FRONTLINE FIVE EM

LEAP-Block Pacing

Journal Club Guide

A step-by-step critical appraisal worksheet for emergency medicine and critical care

Li X, et al. JAMA. Published October 28, 2026. doi:10.1001/jama.2026.18146

Study design	Multicenter randomized superiority trial
Population	482 analyzed patients with AV block, LVEF at least 50%, and expected ventricular pacing burden above 40% across 14 Chinese hospitals
Comparison	Left bundle-branch area pacing versus conventional right ventricular pacing
Reported result	The 24-month composite of death, heart-failure events, or biventricular upgrade occurred in 2.4% versus 12.5% (RD -10.1 points; HR 0.37, 95% CI 0.19-0.73; P=.004).

STEP 1 - Frame the question

Write the PICO or descriptive research question in one sentence.

STEP 2 - Test the design

Was this design appropriate for the question? Identify the strongest protection against bias and the biggest remaining threat.

STEP 3 - Examine the population

Who was included and excluded? How closely do these patients and settings resemble your ED or ICU?

STEP 4 - Interrogate the outcomes

Was the primary outcome patient-centered? Separate the prespecified primary result from secondary, subgroup, or surrogate findings.

STEP 5 - Interpret effect and uncertainty

Record the absolute risks, relative effect, confidence interval, and whether the study excluded a clinically important benefit or harm.

STEP 6 - Identify limitations

List selection bias, confounding, measurement limitations, missing data, power, and external-validity concerns.

STEP 7 - Decide what changes

What should change today, what should only prompt discussion, and what requires confirmation?

FINAL APPRAISAL

Bottom line in one sentence; evidence certainty (high/moderate/low); and whether you would teach, read, or change practice.