Heart failure (HF) is a fascinating, complex syndrome, whose treatment continues to be refined and improved. Several decades of research and clinical experience in cardiac care have continuously increased our understanding of the pathophysiology and natural history of HF, allowing the development of targeted medical therapy to improve patient functional status, reduce hospitalizations, and prolong life. Despite the impressive therapeutic armamentarium, patients with HF continue to experience progressive symptoms and shorter life expectancy.

Cardiac resynchronization therapy (CRT) was first described in 1983 at the 7th World Symposium on Cardiac Pacing by de Teresa and colleagues, and the first report on the clinical use in HF was published by Cazeau and colleagues in 1994. In the following 20 years, the scientific community passed from initial feasibility studies to prospective multicenter randomized studies.

We now recognize that CRT has transformed the management of chronic HF, significantly reducing cardiovascular morbidity and mortality in patients with both advanced and mild HF, impaired left ventricular function, and a wide QRS complex.

As editors, we have been privileged to invite internationally recognized experts to contribute to this issue of Cardiac Electrophysiology Clinics.

Part 1 of the issue addresses the state of knowledge of pathophysiology, clinics, prognosis, and management of HF.

Part 2 focuses on ventricular dyssynchrony in experimental settings and in man, providing insight into the causes, mechanism, and treatment.

Noninvasive assessment of the patients and of the efficacy of the therapy has been developed in Part 3.

Part 4 addresses CRT from the indications to the implantation and extraction techniques and to the choice of the devices.

Treatment of AF in CRT is a crucial topic and is addressed in Part 5, while Part 6 focuses on
optimization of therapy and follow-up of the patients.

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