

Sgarbossa Criteria: LBBB and AMI

Sgarbossa EB et al, for GUSTO-1 investigators. ECG diagnosis of evolving AMI in the presence of LBBB. *New Engl J Med* 1996; 334:481-7.

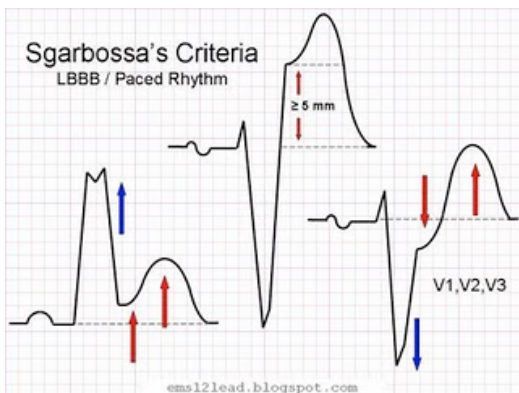
In a Left Bundle Branch Block (LBBB), the major, terminal portion of the QRS complex will normally be "appropriately discordant" with the ST segment.

- Example: If the QRS is negative, the ST segment will be normally elevated.

Sgarbossa criteria:

- For detecting an AMI in the setting of a LBBB
- Derived from the GUSTO-1 trial
- Be aware that Sgarbossa are not perfect in screening for AMI. Use as another data point in risk-stratifying these complex patients with LBBB.
- Sgarbossa criteria hold true for LBBB pattern seen in pacemaker patients.

Sgarbossa Criteria	Positive LR (95% CI)	Negative LR (95% CI)
1. ST elevation ≥ 1 mm concordant with QRS complex [Most predictive of AMI]	9.54 (3.1-17.3)	0.3 (0.22-0.39)
2. ST depression ≥ 1 mm in lead V1, V2, or V3	6.58 (2.6-16.1)	0.78 (0.7-0.87)
3. ST elevation ≥ 5 mm where discordant with QRS complex [Positive LR crosses 1.0 – may not be significant criteria]	3.42 (0.18-6.5)	0.8 (0.72-0.9)



Criteria 1

Criteria 3

Criteria 2