MANAGEMENT

- treat underlying problem
- > optimise rate and rhythm
- > maintain perfusion
- > optimise preload
- > reduce afterload
- > optimise contractility
- > mechanical support

- inodilators are a good choice eg milrinone, PDE3 inhibitor
- but can cause profound systemic hypotension - may require vasoconstrictor
- role of levosimendan in RVF needs further exploration

MANAGEMENT

- > treat underlying problem
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- maintain perfusion
- optimise preload
- > reduce afterload
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- > peripheral VA ECMO
- surgically implanted VADs
- percutaneously inserted' VAD devices eg. the Impella RP and TandemHeart RVAD

Blood Inlet •-

Blood Outle