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CHARACTERISTICS AND SIGNIFICANCE OF SLOW POTENTIALS DURING RADIOFREQUENCY CATHETER ABLATION OF SLOW-PATHWAY IN PATIENTS WITH ATRIOVENTRICULAR NODAL REENTRANT TACHYCARDIA BAI

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Objective To investigate radiofrequency ablation of the slow pathway and significance of the different forms slow potentials during radiofrequency catheter ablation of slow-pathway in patients with atrioventricular nodal reentrant tachycardia. **Methods** We analysed catheter radiofrequency ablation information of 54 patients with atrioventricular nodal reentrant tachycardia retrospectively and compared effective target rate and the success rate for the first time when using or not using slow potentials as ablation target and when using different forms of slow potentials as ablation target.

Results Effective target rate was 71.4% and the success rate for the first time was 22.5% when using slow potentials as ablation target. Effective target rate was 85.7% and the success rate for the first time was 19.0% when using fragmentation-type slow potentials as ablation target. Effective target rate was 88.9% and the success rate for the first time was 38.9% when using firstly high frequency current and then low frequency current ablation of atrial double potential. Effective target rate was 10.0% and the success rate for the first time was 0% when firstly low frequency current and then high frequency current ablation of atrial double potential.

Conclusion Effective target rate and the success rate for the first time was both high when using slow potentials as ablation target. Effective target rate and the success rate was both high when using fragmentation-type slow potentials and firstly high frequency current and then low frequency slow potentials as ablation target. The first low-frequency and then