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Telemonitoring: A bridge to personalized medicine

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An increasing number of heart failure patients are treated with a number of complex devices, i.e. cardiac resynchronization therapy (CRT). Recently completed and ongoing clinical trials such as MADIT-CRT and EchoCRT provide evidence of a growing number of CRT patients, in need of individualised treatment. Rising demand for implantable cardiac devices and the simultaneous need for increased efficiency as well as enhanced patient comfort and safety significantly increase the need for remote monitoring technology.

Despite the wide availability of telemonitoring systems in many European countries, currently only around 1% of patients with implantable cardiac devices in Europe are being monitored remotely. The majority are still being followed up by conventional in-office follow-up schemes. By the end of 2008, approximately 23.000 European patients were being monitored remotely.

Telemonitoring enables the safe reduction of traditional face to face follow-ups, thereby reducing physicians' workload by focusing on individual patients who need clinical attention. Telemonitoring studies such as TRUST, REFORM and ISMOS have shown that the number of regular in-office medical check-ups can be reduced by about 50% without risking patient's safety.

It also enables early detection of silent, asymptomatic arrhythmias allowing for earlier intervention compared to conventional follow-ups, since all patient data are updated on a daily basis. This facilitates a need-

based and individualised patient aftercare, complying with the current HRS/EHRA recommendations and giving patients freedom, mobility, and a sense of relief, knowing that their heart is under continuous surveillance.

Source: European Society of Cardiology (news : web)

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