MANAGEMENT

> treat underlying problem

> **optimise rate and rhythm**

> maintain perfusion

> optimise preload

> reduce afterload

> optimise contractility

> mechanical support

> faster HR

> minimises excessive distension and minimises TR

> SV may be low

> but balance with LV perfusion

> sinus rhythm optimal

MANAGEMENT

> treat underlying problem

> optimise rate and rhythm

> **maintain perfusion**

> optimise preload

> reduce afterload

> optimise contractility

> mechanical support

> maintaining coronary perfusion pressure by maintaining systemic pressure

> IABP generally considered to help L side but can indirectly improve R function