RESULTS

This study included 122 patients referred to pacemaker follow up clinics for follow up of their permanent VVI pacemakers.

Demographic characteristics of all patients:

- The mean age of patients was 66.1 ± 11 years.
- 7 patients were less than 40 years old, 54 patients were older than 40 years and less than 70 years old, and 51patients were more than 70 years old.
 - 61 patients were males and 61 patients were females.

Age(years)	Mean ± SD	66.1 ± 11.
Sex	Male	61
	Female	61

Table (1) Demographic characteristics of all patients

Table (1): shows that the mean age of patients was 66.1 ± 11 years, the majority of patients 75(61.5%) were >65 years old (table 2), 61 patients were _____ females.

AGE IN YEARS	FREQU	Percent of		
ILAKS	Total no.	M	F	age
< 40	7	4	3	5.7%
40-49	6	3	3	4.9%
50-59	13	5	8	10.7%
60-69	45	22	23	36.9%
≥ 70	51	27	24	41.8%

Table 2: distribution of patients in different age groups

Relation between atrial rhythm and sex (table4):

Group I: included 86 male patients (74.8%) and 29 female patients (25.2%). Group II: included 15 male patients (88.2%) and 2 female patients (11.8%).

•There was no statistically significant difference between patients in both groups as regard sex (p=0.22) (table 4).

Electrocardiographic findings:

- All the patients were dependant on their pacemakers and had a preimplant atrial sinus rhythm.
 - 89 patients (72.5%) had an atrial sinus rhythm at the time of follow up.
 - 33 patients (27.5%) had AF at the time of follow up.

Patients were divided according to their atrial rhythm into two groups:

Group I: included patients with atrial sinus rhythm at the time of follow up. They were 89 (72.5%) patients.

Group II: included patients with AF at the time of follow up. They were 33(27.5%) patients.

Relation between atrial rhythm and age:

			Rhythm groups			P value
			Group I	Group II		
Δ α α	above 65	Count/percent	53(59.6 %)	22(66.7%)	75(61.5 %)	0.067
Age	Below 65	Count/percent	36(4 0.4 %)	11(33.3%)	47(38.5 %)	
		Total Count (% within Age)	89(73 %)	33(27 %)	122(100 %)	

Table (3): comparison between ages in both groups

Table 3 shows that:

Group I: included 36 patients < 65 years (40.4%) and 53 patients>65 years (59.6%).

Group II: included 11 patients < 65 years (33.3%) and 22 patients>65 years (66.7%).

There was slight statistical significant difference between patients in both groups as regard age in which AF increase with increase in age (p=0.067) (table 1).

Relation between Clinical predictors in both groups:

Clinical Characteristics	Group I sinus		Group II AF		Total no.	P value
IHD	26	29.2%	11	33.3%	37(30.3%)	0.660
Hypertension	32	36.0%	10	30.3%	42(34.4%)	0.559
DM	12	13.5%	6	18.2%	18(14.7%)	0.516
New onset H.F	11	12.4%	7	21.2%	18(14.7%)	0.403
cigarette Smoking	30	33.7%	15	45.5%	45(36.8%)	0.232

Table (4) Clinical predictors in both groups

Table (4) and chart (3) show that:

There were 45(36.8%) patients who were cigarette smokers, 37 (30.3%) patients with IHD, 42(34.4%) patient who were hypertensives, 18(14.7%) patients with DM, 18(14.7%) patients with new onset heart failure after implantation of their pacemaker.

Group I: included 26 (29.2%) patients with IHD, 32(36%) patients with hypertension, 12(13.5%) patients with DM, 11(12.4%) patients with new onset H.F and 30(33.7%) who were cigarette smokers.

Group II: included 11(33.3%) patients with IHD, 10(30.3%) patients with HTN, 6(18.2%) patients with DM, 7(21.2%) patients with new onset H.F and 15(45.5%) who were cigarette smokers.

