# The effect of MultiPoint™ pacing on reverse remodelling and the incidence of ventricular arrhythmias – The MPP VARR Study

Submission date	<b>Recruitment status</b> Suspended	<ul><li>Prospectively registered</li></ul>		
13/02/2017		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
20/02/2017 Last Edited	Completed  Condition category	Results		
		Individual participant data		
23/05/2020	Circulatory System	Record updated in last year		

#### Plain English summary of protocol

Background and study aims

Heart failure patients may benefit from Cardiac Resynchronisation Therapy (CRT), which involves having a special pacemaker implanted to help the heart pump in a more coordinated and efficient way. These pacemakers involve attaching a lead to the heart muscle in within the main heart chambers which delivers current to help the heart beat effectively (pacing leads). Current pacing leads stimulate the main chamber of the heart from one location. Only two thirds of people respond to CRT and this may be due to the need to stimulate the heart from more than one position. Previous attempts at using two pacing leads in the main chamber of the heart have proved technically difficult. Due to new technologies it is now possible to stimulate the heart from more than one site using one lead - MultiPoint™ Pacing (MPP). This lead can also function as a conventional pacing lead if the MPP mode is switched off. The aim of this study is to use this specialised lead in the main chamber of the heart and study the outcomes of patients with the MPP on and MPP off.

#### Who can participate?

Adults who are scheduled to have a CRT device implanted.

#### What does the study involve?

Participants are randomly allocated to one of two groups. Those in the first group have their pacemaker set using the conventional method of pacing the left side of the heart from one location. Those in the second group have their pacemaker set to stimulate the left side from two locations. Participants in both groups are followed up for two years in order to find out how many episodes of irregular heart rate problems participants experience after they have had their pacemakers placed.

What are the possible benefits and risks of participating?

Participants may not benefit from taking part in this study. It is not known as to whether stimulating the main chamber of the heart from two locations will improve the effectiveness of pacemaker treatment. Although early work suggests that this will be beneficial, these benefits have not been proven in large studies yet, and this is one of the reasons that this research is

being carried out. The information from this study may therefore help with the treatment of other patients in the future. There are no notable risks involved with participating.

Where is the study run from?

- 1. St Thomas Hospital (UK)
- 2. Basildon Hospital (UK)

When is the study starting and how long is it expected to run for? October 2016 to October 2020

Who is funding the study? St Jude Medical UK Ltd (UK)

Who is the main contact? Matthew Osmond Matthew.osmond@gstt.nhs.uk

## **Contact information**

#### Type(s)

Public

#### Contact name

Mr Matthew Osmond

#### Contact details

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## Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers 32782

# Study information

Scientific Title

Does MultiPoint™ pacing (MPP) result in a greater rate of reverse remodelling in participants receiving cardiac resynchronisation therapy (CRT) when compared to conventional CRT and to assess if the rate of ventricular arrhythmias is affected with MPP?

#### Acronym

MPP VARR

#### Study objectives

MultiPoint™ Pacing (MPP) will increase the proportion of responders to Cardiac Resynchronisation Therapy (CRT) and this will also result in a reduction in the frequency of abnormal heart rhythms.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

01/09/2016, ref: 16/EM/0344

#### Study design

Randomised; Interventional; Design type: Treatment, Device

#### Primary study design

Interventional

#### Secondary study design

Randomised controlled trial

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

#### Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

#### Health condition(s) or problem(s) studied

Abnormal heart rhythms

#### **Interventions**

Participants undergoing CRT- D implant will either be randomised to have the pacemaker set at the conventional method of pacing the left side of the heart from one location (MPP off) or will have the pacemaker set to stimulate the left side from two locations (MPP on).

Participants randomised into the study will have a 6 month follow up for the primary end-point and a further 2 year follow up to evaluate the secondary endpoints. The total duration of the investigation will be 2 years.

#### Intervention Type

Device

#### **Phase**

Not Applicable

#### Primary outcome measure

Rate of left ventricular reverse remodelling is measured using LV volume reduction at 6 months.

#### Secondary outcome measures

Changes in the incidence of treated ventricular arrhythmias is measured by the number of incidents reported over the duration of the 2 years participant is in the study.

#### Overall study start date

26/10/2016

#### Completion date

26/10/2020

# Eligibility

#### Key inclusion criteria

- 1. Scheduled to undergo an implant of a CRT-D system with approved standard indication by ESC /EHRA guidelines
- 2. Ability to provide informed consent for study participation and be willing to comply with the enrolment and follow up evaluations
- 3. Aged 18 years and over

#### Participant type(s)

**Patient** 

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

Planned Sample Size: 344; UK Sample Size: 344

#### Key exclusion criteria

- 1. Recent myocardial infarction within 40 days prior to enrolment
- 2. Cardiac surgery or coronary revascularisation procedure within 3 months prior to enrolment or be scheduled for such procedures in the following 7 months
- 3. Intravenous inotropic support within the last 30 days
- 4. Under 18 years of age
- 5. Be pregnant or plan to become pregnant over the next 7 months

# Date of first enrolment 26/10/2016

# Date of final enrolment 26/10/2020

### Locations

#### Countries of recruitment

England

**United Kingdom** 

## Study participating centre St Thomas Hospital

Westminster Bridge Road London United Kingdom SE1 7EH

# Study participating centre Basildon Hospital

Nethermayne Basildon United Kingdom SS16 5NL

# Sponsor information

#### Organisation

Guy's and St Thomas' NHS Foundation Trust

#### Sponsor details

16th Floor Guy's Tower Guy's Hospital Great Maze Pond London England United Kingdom SE1 9RT +44 20 7188 9811 Jennifer.Boston@gstt.nhs.uk

#### Sponsor type

Hospital/treatment centre

#### **ROR**

https://ror.org/00j161312

# Funder(s)

#### Funder type

Charity

#### **Funder Name**

St Jude Medical UK Ltd

# **Results and Publications**

#### Publication and dissemination plan

Planned publication in a high-impact peer reviewed journal.

#### Intention to publish date

26/10/2021

#### Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during the current study during this study will be included in the subsequent results publication.

#### IPD sharing plan summary

Other

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No