Arrhythmias

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EPIDEMIOLOGICAL, CLINICAL AND PATHOLOGICAL CHARACTERISTICS OF SUDDEN DEATH IN THE MEDITERRANEAN AREA (EULALIA PROJECT

The EULALIA study determined

- epidemiological

aspects

- histopathological

- clinical

of SD victims in the Mediterranean area.

•	Cardiovascular disease	109	(90%)	
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- Non cardiovascular 6 (5%)
- (5%) No pathological findings

121 SD victims were studied:

100 men (54 ± 15 years) 21 women (60 ± 11 years)

Coronary artery disease 60 Valvular heart disease

Dilated cardiomyopathy

Aortic dissection

3 Pulmonary embolism Hypertrophic cardiomyopathy

ARVD

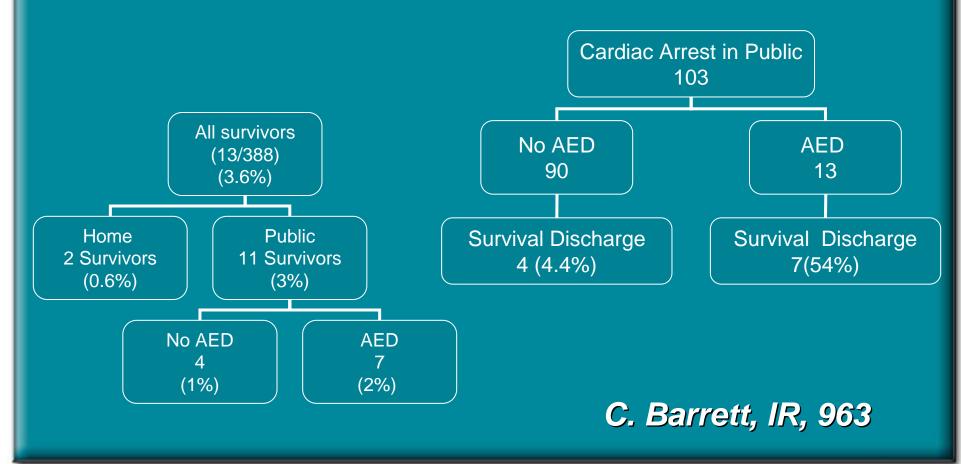
Congenital heart disease

28 Others

M. Subirana, ES, 964



Survival from out of hospital cardiac arrest: comparison of rapid defibrillation with an automatic external defibrillator with late or no defibrillation





SOFA: Study on Omega-3 Fatty acids and ventricular Arrhythmia

A multi-center trial on fish oil and arrhythmia in ICD-patients

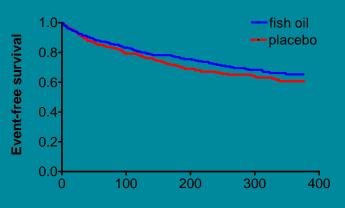
546 patients with an ICD

Fish oil (273 patients)

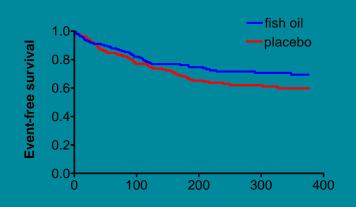
Placebo oil (273 patients)

Parallel, double-blind, randomized 2 g/day fish oil: provides ± 900 mg n-3 fatty acids equivalent to about 3-4 fish meals per week