• P value shows that there was no statistical significance among patients in both groups regarding these clinical predictors (table 4).

Relation between Echocardiographic features of both groups:

	Group I	Group II	P value
LV Ejection fraction	53.52 ± 11.18	55.42 ± 9.88	0.210
LVEDd	54.27 ± 7.91	58.2 ± 10.12	0.605
Left atrial dimensions	36.81 ± 4.52		
MR			

Table (5) Echocardiographic features of both groups:

Table (5) shows that:

- **Group I:** had a mean LV EF of $53.52\% \pm 11.18\%$, a mean LV end diastolic dimensions of $54.27 \text{ mm} \pm 7.91$, and a mean LA dimensions of 36.81 ± 4.52 .
- **Group II:** had a mean LV EF of $55.42\% \pm 9.88$, a mean LV end diastolic dimensions of $58.2 \text{ mm} \pm 10.12$, and a mean LA dimensions of $38.09 \text{ mm} \pm 5.28$.

P value shows that there was no statistical significance among patients in both groups (table 5).

		LAG			
			Below 40 mm	Above 40 mm	Total
Rhythm	Group I	Count(percent)	62(69.7 %)	27(30.3 %)	89(100%)
groups	Group II	Count(percent)	21(63.6%)	12(36.4%)	75(100%)
Tota	l Count		83	39	122

Table (6) Relation between Rhythm and L A dimension

Table (6) shows that:

Group I: included 62(69.7 %) patients had normal LA diameter 40 mm or less 27(30.3 %) patients had dilated LA diameter > 40 mm.

Group II: included 21(63.6%) patients had normal LA diameter 40 mm or less and 12(36.4%) patients had dilated LA diameter > 40 mm.

It was found that group II patients had a significantly larger LA size than group I (p=0.034) (table 4).

Relation between both groups and pacing parameters:

Duration of pacing	Group I		Group II		total	P value
	no.	%	no.	%		
Early < 1 yr	11	12.4%	2	6.1%	13(11%)	
Intermediate[1-5] yrs	63	70.7%	13	39.4%	76(62%)	
Late > 5 yrs	15	16.9%	18 54.5%		33(27%)	
Mean duration of pacing						0.001
Total	89	100%	33	100%	122	

Table (7): Relation between both groups and duration of pacing

From table (7) and figure (5,6) we see that:

There were 13(11%) patients who were paced for less than 1 year, 11(12.4%) patients in sinus group, 2(6.1%) in AF, 76(62%) patients were paced for a period of 1-5 years, 63(70.7%) patients of them were in sinus rhythm and 13(39.4%) patients in AF, 33(27%) patients were paced for more 5 years, 15(16.9%) patients of them were in sinus rhythm and 18(54.5%) patients with AF.

The mean duration of pacing was ??? for group I and ???for group II.

It was found that AF is highly significant in patients with prolonged duration of pacing, the longer the duration, the higher the incidence of AF (p=0.001) (table 6).

Multivariate analysis of age in relation to duration of pacing:

Age Group Pacing dur		D : 1 ::	Rhyth		
		Pacing duration	AF	Sinus	P value
duration_group	<1yr	0	8		
	duration_group	>1yrs and <5yrs	3	25	
·		>5yrs	2	11	
	Total	5	44	.523	
1		<1yrs	1	13	
>65 yrs	duration_group	>1yrs and <5yrs	4	41	
·		>5yrs	7	15	
	Total		12	69	.031

A. Patients less than 65 years old (49 patients).

B. Group I: included 8 patients (18.2%) paced for less than 1 year, 25 patients (56.8%) paced for more than 1 and less than 5 years and 11 patients (25%) paced for more than 5 years.

Group II: included no patients (0%) paced for less than 1 year, 3 patients (60%) paced for more than 1 and less than 5 years and 2 patients (40%) paced for more than 5 years.

