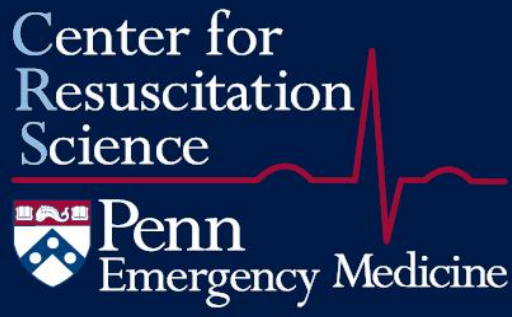


The post-arrest TTM Trial: how do we interpret it, and where to go from here?



Benjamin S. Abella, MD, MPhil

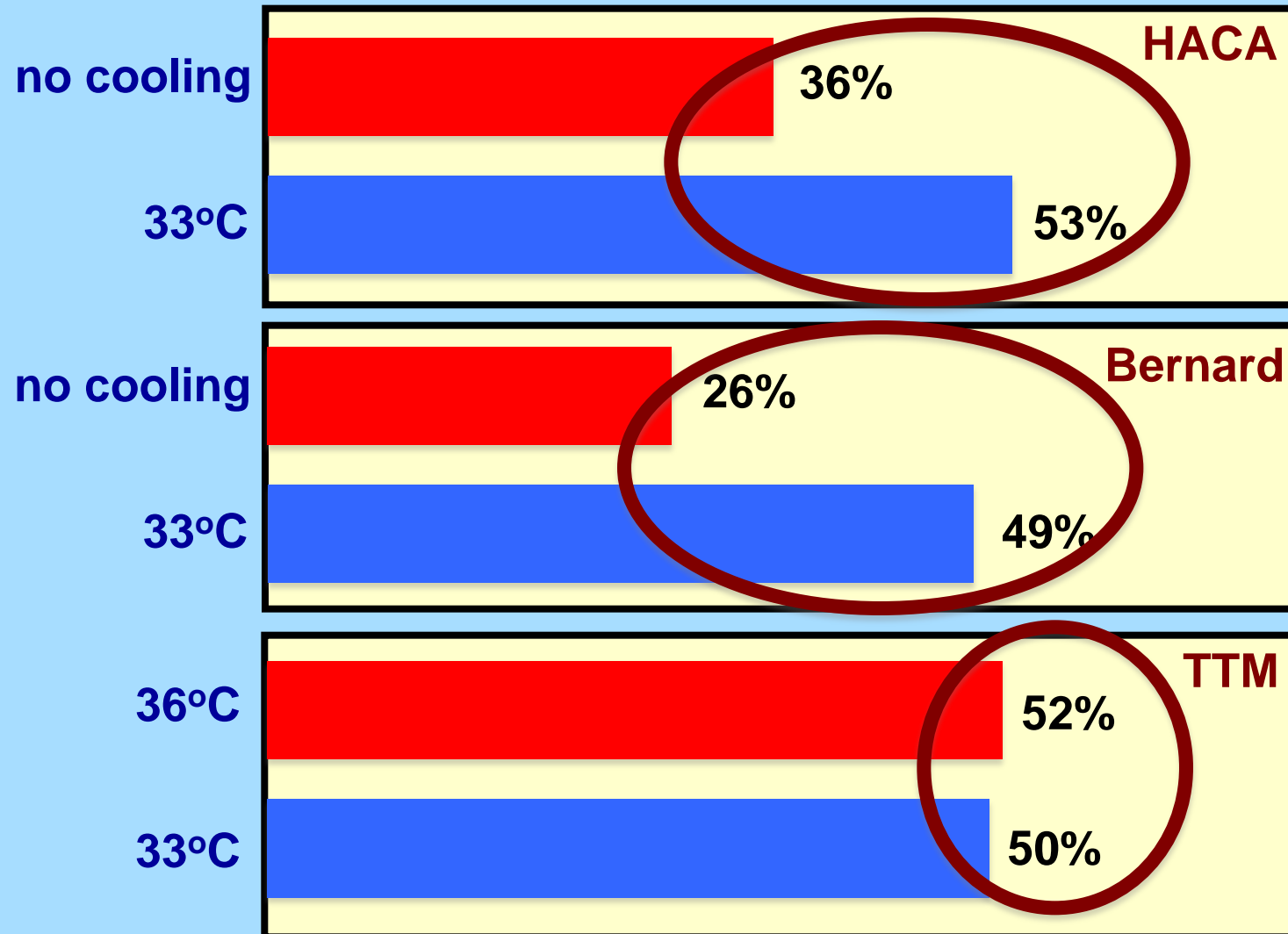
Clinical Research Director
Center for Resuscitation Science
Department of Emergency Medicine
University of Pennsylvania