Time to first VT/VF or death



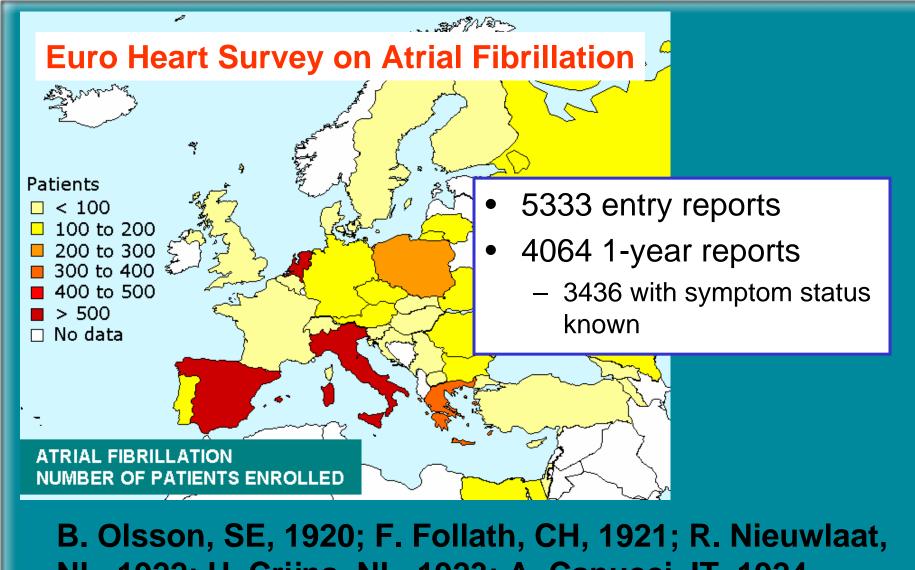
Survival time (days after randomization)



Survival time (days after randomization)

