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Update of alcohol septal ablation for hypertrophic obstructive cardiomyopathy

Hypertrophic cardiomyopathy (HCM) is characterized by the presence of increased thickness of the left ventricular wall that is not solely explained by abnormal loading conditions. Two-thirds of the patients with HCM have an obstruction in the left ventricle after provocation or even while at rest. Left ventricular outflow tract obstruction in HCM is associated with greater morbidity and mortality, and relief of obstruction is associated with improvement in symptoms and perhaps outcome. The first step in treating obstruction is the introduction of negatively inotropic medications. The two invasive therapeutic approaches for treating a left ventricular obstruction are alcohol septal ablation and surgical myectomy. The final decision concerning the optimal invasive therapy for patients with obstructive HCM should be individualized to each patient depending on his/her wishes and expectations, way of life, age, heart morphology, and hemodynamics, as well as the experience of the treating center. There is a clear learning and safety curve associated with volume of procedures in all forms of septal reduction; this suggests that these procedures should only be performed in expert centers (centers of excellence).

Biography

Josef Veselka has attended Medical school at Charles University, Prague, Czech Republic, and graduated in 1989. He is a Professor of Medicine, Chief of Department of Cardiology, 2nd Medical School, Charles University and University Hospital Motol, Prague. His main expertise and interest is both in cardiomyopathies and interventional cardiology. He is one of the pioneers in the field of structural and coronary interventions. He has been published more than 300 scientific papers and edited 5 monographs and textbooks. He is an Editorial Board Member of several medical journals.

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