

Atrial Fibrillation Ablation Pilot Registry

1-year follow-up results

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I have nothing to disclose.

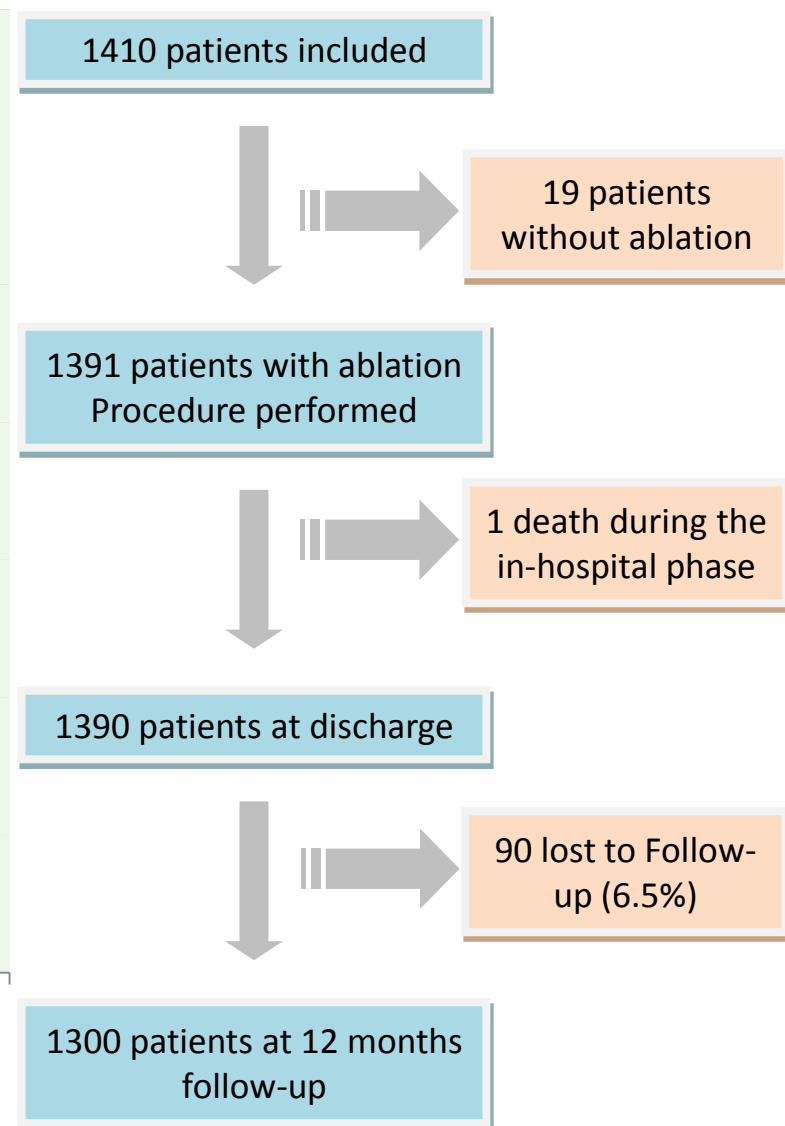
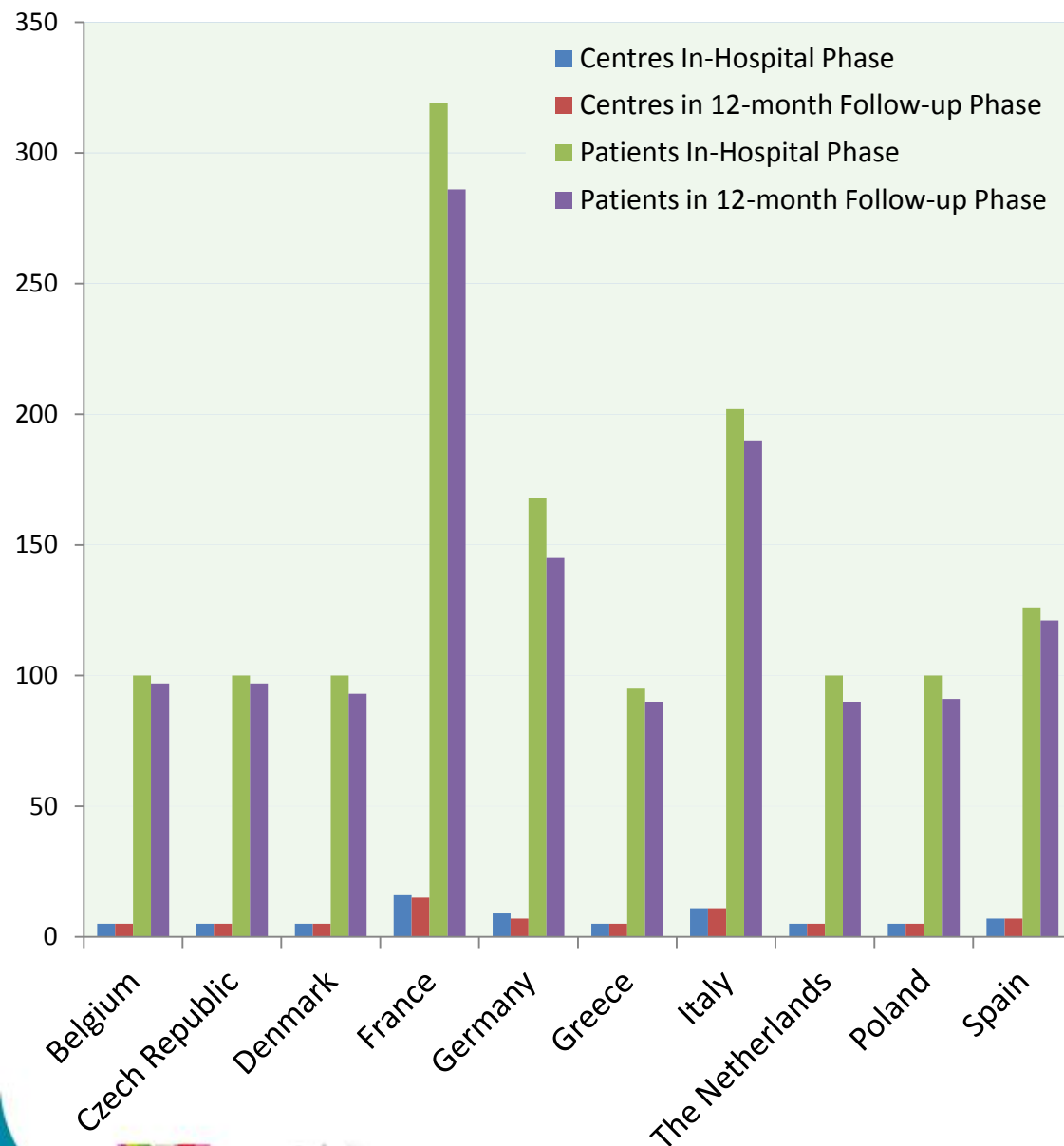
Atrial Fibrillation Ablation Pilot Study: a new feature of the EURObservational Research Programme

