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IN BRIEF

ARRHYTHMIAS

Modified Valsalva manoeuvre increases return to sinus rhythm from supraventricular tachycardia

In the REVERT trial, 433 patients who presented to the emergency department in England with supraventricular tachycardia were randomly assigned to undergo either a standard or a modified semi-recumbent Valsalva manoeuvre. The modification involved supine repositioning and passive leg raise immediately after the Valsalva strain, and resulted in 43% of patients achieving sinus rhythm within 1 min of the intervention, compared with 17% of those who underwent the standard manoeuvre (OR 3.7, 95% CI 2.3–5.8, $P < 0.0001$). The investigators recommend that “in patients with supraventricular tachycardia, a modified Valsalva manoeuvre ... should be considered as a routine first treatment and can be taught to patients”.

Original article Appelboom, A. *et al.* Postural modification to the standard Valsalva manoeuvre for emergency treatment of supraventricular tachycardias (REVERT): a randomised controlled trial. *Lancet* doi:10.1016/S0140-6736(15)61485-4

CARDIOMYOPATHIES

Benznidazole does not slow cardiac deterioration in Chagas' cardiomyopathy

In the BENEFIT trial presented at the ESC Congress 2015, 2,854 patients with Chagas' cardiomyopathy from five South American countries were randomly assigned to receive trypanocidal therapy with benznidazole or placebo for up to 80 days. After follow-up (mean 5.4 years), detection of the *Trypanosoma cruzi* parasite in the blood using polymerase chain reaction assay was significantly reduced with benznidazole therapy compared with control ($P < 0.001$). However, the rate of the composite primary end point of cardiovascular outcomes was not significantly different in the benznidazole group (27.5%) compared with the placebo group (29.1%; $P = 0.31$), indicating no benefit of this treatment on cardiac clinical deterioration.

Original article Morillo, C. A. *et al.* Randomized trial of benznidazole for chronic Chagas' cardiomyopathy. *N. Engl. J. Med.* doi:10.1056/NEJMoa1507574

PREVENTION

Effectiveness of angiotensin II-receptor blockade in cardiovascular disease prevention

In the ATTEMPT-CVD trial presented at the ESC Congress 2015, a strategy of angiotensin II-receptor blocker (ARB) therapy with telmisartan was compared with a standard non-ARB strategy in a total of 1,228 patients with hypertension in Japan. In this multicentre, open-label, randomized trial, telmisartan therapy was associated with a smaller increase in plasma brain natriuretic peptide level, and a greater decrease in urinary albumin creatinine ratio than non-ARB treatment, despite similar control of blood pressure. These parameters are known to be strong biomarkers of cardiovascular and renal risk; however, the rate of cardiovascular events did not differ significantly between the two groups.

Original article Ogawa, H. *et al.* A trial of telmisartan prevention of cardiovascular diseases (ATTEMPT-CVD): biomarker study. *Eur. J. Prevent. Cardiol.* doi:10.1177/2047487315603221