“The HRS COVID-19 Rapid Response Task Force mobilized quickly to help address the changing needs and unique issues facing our members treating patients each day,” said Andrea Russo, MD, FHRS, Task Force chair, director of Electrophysiology and Arrhythmia Services at Cooper University Hospital and director of the CCEP Fellowship program and Professor of Medicine at Cooper Medical School of Rowan University. “During these unprecedented times, the ‘silver lining’ is the incredible collaboration among societies and the resilience among volunteers who worked together toward our common goal – providing the best care for patients with heart rhythm disorders around the globe.”

Key Survey Results

- The global survey, conducted March 27-April 13, 2020, reached a total of 1,197 respondents representing 76 countries and six continents
- 76 percent of respondents reported having COVID-19 patients in their hospital



- 31 percent of respondents reported regular use of hydroxychloroquine/chloroquine (HCQ) + azithromycin (AZM)
- 12.3 percent of respondents reported having to discontinue therapy with HCQ +AZM due to significant QTc prolongation
- 4.1 percent of respondents reported cases of Torsade de Pointes in patients on HCQ/chloroquine and AZM
- Amiodarone was the most common anti-arrhythmic drug used for ventricular arrhythmia management
- Atrial fibrillation was the most commonly reported tachyarrhythmia (21 percent)
- Severe sinus bradycardia and complete heart block were the most common bradyarrhythmia (8 percent)
- Ventricular tachycardia/ventricular fibrillation arrest and pulseless electrical activity were reported by 4.8 percent and 5.6 percent of respondents, respectively

The findings of the survey reinforce the need for large, prospective studies to better define arrhythmic manifestations, as well as the safety and efficacy of treatments in COVID-19 patients. The Task Force has provided real-time updates and guidance to help EPs deliver patient care during the COVID-19 pandemic.

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About the Heart Rhythm Society

The Heart Rhythm Society is the international leader in science, education, and advocacy for cardiac arrhythmia professionals and patients and is the primary information resource on heart rhythm disorders. Its mission is to improve the care of patients by promoting research, education, and optimal health care policies and standards. Incorporated in 1979 and based in Washington, D.C., it has a membership of more than 7,000 heart rhythm professionals in more than 70 countries around the world. For more information, visit [HRSONline.org](https://www.hrsonline.org).