(P=0.523)

C. Patients more than 65 years old (81patients). Group I: included 13 patients (18.8%) paced for less than 1 year, 41 patients (59.4%) paced for more than 1 and less than 5 years and 15 patients (21.7%) paced for more than 5 years.

Group II: included 1 patient (8.3%) paced for less than 1 year, 4 patients (33.3%) paced for more than 1 and less than 5 years and 7 patients (58.3%) paced for more than 5 years.

(P=0.031)

It was found that the age factor does not maintain the relation between the duration of pacing and incidence of AF. The longer the duration of pacing, the higher the incidence of AF only in patients older than 65 years

Site of pacing	Group I		Group II		Total	P value
RV apex	65	73%	27	81.8%	92	
RVOT	24	27%	6	18.2%	30	
Total	89	100%	33	100%	122	
Expected battery life (mean / SD)	8.8 ± 3.1		5.65 ± 2.8			0.02

Table (7) Relation between pacer parameters in both groups.

Table (7) shows that:

Group 1: included 65 patients (73%) with the site of pacing being RV apex, and 24 patients (27%) being paced from RVOT, the mean expectant battery life was 8.8 ± 3.1 years.

Group II: included 27 patients (81.8%) with the site of pacing being RV apex, and 6 patients (18.2%) being paced from RVOT, the mean expectant battery life was 5.65 ± 2.8 years.

P value shows that there was no statistical significance among patients in both groups regarding the site of pacing, there were a statistical significance regarding the battery life in which patients with AF are associated with less battery life, p=0.02 (table 7).

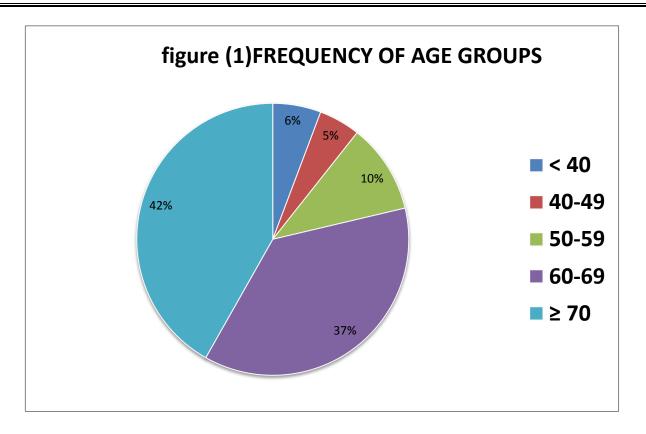
Table (7): Correlation between group II (patients with AF at follow up) and anticoagulation:

	Anticoagulation	No anticoagulation	P value
Group I	3(9%)	30(91%)	

Only 3 (9 %) patients who had AF was anticoagulated. 25 out of 33 patients met the high risk criteria for throboembolism, and there was nothing denoting contraindication to anticoagulant either by history or in their medical records.

Master table

Demographic charac.		Group I			Group II		P Value
Age (mean) / St. dev.		65.9 ±		11	66.4	± 14	0.067
Sex (%) M/F		50.6% 49		9.4%	48.5%	51.5%	0.838
Clinical predictors							
I.H.D. count / percent.		26	29	9.2%	11	33.3%	0.660
HTN count / percent		32	30	6.0%	10	30.3%	0.559
DM count / percent		12	13	3.5%	6	18.2%	0.516
H.F. count / percent		11	12	2.4%	7	21.2%	0.403
Special habits: Current Smoking		30	33	3.7%	15	45.5%	0.232
Echocardiographic featu	ires						
LV. E.F. mean/ St. dev		53.52		± 11.18	55.42	± 9.88	0.210
LV.D.D. mean/ St. dev		54.27		± 7.91	58.2	± 10.12	0.605
LA.Dim. mean/ St. dev		36.81		± 4.52	38.09	± 5.28	0.074
Pacing data							
Duration of pacing	< 1yr	11		12.4%	2	6.1%	0.001
	1-5yrs	63		70.7%	13	39.4%]
	> 5yrs	15		16.9%	18	54.5%	
Site of pacing	RV apex	65		73%	27	81.8%	0.800
	RVOT	24		27%	6	18.2%	
Expected battery life mean/ St. dev		8.8		± 3.1	5.65	± 2.8	0.020



