



EMBARGOED UNTIL 19th NOVEMBER 2022 1800HRS SGT

Late Breaking Trials 1 – Quick Fire

Cryo Global Registry (A sub-analysis) : 2-Year Outcomes of Cryoballoon AF ablation in Korea

Atrial fibrillation (AF) is increasingly becoming a major healthcare burden in Korea due to an aging population. This study focused on the outcomes of cryoballoon AF ablation in Koreans. Freedom from recurrence of AF, flutter and atrial tachycardia at 24 months was 71.9% in paroxysmal AF and 49.3% in persistent AF. Differences from the global data include: slightly larger atrial size, shorter ablation time and intracardiac echocardiography was frequently used. Closer ECG monitoring post ablation during follow up was also performed in Korea as compared to the population in the Cryo Global Registry.

MIYABI Registry: Visitag Surpoint (VS)-guided RF ablation for atrial fibrillation (AF)

Visitag surpoint (VS)-guided ablation has been reported to be effective in achieving durable pulmonary vein isolation (PVI) and results in improvement in the 12 month success rate, however these results are mainly in the Europe and USA and not in Asia. A prospective, multicentre, observational study was studied in patients with symptomatic paroxysmal AF or early (<6 months) persistent AF. The primary acute effectiveness of PVI at the end of the procedure was achieved in 99.7%. Recurrence-free rates were similar in the paroxysmal and persistent AF groups. The key difference was that VS-guided ablation in AF in Japanese patients were performed using relatively low ablation index but still achieved relative acute isolation at the end of the procedure.

AMULET IDE: 3-year outcomes from the Amplatzer Amulet™ Left atrial appendage (LAA)occlude

A prospective, global, multi-center trial with 1:1 Randomization comparing safety and effectiveness of the dual-seal mechanism Amulet™ LAA occluder vs the single occlusive Watchman™ in patients with non-valvular atrial fibrillation (AF). The Amulet Occluder had higher complete LAA closure when analyzed on TEE at both 45 days and 12 months. A significantly higher percentage of patients were free of oral anticoagulation usage at 3 years with Amulet occluder (96.2%) versus Watchman device (92.5%) (p<0.01). Cardiovascular and all-cause deaths trended higher in the Watchman than the Amulet device group, however the composite rates of stroke/systemic embolism or cardiovascular death at 3 years were comparable.

Impact of steerable delivery sheaths on successful closure of Left atrial appendage (LAA) with Amulet (STEER-CLOSE study)

Percutaneous LAA occlusion has evolved to be an important strategy in stroke prophylaxis in patients with non-valvular atrial fibrillation (AF), however numerous factors contribute to the complexity of the procedure. This study aims to study the outcomes of acute leaks as well as safety outcomes between using a non-steerable and a novel steerable sheath. The novel steerable sheath allows for controlled maneuverability and also has the beauty of a haemostasis valve to reduce bleeding. On top of this, the Amulet only requires the disc or lobe to completely touch the walls of the LAA whilst the Watchman requires the body to completely touch the walls of the LAA in a single seal. This perhaps contributes to the reduction in leaks. In conclusion, steerable sheaths aid in overcoming the anatomic complexity of the LAA and aid improved acute and 45 day closure rates while improving the safety profile of the procedure.

Session details:

Late Breaking Trials: Saturday 19th November 2022 9.00-10.10 am SGT

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