

HEART DISEASE — BUNDLE BRANCH BLOCK

Overview:

The contraction of the heart muscle is controlled via a series of electrical impulses that begin at the sino-atrial node and are conducted to other areas via special fibers at precisely timed intervals. A *bundle branch block (BBB)*, sometimes also called *heart block*, refers to conditions that cause an interruption to the passage of these electrical impulses, leading to heart beat abnormalities. Bundle branch blocks are fairly common conditions with about 1% of the population affected.

Different pumping abnormalities emerge, depending on the type of bundle branch block involved. In some cases, the left and right ventricles (main pumping chambers of the heart) that normally contract simultaneously, may not contract at the same time. Other disruptions may cause the rate of ventricular contractions to fall behind the rate of atrial contractions, or perhaps even missed ventricular contractions. Regardless of type, any of these abnormal electrical impulse patterns are visible on an EKG.

There are several known causes for bundle branch blocks. The most common cause - accounting for over 50% of the condition - is some form of heart disease. Other causes include tumors, fibrosis (scarring) of the conducting fibers, rheumatic fever, high blood pressure, congenital lesions, as well as physical injury.

Many cases of bundle branch block require no treatment. If the condition is severe and causes fainting spells or black-outs, an artificial pacemaker may be installed to take over the functions of the disrupted fibers.

Impact on Life Underwriting:

Bundle branch blocks by themselves are not necessarily cause for great concern, and many cases are issues on a standard basis, or even an occasional preferred. Underwriters evaluate the condition based on any underlying cause, if known, the age of the proposed insured at initial diagnosis and currently, and the stability of the condition, if known. All other factors being equal, blockages of the fiber bundles conducting impulses to the left heart chambers are of greater significance, given the importance of proper left ventricular functioning. If the bundle branch block is due to an underlying heart condition, it is evaluated in light of the prognostic indicators for that particular disease.

The following table outlines likely ratings for the most common types of bundle branch blockages. Standard rates are most likely if the blockage can be documented to be stable over several years. The table ratings apply primarily to recently diagnosed conditions with little or no history of possible further development or where the cause is an underlying heart disease. In order to help us provide you with pre-underwriting premium estimates, please provide us with the most current EKG available. It will help us negotiate for the best possible rates prior to going formal. SB 04/20/2001

Type of Bundle Branch Block (BBB)	Likely rating with diagnosis at age 39 or younger.	Likely rating with diagnosis age 40 and older.
Incomplete right bundle branch block (IRBBB)	Standard	Standard
Complete right bundle branch block (CRBBB)	Standard to Table 2	Standard
Left anterior hemiblock (incomplete) (LAHB)	Standard	Standard
Left posterior hemiblock (incomplete) (LPHB)	Standard	Standard
Complete left bundle branch block (CLBBB)	Standard to Table 3	Standard to Table 2
Complete right bundle branch block with left hemiblock (Bifascicular block)	Standard to Table 3	Standard to Table 2



Phone: 1-888-227-3131 Ext. 600

Fax: 215-233-3683

Email: LIFE@ABSgo.com

HEART DISEASE—BUNDLE BRANCH BLOCK QUESTIONNAIRE

Agent: _____

Phone: _____

Fax: _____

Proposed Insured Name: _____ M F Date of Birth: _____

Face Amount: _____ Max. Premium: \$ _____/year UL WL Term Survivorship

Do you currently smoke cigarettes? Y N If no, did you ever smoke: Never Quit (Date): _____

Do you currently use any other tobacco products (e.g. cigars, pipe, snuff, nicotine patch, Nicorette gum...): Y N

If Yes, please provide details: _____

When did you last use any form of tobacco: _____ (Month) _____ (Year) Type used last: _____

(1) *Date of first diagnosis:* _____

(2) *Has the proposed insured been diagnosed with:*

- Incomplete right bundle branch block (IRBBB) Complete right bundle branch block (CRBBB)
- Left anterior hemiblock (LAHB) Left posterior hemiblock (LPHB)
- Complete left bundle branch block (CLBBB) Complete right bundle branch block, left hemiblock (Bifascicular block)
- Other: _____

(3) *Provide dates if any of the following tests or procedures have been done?*

- Resting EKG: _____ Stress EKG: _____
- Thallium Stress EKG: _____ Stress Echocardiogram: _____
- Coronary Catheterization: _____ Other: _____

(4) *Please check if the proposed insured as been diagnosed with the following conditions:*

- Coronary artery/heart disease
- Cardiomyopathy
- Heart valve disease/disorder
- Elevated Cholesterol - most recent known level: _____
- High blood pressure - most recent reading: _____
- Diabetes - age of onset: _____ Recent A1C test result: _____ (please ask for our Diabetes Questionnaire)
- Family history of heart disease. If yes, who and at what age(s) diagnosed: _____
- Other: _____

(5) *Does the proposed insured take any current medications (include preventative aspirin)?* No Yes Details: _____

Name of Medication (Prescription or Otherwise)	Dates Used	Quantity Taken	Frequency Taken

(6) *Was an artificial pacemaker installed? If yes, when:* _____

(7) *Are there any other conditions that may impact life underwriting? If yes, please describe:* _____



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