1,325 Patients are now enrolled in this trial, which is taking place in 80 centres across Europe and Australia.

There are an estimated 15 million patients suffering from heart failure in Europe.

SDB is estimated to be present in 50-75% of heart failure patients.

SDB is the most common heart failure co-morbidity. However, it remains one of the least recognised by cardiologists.

In heart failure patients, central SDB is associated with:
- increased mortality
- cardiac hospital readmissions
- lower quality of life

Effective treatment of central SDB using PaceWave™ ASV improves cardiac function and may increase survival in HF patients.

The first patient was randomised in 2008 and the study is likely to complete in 2015.

Patients will be followed up on average for a period of ~54 months (24 months – 84 months).

SERVE-HF is the first large-scale randomised controlled study in the field of sleep-disordered breathing related to chronic heart failure.

Results, expected in 2015, could have a big impact on the future management of heart failure patients.

SLEEP-DISORDERED BREATHING IN HEART FAILURE – THE FACTS

SERVE-HF could change how we manage SDB in heart failure patients.

KEY AREAS OF FOCUS IN SERVE-HF ARE:
- Time to death
- Unplanned heart failure related hospitalisation
- Impact on health economics
- Quality of life
- Cardiac function
- Exercise capacity

Assessing the benefits of PaceWave™ ASV therapy on patients with heart failure and sleep-disordered breathing (SDB)?

Sponsored by ResMed (www.resmed.com), SERVE-HF is, to date, the largest randomised controlled study in the field of sleep-disordered breathing (SDB) related to chronic heart failure.

The trial is assessing the benefits of PaceWave™ ASV therapy on heart failure patients and the cost/benefit ratio.

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