Type of arrhythmia recurrence predicts long-term success after stepwise ablation of persistent atrial fibrillation

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Background:

Catheter ablation for persistent atrial fibrillation (AF) is well-established therapy. However, results of а randomized controlled multi-centre trials on ablation techniques other than pulmonary vein isolation (PVI) have not demonstrated superiority. We previously presented the "stepwise approach" aiming at AF termination resulting (SR) in sinus rhythm maintenance in most patients. In this retrospective analysis, we investigated, whether the type of recurrence determined arrhythmia-free survival.

Methods:

One hundred nine patients (age 57±9 years, 15% female) underwent repeat ablation after "stepwise approach" ablation. Patients were classified according to their type of recurrence: paroxysmal AF (PAF), atrial tachycardia (AT) and persistent AF (persAF). Patients with persAF recurrence had larger atria, longer continuous AF duration and converted less frequently to SR during the initial procedure as compared to patients with PAF or AT recurrence. Success was defined as atrial tachyarrhythmia-free survival during follow-up by means of serial Holter-ECG monitoring.



LA diameter >50mm

Conflict of interest: The authors declare, that they have no conflict of interest.