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Radiofrequency ablation – new insights into the modern treatment of atrial flutter and fibrillation

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Abstract

Background: Atrial fibrillation (AF) is associated with a 5-fold increase in the risk of stroke and a 3-fold increase in the incidence of heart failure. The increase in AF prevalence can be attributed both to better detection of silent AF, alongside increasing age and conditions predisposing to AF. Non-pharmacological measures aimed at «healing» AF were initially tested in open surgery. Searching for an approach with a greater chance of success led to the development of radiofrequency ablation (RFA). Only recently RFA technique began to be used extensively in people with AF, not being tested in large randomized studies, with establishment of remote results.

Conclusions: Catheter ablation is used successfully in patients suffering from symptomatic paroxysmal atrial fibrillation, as an alternative to drug therapy. Performed correctly by a trained and experienced electrophysiolologist, RFA allows us to get remarkable results, being possible suspension of treatment with antiarrhythmic drugs and to avoid its so well known side's effects. RFA with catheter is superior to antiarrhythmic drug therapy in preventing recurrence in both persistent AF and in the paroxysmal AF. The success rate of RFA in experienced centers for paroxysmal AF exceeds 70% a year. RFA reintervention is necessary in the approximately 9-20% of patients with more modest results. The frequency of major complications related to RFA is less than 5%. The restored sinus rhythm with RFA in patients with heart failure may be associated with significant improvement in left ventricular ejection fraction.

Key words: atrial fibrillation, radiofrequency ablation.