

## BACKGROUND

- Implantable Cardiac Defibrillators (ICDs) continuously capture cardiovascular metrics such as heart rate, rhythm, and thoracic impedance (TI)
- Provide clinicians and patients with important information for managing health outcomes
- Prior studies have used ICD data to show the causative relationship between atrial fibrillation (AF) and congestive heart failure (CHF) is bidirectional
- Heart Rate Variability has been shown to have a negative relationship with CHF and AF burden.<sup>3,4</sup>

↑ HRV → ↓ CHF, ↓ AF Burden

- Activity has been shown to have a negative relationship with CHF and AF burden.<sup>5,6</sup>

↑ Activity → ↓ CHF, ↓ AF Burden

- TI's effect on CHF and AF has yielded mixed results, suggesting a need for more research<sup>1,2</sup>

↑ TI → ? CHF, ? AF Burden

## RESEARCH AIM

How do heart rate variability and activity influence the relationship between thoracic impedance and atrial arrhythmias?

## SIGNIFICANCE

- Enhances understanding of how TI, HRV, and activity interact in CHF and AF
- Improves ICD monitoring and management
- Can be used to identify predictive markers for better clinical outcomes
- Provides insights for interventions to reduce AF and CHF risks

## REFERENCES

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## METHODS

- 484 ECU Health patients implanted with an ICD
- Home monitoring data from 2019-2023
- Includes daily ICD values for each patient, spanning 3 months to 4 years
- A Multivariate Regression Analysis will be completed

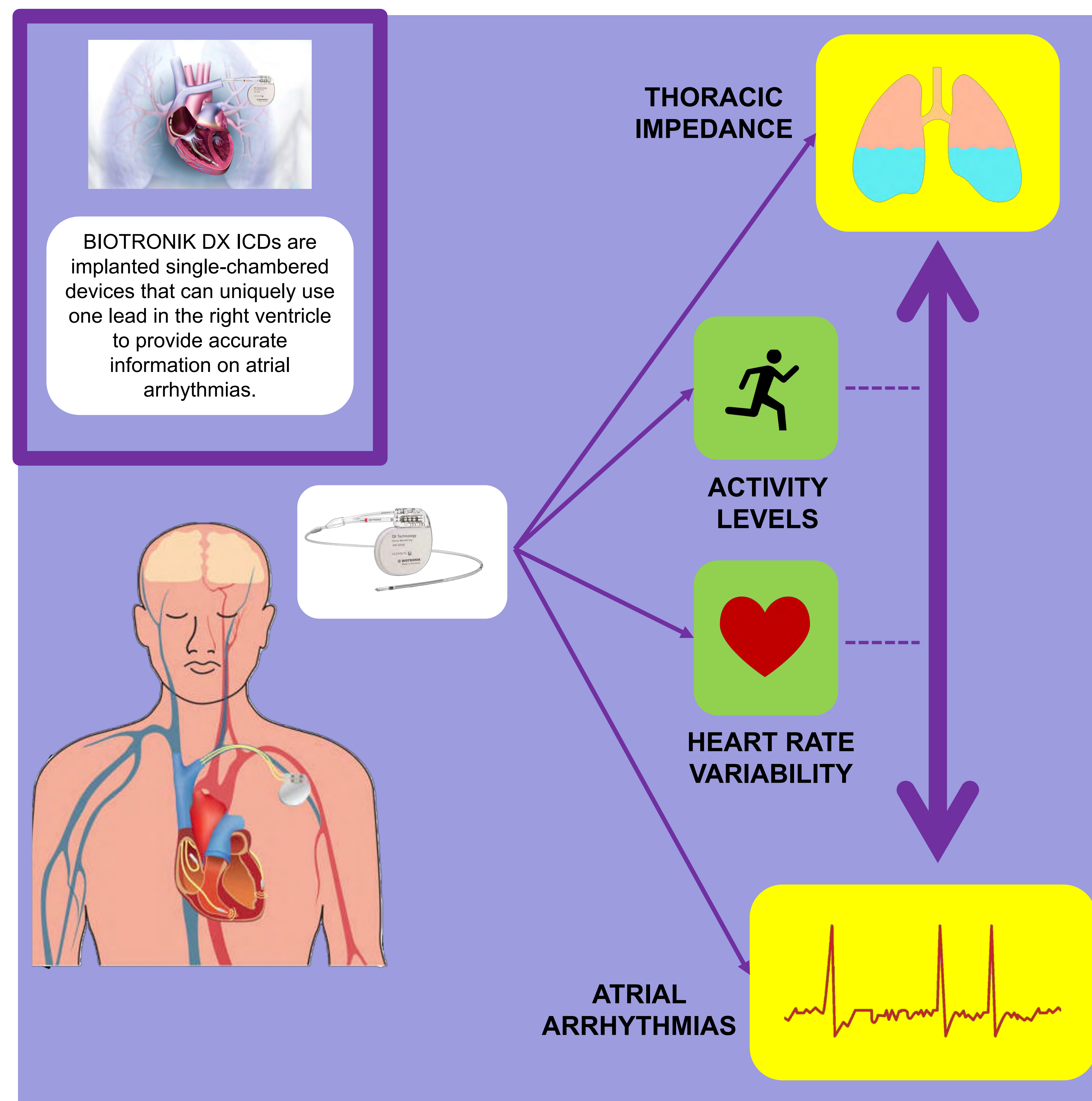
$$\text{AF Burden} = \beta_0 + \beta_1(\text{TI}) + \beta_2(\text{HRV}) + \beta_3(\text{Activity}) + \beta_4(\text{TI} \times \text{HRV}) + \beta_5(\text{TI} \times \text{Activity}) + \beta_6(\text{HRV} \times \text{Activity}) + \beta_7(\text{TI} \times \text{HRV} \times \text{Activity})$$

## ANTICIPATED RESULTS

- $\beta_0$  Atrial burden when all predictors are 0.
- $\beta_1$  Direct effect of TI on AF burden.
- $\beta_2$  Direct effect of HRV on AF burden.
- $\beta_3$  Direct effect of Activity on AF burden.
- $\beta_4$  How HRV modifies the effect of TI on AF burden.
- $\beta_5$  How activity influences the relationship between TI and AF burden.
- $\beta_6$  How activity and HRV together affect AF burden.
- $\beta_7$  How the combined effect of TI, HRV, and activity on AF burden.

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## HYPOTHESIS

I hypothesize that both heart rate variability and activity will enhance the relationship between thoracic impedance and atrial burden.

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