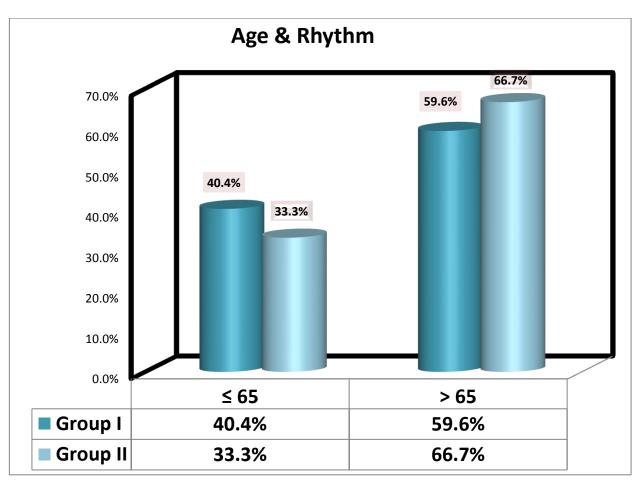


Figure (2) Distribution of age in both groups

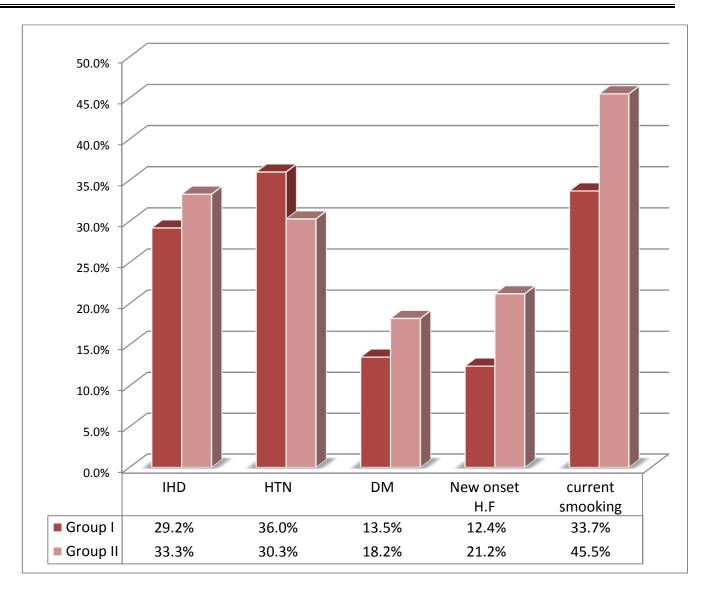


Figure (3): Percentage of clinical Predictors in both groups

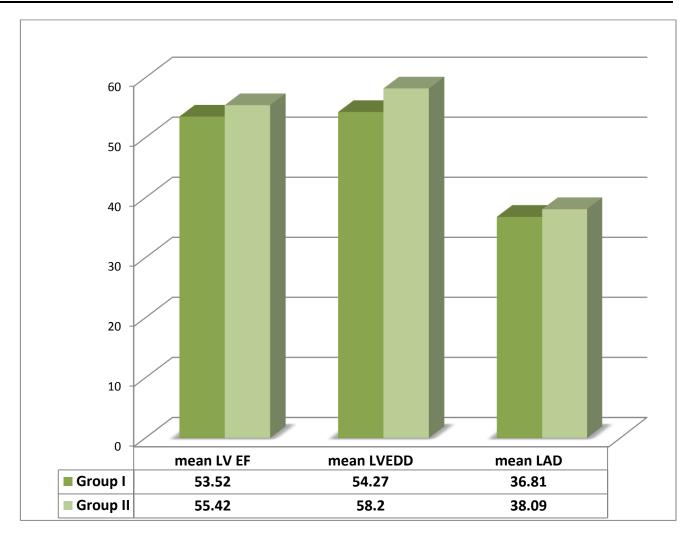


figure (4) Echocardiographic features of both groups

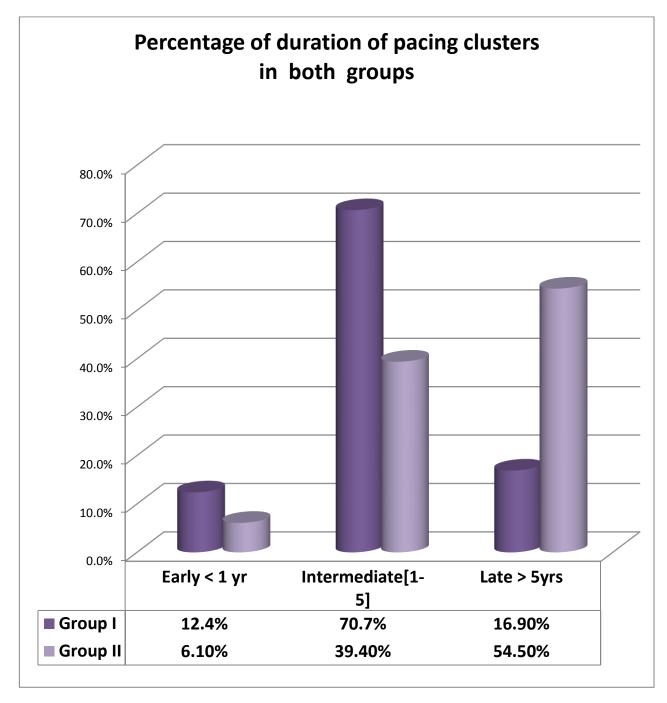


