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Cryoablation of atrial fibrillation and antiarrhythmic drug pretreatment: A single referral center experience

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Background: Pulmonary vein isolation (PVI) ablation has emerged as the gold standard of ablative strategies to treat medically refractory paroxysmal and persistent atrial fibrillation (AF). Regardless of the superiority of catheter ablation based on PVI over antiarrhythmic drug therapy, recurrence rates of AF remain higher than desired. Our objective was to assess the safety and efficacy of cryoablation in a single referral center.

Methods: This is a retrospective analysis of results after cryoablation treatment of AF over three years. 146 patients with AF underwent a cryoablation procedure in our clinical center and were followed-up for three years after the procedure.

Results: Cryoablation was clinically successful in 90.83% of the patients with paroxysmal AF and 60% of those with persistent AF. The clinical success of cryoablation was correlated with pretreatment with amiodarone and in the case of re-ablation. With respect to postoperative complications, major bleeding was correlated with female gender, treatment with rivaroxaban and amiodarone.

Conclusion: Freedom from recurrent AF is about 65% with follow-up limited to 1 to 2 years in major trials. We present a durable event free result in most patients out to 3 years with better outcomes than previously reported.

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