Primary endpoint

To describe the clinical epidemiology of patients undergoing an AFib ablation procedure, and the diagnostic / therapeutic processes applied in these patients across Europe.

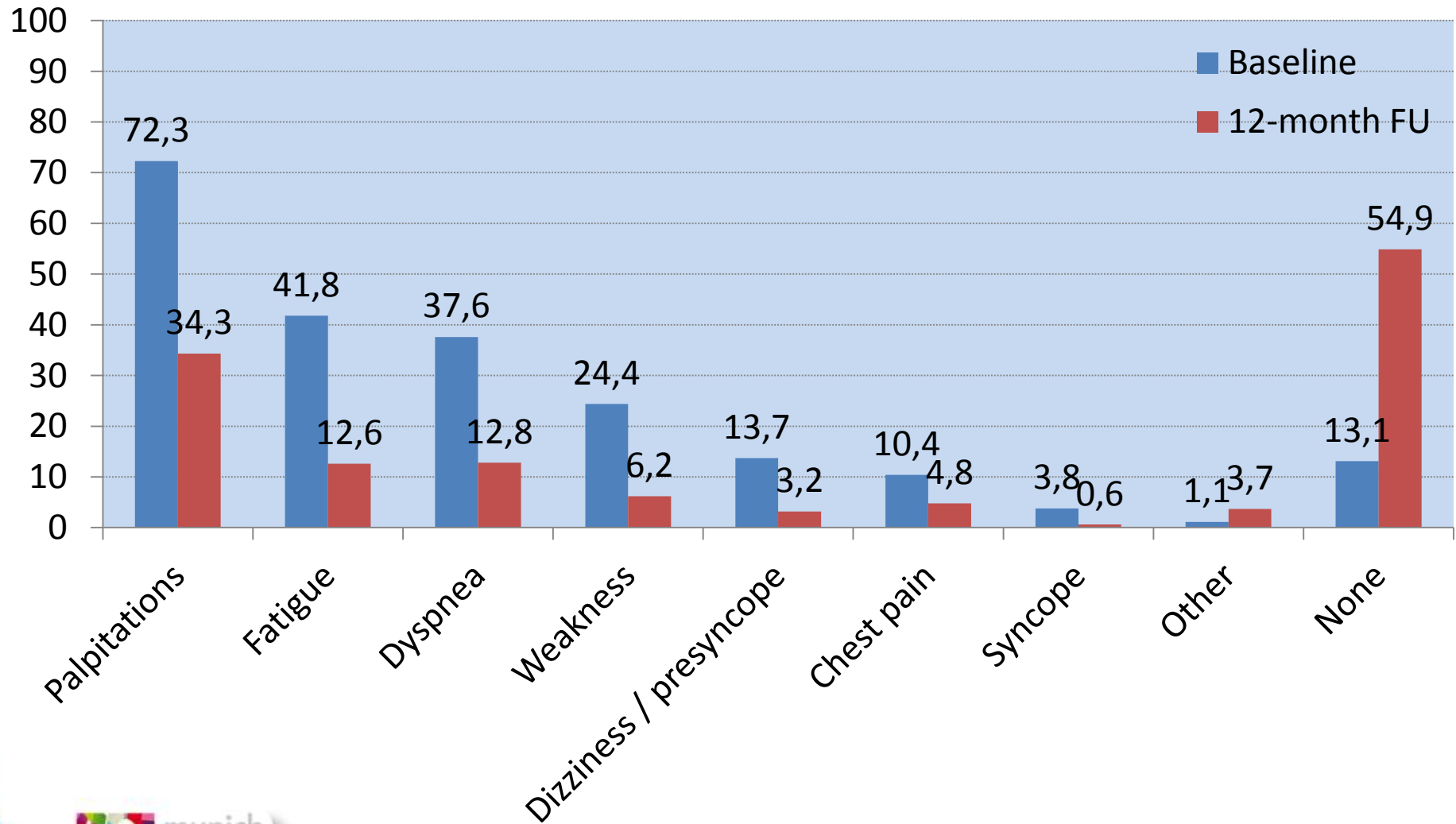
Specific aims

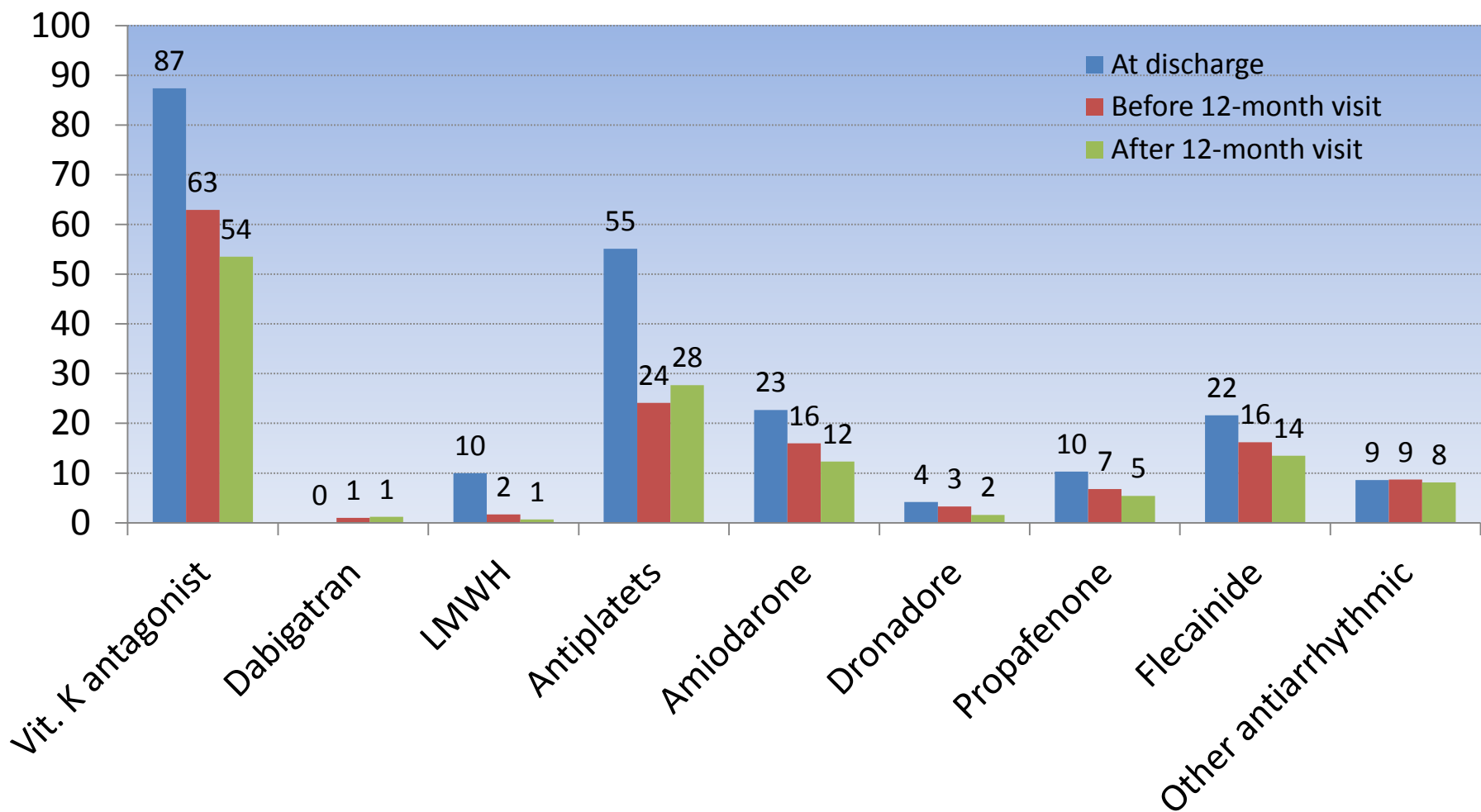
- To describe the demographic, clinical, and biological characteristics of patients undergoing a first AFib ablation procedure.
- To describe the diagnostic and therapeutic approaches undertaken in the routine practice of cardiologists performing AFib ablation procedures.
- To assess the acute and chronic outcomes.
- To assess the short- and long-term safety/complications of the procedure.
- To assess how the participating centres evaluate the success of the procedure during the follow-up.
- To evaluate how the recommendations of the most recent European guidelines are adopted in clinical practice.



