Author/ Year	Study Design	Demographics	Intervention, outcome measures; instruments	Results as Published Nov. 2001*		Methodological Comments
				Intervention group	Control group	
2001/Rose, E A, et al	Randomized, controlled, unblinded clinical trial	N 129, all with Class IV ESHF, not heart transplant candidate, 95 age ≥65, sex ≅ 80% M	68 implanted with LVAD, 61 controls received optimum medical management, main outcome – all cause mortality, predetermined end of study at 92 deaths	Kaplan-Meier projection: 1 yr surv. 52%, 2 yr surv. 23%	Kaplan-Meier projection: 1 yr. surv. 25% 2 yr. surv. 8%	
1999/Rose, E A, et al	Discussion of the rational, design and ongoing pilot study for REMATCH	N 21, all with Class IV ESHF, not heart transplant candidate	Ongoing trial not further described			
2001/ Long J W	Retrospective review of experience with LVAD implants worldwide	Registry data: 1150 patients devices similar to REMATCH patients, avg age 51, 84% male, 30d success 80%, avg implant duration 131d	Mainly bridge to transplant cases, 49% idiopathic, 44% ischemic cardiomyopathy			
2000/Deng, M C, et al	Retrospective analysis of survival and risk	Registry data: 464 patients, median age 49,	Subset of 366 patients with complete data (on	One year survival with no negative risk factors 60%, with		

	factors for LVAD implants in Europe	median support time 100d	intention to treat basis): 321 bridge to transplant, 33 bridge to recovery, 12 definitive (destination) therap	one negative risk factor (respiratory failure and septicemia, right heart failure, age >65, acute postcardiotomy, or acute infarction) 24%		