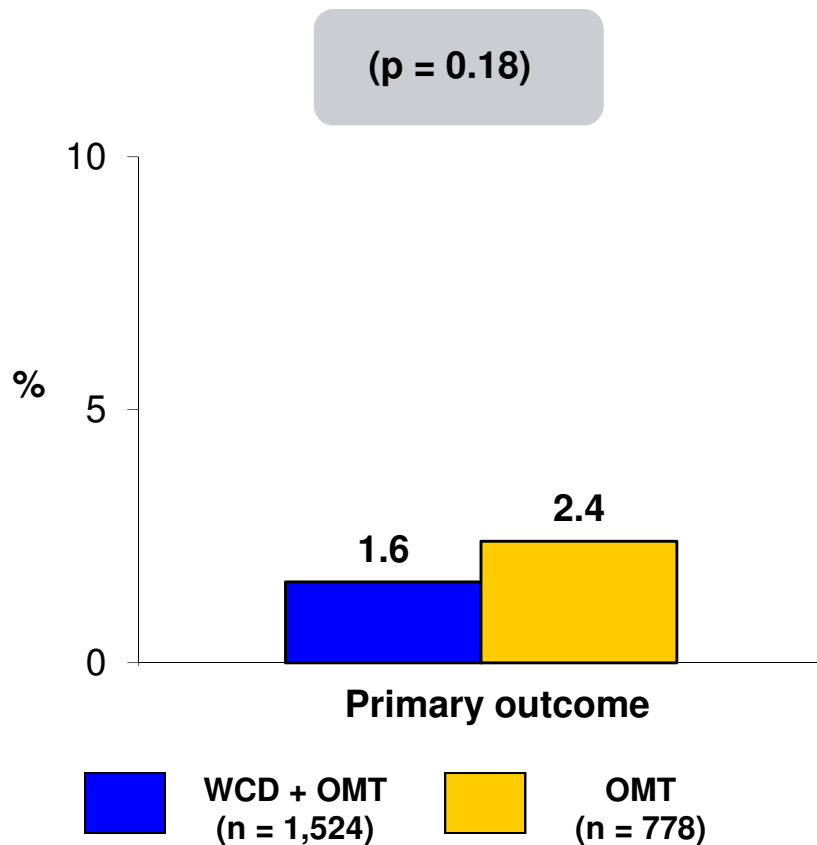


VEST

Trial design: Immediate post-MI patients with EF <35% were randomized in a 2:1 fashion to either a wearable cardioverter-defibrillator (WCD) + optimal medical treatment (OMT) vs. OMT alone. Patients were followed for 90 days.



Results

- Primary outcome, sudden cardiac death (SCD) + ventricular tachyarrhythmia death: WCD vs. control: 1.6% vs. 2.4%, p = 0.18
- Nonsudden death: 1.4% vs. 2.2%, p = 0.15, all-cause mortality: 3.1% vs. 4.9%, p = 0.04
- All-cause rehospitalization: 31% vs. 33%, p = 0.51

Conclusions

- WCD does not reduce SCD up to 90 days among patients with low EF immediately post-MI compared with controls on background of OMT
- Mortality reduction is hypothesis generating; no easy explanation
- High rate of cross-over; compliance with WCD use diminished with time