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Follow-up status





Anticoagulation at 12-m FU according to cardioembolic risk

CHADS₂, %

0 53.1
1 69.0
>1 81.6

CHADS₂-Vasc, %

0 48.0
1 63.3
>1 76.2

12-MONTH RESULTS

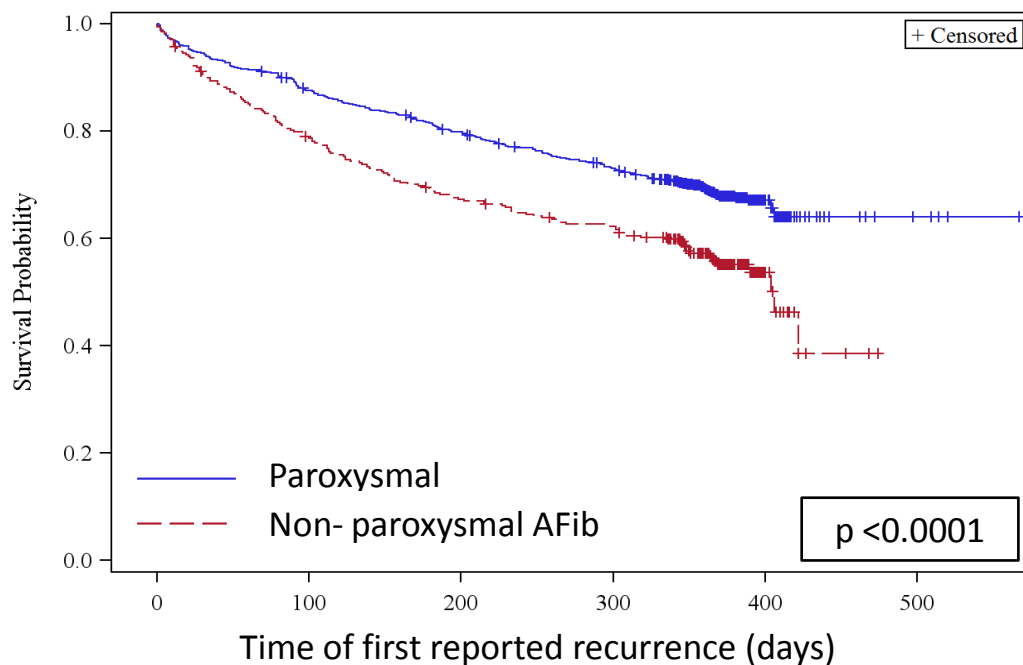
333 patients with at least one recurrence at **12-month follow-up after the blanking period** (26.1%)

4 deaths at **12-month follow-up** (1 included in recurrences)

944 patients with **NO** recurrence at **12-month follow-up** (73.7%)

One-year FAILURE in 337 patients (26.3%)

One-year SUCCESS in 944 patients (73.7%)



Complications

In-hospital phase
7.7%
(major 1.7%)

12-m follow-up
2.6%
(major 0.8%)

Mortality after catheter ablation of AFib

In-hospital phase, (%) 1 (0.07)

Cardiovascular, % 1 (0.07)

12-month follow-up, (%) 4 (0.31)

Cardiovascular, % 2 (0.16)

Non-cardiovascular, % 1 (0.08)

Unknown, % 1 (0.08)

Take-home Messages

- ✓ There are obvious differences in patient characteristics between patients undergoing an AFib catheter ablation to the overall population suffering from AFib: they are younger with paroxysmal AFib with no underlying heart disease. Only a third were women.
- ✓ The indication for the ablation was symptoms in almost 90% of patients. However, up to a third of the population also wanted a drug-free life-style.
- ✓ The procedure was considered successful in 74% of patients, meaning no documented arrhythmias after a 3-month blanking period. However, 32% of all patients were still taking antiarrhythmic drugs.
- ✓ Complications during the first year after the ablation were infrequent (2.6%), and mainly related to cerebrovascular events (0.54%) or vascular injuries (0.71%). However, the peri-operative complication rate is not negligible (7.7% of which, 1.7% was major) and must be weighed.
- ✓ There is clearly a gap between recommendations and the actual clinical practice that should be considered in the future (anticoagulation and antiarrhythmic medication management, type and frequency of follow-up, arrhythmia recurrence-documentation methodology, etc.).