



Arrhythmias

RADIOFREQUENCY CATHETER ABLATION IMPROVES SLEEP-DISORDERED BREATHING IN PATIENTS WITH ATRIAL FIBRILLATION

Poster Contributions

Poster Sessions, Expo North

Sunday, March 10, 2013, 3:45 p.m.-4:30 p.m.

Session Title: Arrhythmias: AF/SVT VIII

Abstract Category: 4. Arrhythmias: AF/SVT

Presentation Number: 1237-50

Authors: *Hirokazu Kondo, Toshihiro Tamura, Chisato Izumi, Yoshihisa Nakagawa, Tenri Hospital, Tenri, Japan*

Background: Sleep disordered breathing (SDB) is often associated with atrial fibrillation (AF), but the effect of radiofrequency catheter ablation (RFCA) on SDB is unknown. The purpose of this study is to clarify the incidence of SDB in patients undergoing RFCA for AF and the effect of RFCA on SDB.

Methods: Consecutive 77 patients (13 women; 64±8 years) with AF who underwent RFCA were studied. Overnight oximetry was performed 1 day before RFCA and the 3% oxygen desaturation index (3% ODI) was calculated. SDB was defined as 3% ODI ≥10. Patients with SDB were followed with overnight oximetry three months after RFCA.

Results: Among the 77 patients, 47 patients were with paroxysmal AF and 30 patients persistent AF, and the average of 3% ODI before RFCA was 9.51 ± 7.65. The 3% ODI of 38 patients (49%) were over 10 (19.3 ± 9.54). Of these 38 patients with SDB, 17 patients underwent overnight oxymetry again three months after RFCA. Of 17 patients, 16 maintained sinus rhythm at the second overnight oxymetry. The average of 3% ODI of these 17 patients significantly decreased from 18.2 ± 5.01 to 10.0 ± 5.98 three months after RFCA (P=0.0002) and in 15 patients of these 17 patients (88%), the 3% ODI decreased.

Conclusions: SDB frequently coexisted in patients with AF. SDB may be improved by RFCA in patients with AF.