

Additional web references

- w1. Eleid MF, Foley TA, Said SM, et al. Severe Mitral Annular Calcification: Multimodality Imaging for Therapeutic Strategies and Interventions. *JACC Cardiovasc Imaging* 2016;9:1318-37.
- w2. Nkomo VT, Gardin JM, Skelton TN, et al. Burden of valvular heart diseases: a population-based study. *Lancet* 2006;368:1005-11.
- w3. Iung B, Baron G, Butchart EG, et al. A prospective survey of patients with valvular heart disease in Europe: The Euro Heart Survey on Valvular Heart Disease. *Eur Heart J* 2003;24:1231-43.
- w4. Marijon E, Mirabel M. Rheumatic heart disease. *Lancet* 2012;379:953-64.
- w5. Sliwa K, Carrington M, Mayosi BM, et al. Incidence and characteristics of newly diagnosed rheumatic heart disease in urban African adults: insights from the heart of Soweto study. *Eur Heart J* 2010;31:719-27.
- w6. Virmani R, Roberts WC. Aschoff bodies in operatively excised atrial appendages and in papillary muscles. Frequency and clinical significance. *Circulation* 1977;55:559-63.
- w7. Ruebner BH, Boitnott JK. The frequency of Aschoff bodies in atrial appendages of patients with mitral stenosis. Relationship to age, atrial thrombosis, and season. *Circulation* 1961;23:550-61.
- w8. Shenthar J, Kalpana SR, Prabhu MA, et al. Histopathological study of left and right atria in isolated rheumatic mitral stenosis with and without atrial fibrillation. *J Cardiovasc Electrophysiol* 2016;27:1047-54.
- w9. Diker E, Aydogdu S, Ozdemir M, et al. Prevalence and predictors of atrial fibrillation in rheumatic valvular heart disease. *Am J Cardiol* 1996;77:96-8.
- w10. Kim H, Cho G, Kim Y, et al. Development of atrial fibrillation in patients with rheumatic mitral valve disease in sinus rhythm. *Int J Cardiovasc Imaging* 2015;31:735-42.
- w11. Qian Y, Meng J, Tang H, et al. Different structural remodelling in atrial fibrillation with different types of mitral valvular diseases. *Europace* 2010;12:371-7.
- w12. Candan O, Gecmen C, Kalayci A, et al. Left atrial electromechanical conduction time predicts atrial fibrillation in patients with mitral stenosis: a 5-year follow-up speckle-tracking echocardiography study. *Int J Cardiovasc Imaging* 2017;33:1491-1501.
- w13. Zhu D, Wu Z, van d, Geest, RJ., et al. Accuracy of late gadolinium enhancement - magnetic resonance imaging in the measurement of left atrial substrate remodeling in patients with rheumatic mitral valve disease and persistent atrial fibrillation. *Int Heart J* 2015;56:505-10.
- w14. Verma A, Wazni OM, Marrouche NF, et al. Pre-existent left atrial scarring in patients undergoing pulmonary vein antrum isolation: an independent predictor of procedural failure. *J Am Coll Cardiol* 2005;45:285-92.
- w15. Coronel R, Langerveld J, Boersma LV, et al. Left atrial pressure reduction for mitral stenosis reverses left atrial direction-dependent conduction abnormalities. *Cardiovasc Res* 2010;85:711-8

- w16. Soylu M, Demir A, Ozdemir O, et al. Evaluation of atrial refractoriness immediately after percutaneous mitral balloon commissurotomy in patients with mitral stenosis and sinus rhythm. *Am Heart J* 2004;147:741-5.
- w17. Baumgartner H, Hung J, Bermejo J, et al. Echocardiographic assessment of valve stenosis: EAE/ASE recommendations for clinical practice. *Eur J Echocardiogr* 2009;10:1-25.
- w18. Fatkin D, Feneley M. Stratification of thromboembolic risk of atrial fibrillation by transthoracic echocardiography and transesophageal echocardiography: the relative role of left atrial appendage function, mitral valve disease, and spontaneous echocardiographic contrast. *Prog Cardiovasc Dis* 1996;39:57-68.
- w19. Olesen KH. The natural history of 271 patients with mitral stenosis under medical treatment. *Br Heart J* 1962;24:349-57.
- w20. Herrmann HC, Ramaswamy K, Isner JM, et al. Factors influencing immediate results, complications, and short-term follow-up status after Inoue balloon mitral valvotomy: a North American multicenter study. *Am Heart J* 1992;124:160-6.
- w21. Iung B, Cormier B, Ducimetiere P, et al. Immediate results of percutaneous mitral commissurotomy. A predictive model on a series of 1514 patients. *Circulation* 1996;94:2124-30.
- w22. Cruz-Gonzalez I, Sanchez-Ledesma M, Sanchez PL, et al. Predicting success and long-term outcomes of percutaneous mitral valvuloplasty: a multifactorial score. *Am J Med* 2009;122:581 e11-9.
- w23. Bouleti C, Iung B, Laouenan C, et al. Late Results of Percutaneous Mitral Commissurotomy up to 20 Years: Development and Validation of a Risk Score Predicting Late Functional Results From a Series of 912 Patients. *Circulation* 2012;125:2119-27.
- w24. Hickey MS, Blackstone EH, Kirklin JW, et al. Outcome probabilities and life history after surgical mitral commissurotomy: implications for balloon commissurotomy. *J Am Coll Cardiol* 1991;17:29-42.
- w25. Renda G, Ricci F, Giugliano R, et al. Non-Vitamin K Antagonist Oral Anticoagulants in Patients With Atrial Fibrillation and Valvular Heart Disease. *J Am Coll Cardiol* 2017;69:1363-71.
- w26. Adragão P, Machado FP, Aguiar C, et al. Ablation of atrial fibrillation in mitral valve disease patients: five year follow-up after percutaneous pulmonary vein isolation and mitral balloon valvuloplasty. *Rev Port Cardiol* 2003;22:1025-36.
- w27. Cox JL, Boineau JP, Schuessler RB, et al. Successful surgical treatment of atrial fibrillation. Review and clinical update. *JAMA* 1991;266:1976-80.
- w28. Tinetti M, Costello R, Cardenas C, et al. Persistent atrial fibrillation is associated with inability to recover atrial contractility after MAZE IV surgery in rheumatic disease. *Pacing Clin Electrophysiol* 2012;35:999-1004.
- w29. Chen MC, Chang JP, Chang HW. Preoperative atrial size predicts the success of radiofrequency maze procedure for permanent atrial fibrillation in patients undergoing concomitant valvular surgery. *Chest* 2004;125:2129-34.
- w30. Wang RX, Lee HC, Li JP, et al. Sudden death and its risk factors after atrioventricular junction ablation and pacemaker implantation in patients with atrial fibrillation. *Clin Cardiol* 2017;40:18-25.