AHA Scientific Sessions – November, 2013

Potential conflicts of interest

Grants:	National Institutes of Health Medtronic Foundation Philips
Honoraria:	Velomedix Stryker HeartSine
CME:	medical director of TTM training course, industry support
Volunteer:	American Heart Association

Making sense of the post-arrest trials

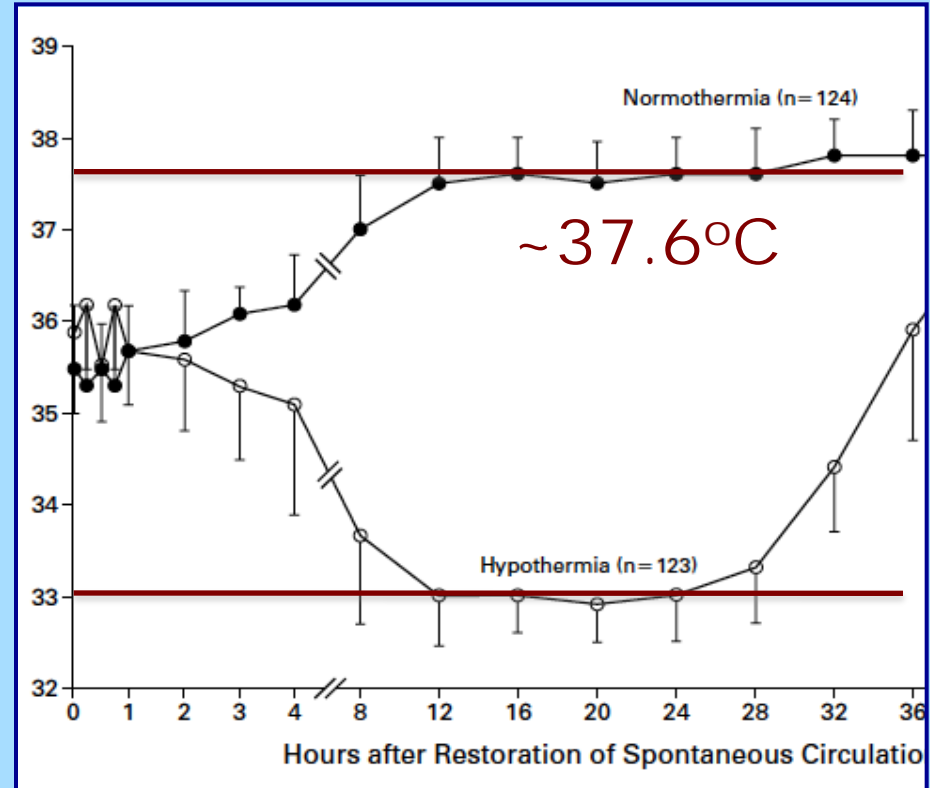
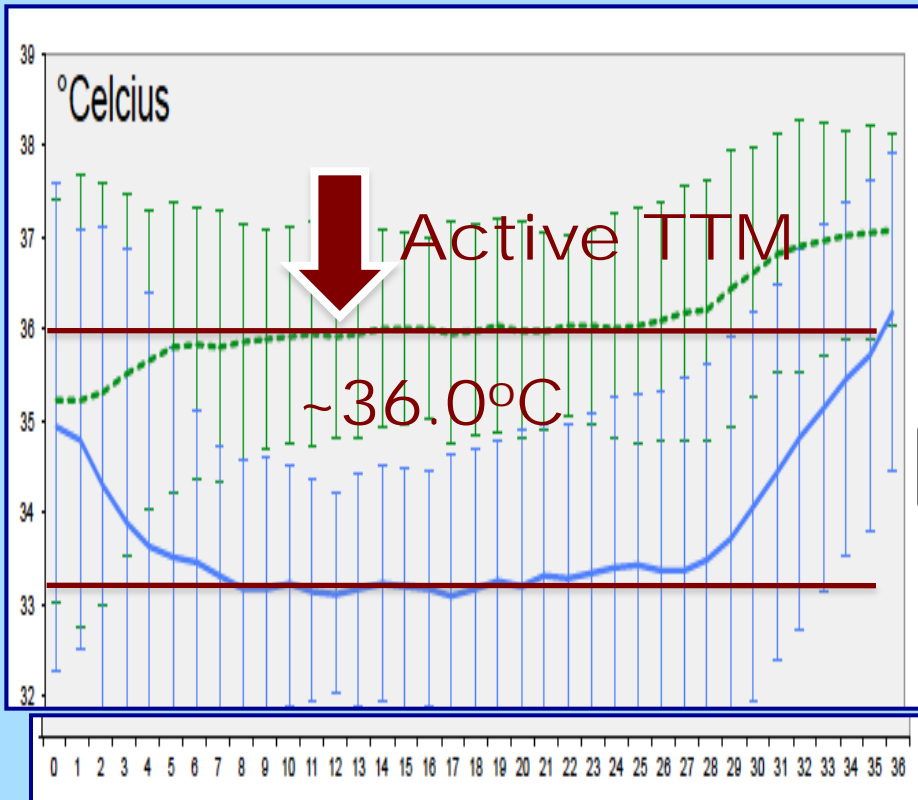


How can this be?