Figure (5): Duration of pacing groups divided into early, intermediate and late.

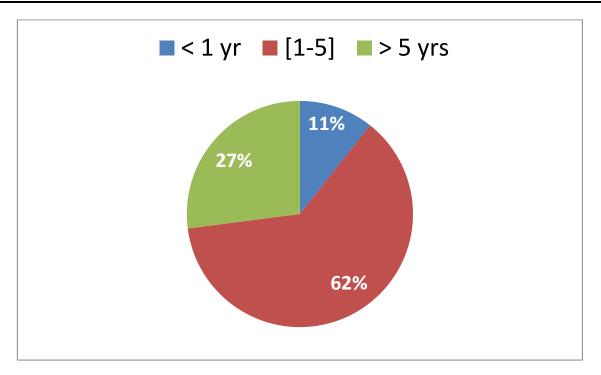


Figure (6) Percent distribution according to pacing duration groups.

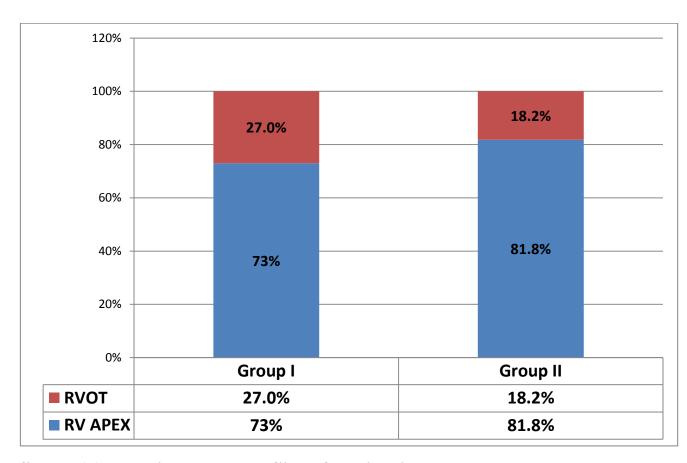


figure (7) Relation between Site of pacing in both groups