Successful implantation of a cardiac resynchronization therapy device assisted with Impella in a patient with severe decompensated heart failure

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## Abstract

Cardiac resynchronization therapy (CRT) is a cornerstone of heart failure with reduced left ventricular (LV) ejection fraction and a wide QRS duration. Implantation of a CRT device is usually scheduled in the compensated phase of heart failure. We report a case of a successful semi-urgent implantation of a CRT device assisted with Impella at the decompensated phase of severe heart failure dependent on inotropic agents. Both mechanical resynchronization by CRT and LV unloading by Impella might contribute to a decrease in LV end-diastolic pressure and early recovery from acute pulmonary edema.

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