Accepted Manuscript

Our doubts about the usefulness of the Tpeak-Tend interval

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PII: \$1547-5271(19)30035-9

DOI: https://doi.org/10.1016/j.hrthm.2019.01.022

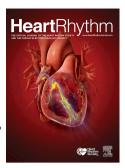
Reference: HRTHM 7887

To appear in: Heart Rhythm

Received Date: 14 January 2019

Please cite this article as: Huikuri HV, Verrier RL, Malik M, Lombardi F, Schmidt G, Zabel M, Our doubts about the usefulness of the Tpeak-Tend interval, *Heart Rhythm* (2019), doi: https://doi.org/10.1016/j.hrthm.2019.01.022.

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We read with keen interest the counterpoint by Antzelevitch and DiDiego (1) in response to our point of view statement (2). First and foremost, we acknowledge the seminal nature of their work and its impact in stimulating experimental and clinical research.

Notwithstanding their impressive contributions to the field, we respectfully maintain that there are aspects of the Tpeak-Tend interval approach that merit further consideration. While the wedge preparation has provided important insights into basic cardiac electrophysiology and antiarrhythmic drug action, there remains controversy regarding the putative role of M cells in vivo. The absence of definitive resolution of this conundrum needs to be considered in evaluating the basis of Tpeak-Tend-based arrhythmia prediction.

As previously discussed [3], the Tpe cut-off reported by Tse et al cannot be taken without criticism. Their meta-analysis [4] made no distinction between different measurements (including studies that Antzelevitch and DiDiego criticise) and combined both heart rate corrected and uncorrected Tpe values. Beyond the electrophysiologic concept of Tpeak-Tend, there are practical issues that should be contemplated when using this parameter clinically. These include challenges of precise measurement, the selection measurement lead(s), and appropriate heart rate corrections. These issues apply equally to other interval-based arrhythmia risk markers. Finally, in the presence of a wide-spread publication bias towards positive findings, multiplicity of articles showing value of ECG measurements unfortunately means little if anything if the physiologic basis and practical issues in the measurement of this interval are insufficiently established. Overall, our main point is that while Tpeak-Tend has deservedly generated considerable interest in the field of arrhythmia risk assessment based on repolarization heterogeneity, theoretical and practical factors need to be recognized, whenever this measurement is employed.

Hence, our doubts remain serious about assessing repolarization heterogeneity accurately by simple interval measurements of standard ECG recordings.

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