



Amiodarone use in patients listed for heart transplantation

Pre-heart transplantation amiodarone usage in patients has been shown to increase the risk of primary graft failure post-heart transplantation. Judicious amiodarone usage in patients listed for heart transplantation is a priority.

Inpatients who are hemodynamically stable with no recent ventricular tachycardia or other hemodynamically significant ventricular rhythms should be trialed off of amiodarone. If there is clinical equanimity on amiodarone usage, it is strongly recommended that an amiodarone “holiday” be attempted.

Clinical collaboration with the expertise of the electrophysiology team should help guide more complex situations. Resumption of amiodarone in this patient population should be guided by hemodynamically significant rhythms with a lack of other treatment options.

Hemodynamically stable non-sustained ventricular tachycardia or ventricular ectopy is **not** considered a clinical indication for amiodarone in heart transplant listed patients.