Marked differences in "control" group

Nielsen et al

HACA study



Bernard et al: ~37.3°C

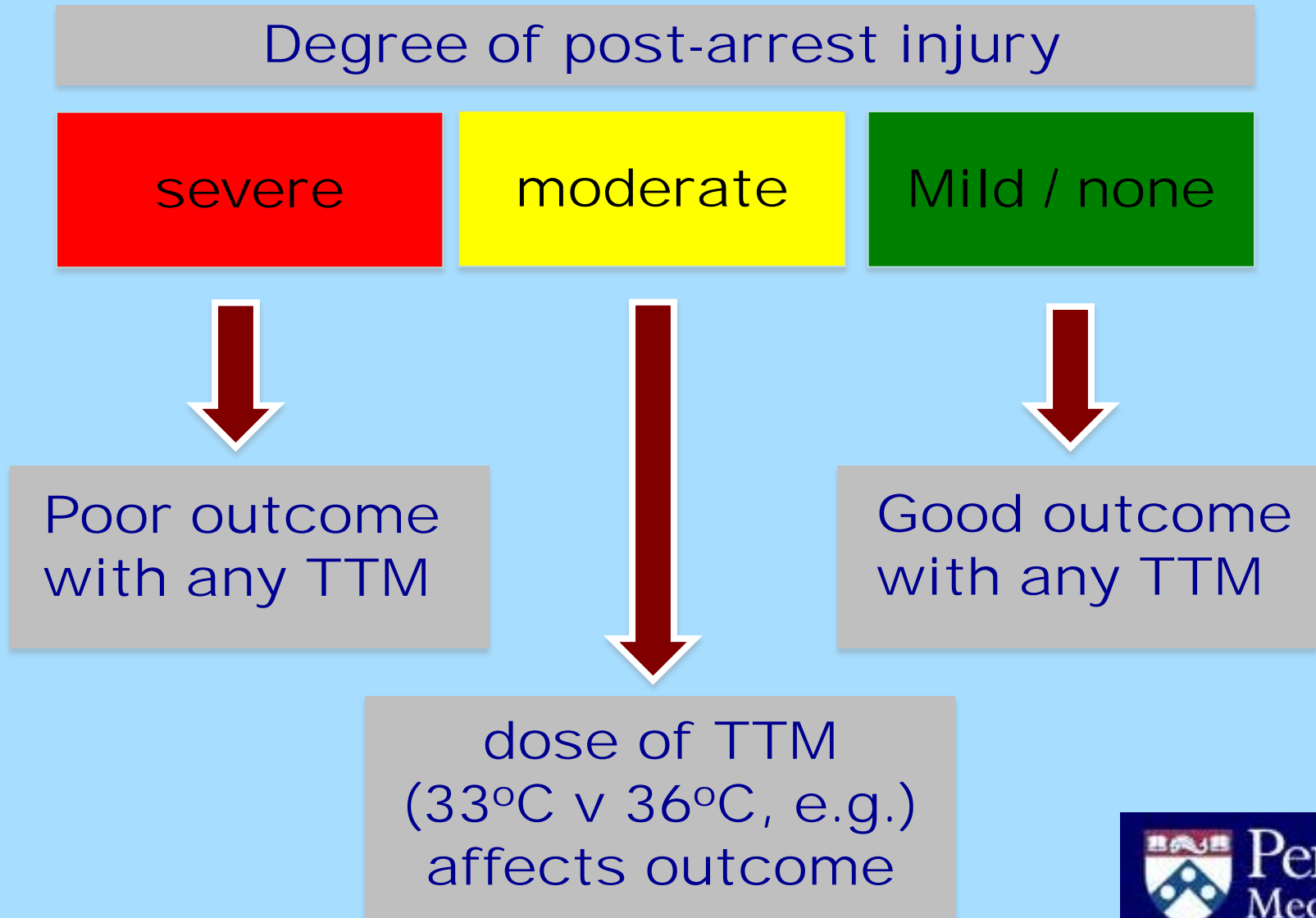
Large difference in maintenance temperatures

Most important point ... and a warning

Current work does not test the same hypothesis as the HACCA, Bernard trials

36°C arm in the trial is still active
management of temperature

Interpreting the evidence: a hypothesis



Many knowledge gaps remain

Great need for additional clinical trials in post-arrest care and TTM:

- ➡ Duration of post-arrest TTM?
- ➡ Depth of post-arrest TTM for select patients?
- ➡ Optimal injury measurement post-arrest?
- ➡ Pharmacologic adjuncts to TTM?
- ➡ Early versus late post-arrest cardiac cath?