[gw22-e0331]

LONG TERM RESULTS OF CIRCUMFERENTIAL PULMONARY VEIN ISOLATION AND CIRCUMFERENTIAL PULMONARY VEIN ISOLATION COMBINED COMPLEX FRACFIONATED ATRIAL ELECTROGRAMS ABLATION FOR ATRIAL FIBRILLATION

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10.1136/heartjnl-2011-300867.533

Objective The purpose of the present study was to investigate the safety and efficacy of circumferential pulmonary vein isolation (CPVI) and CPVI combined with complex fractionated atrial electrograms (CFAEs) ablation for atrial fibrillation (AF).

Methods Data from 112 patients who underwent CPVI and CPVI combined with CFAEs ablation in our hospitals were collected.

Results The mean total procedure times were (112±47 min vs 136±54 min) for CPVI and CPVI combined CFAEs ablation. The mean total fluoroscopy times were (34±18 min vs 40±12 min) CPVI and CPVI combined CFAEs ablation. There was no difference in pulmonary vein isolation in CPVI and CPVI combined CFAEs ablation (44±12 min vs 46±9 min, p=0.52). During a mean follow-up of 36 months, the procedure success rate (73.9% vs 66.7%, 65.2% vs 62.1%, 58.7% vs 57.6%, p<0.05) was higher in the CPVI combined CFAEs ablation in 12, 24 and 36 months.

Conclusion CPVI and CPVI combined CFAEs ablation are safe and effective for treatment of AF. CPVI combined CFAEs ablation was better than CPVI in attaining stable sinus rhythm in the majority of patients during up to 36 months of follow-up.