

Multiple repeat procedures seem beneficial in A-fib recurrence

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attempts to identify and eliminate non-PV triggers are effective and support the role of multiple repeat procedures for AF recurrence," the authors write.

More information: [Abstract](#)
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(HealthDay)—Most patients experience benefit after three or more catheter ablation procedures for atrial fibrillation (AF), according to a study published in the April issue of the *Journal of Cardiovascular Electrophysiology*.

David Lin, M.D., from the Hospital of the University of Pennsylvania in Philadelphia, and colleagues characterized pulmonary vein (PV) status, arrhythmia sources, and outcomes with three or more ablation procedures. Participants included 2,886 patients who underwent PV antral isolation.

The researchers found that 181 patients (6 percent) had more than two ablation procedures. The clinical arrhythmia was other than AF in 12 patients. Of the remaining 169 patients, 41, 16, 18, and 17 percent had four, three, two, and one reconnected PV, respectively. Only 8 percent of patients had all PVs still isolated. Overall, 127 patients underwent provocative techniques, which initiated PV triggers in 92 patients, including AF or PV atrial tachycardia in 50 percent. Forty-seven percent of [patients](#) had no AF off antarrhythmic drugs (AAD) at a mean of 36 months after the last procedure; 21 percent had no AF with AAD, and 13 percent had rare AF with good symptom control. Nineteen percent had recurrent AF.

"Our findings suggest that PV reisolation and

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