Dear Jeremy
Here are comments on : Multiple Technology Appraisal (MTA)
Implantable cardioverter defibrillators for the treatment of arrhythmias and cardiac resynchronisation therapy for the treatment of heart failure (review of TA95 and TA120) [ID481]

We would have welcomed stronger recommendations with regards the duration of the QRS complex as a marker of potential response to the CRT devices which would strengthen the cost-effective argument for restricting the use of CRT devices to those more likely to benefit. This is more a criticism of the available data than a criticism of the appraisal itself.
We note and welcome the research recommendation of an RCT to compare CRTP and CRTD in patients with HF and LVSD.
The meta-analysis findings of the greater benefit for women in subgroup analysis than in men is both interesting epidemiologically (increasing the chances of more female dominance than is present in the population), and exciting scientifically to recommend further research into why this difference in response exists.
We would welcome clear recommendations especially where the devices reduce sudden death but not all cause mortality, asking the clinicians to communicate that fact honestly to the patient may be needed although very hard to do.

Regards
[redacted]

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