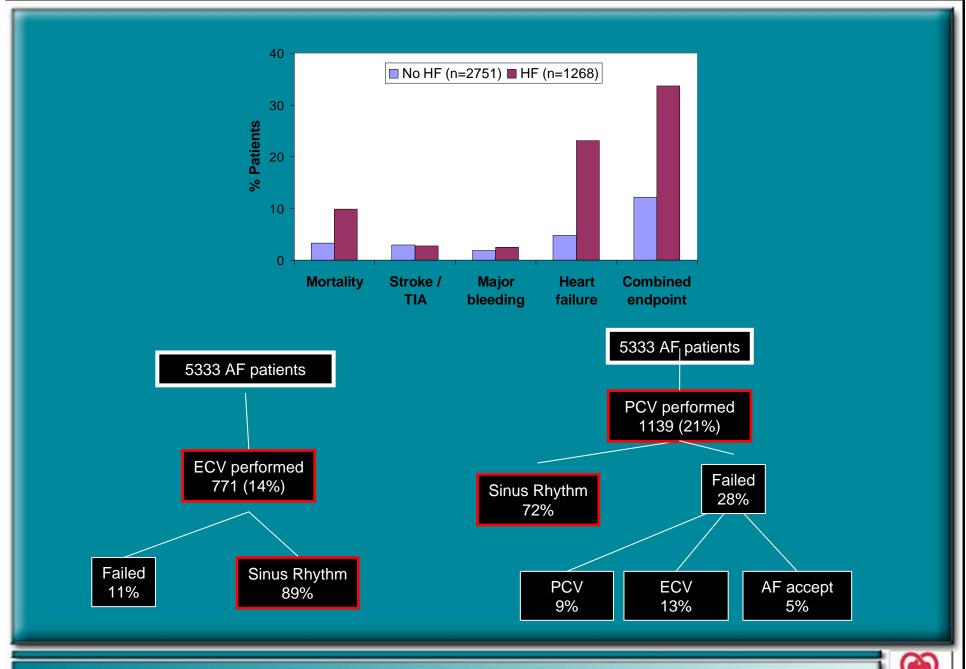
I. Brouwer, NL, 1336





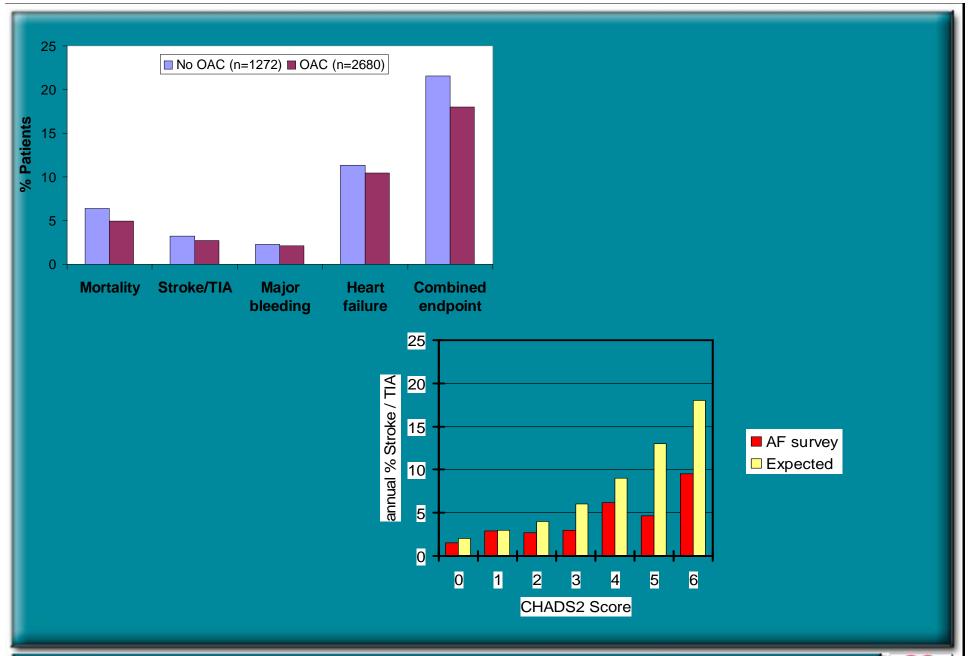
NL, 1922; H. Crijns, NL, 1923; A. Capucci, IT, 1924















SHORT TERM RESULTS OF EURAFA (EURopean Atrial Fibrillation Ablation) REGISTRY

476pts (491Abl)

Parox AF: 363pts (76%)

Single session 432 pts Repeated 54 pts

Acute success - 92%
with 42,6% (83 pts) of recurrences:
54 (65%) treated with AAD
8 (10%) electroversion
8 (10%) ablation
12 (14%) no treatment

Ostial PV ablation 230 pts
Anatomic Ablation 246 pts

219.6 +/- 68.7 min

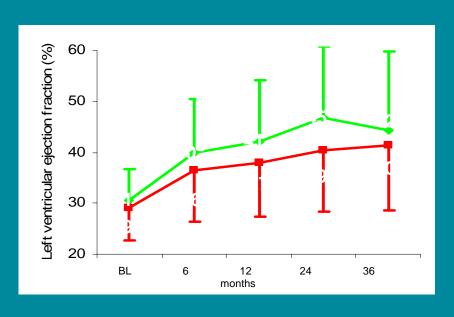
All complication
25/491 procedures - 5,1%
25/476 pts - 5,2%
Life-threatening complications
9/491 procedures - 1,8%
9/476 pts - 1,9%

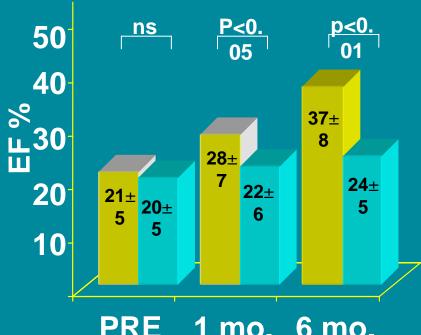
E Kozluk, PL, 956



Beneficial Effects of Biventricular Pacing Also in Patients With a "Narrow " QRS

Poor Response to CRT in Patients with Severe Right **Ventricular Dysfunction**





1 mo. 6 mo. PRE

M. Gasparini, IT, 2055; G. Magrini, IT, 2052



Take home messages

- Cardiac hypertrophy might be important to recognize
- Push authorities to implement EAD's
- Fish is good, to eat, not to prevent SD
- Treat very aggressively your patients with AF and heart failure. Do not forget anticoagulation when indicated
- Ablation of AF is good, but be realistic
- Consider CRT in patients with heart failure



The ECG remains the most powerful tool for diagnosis



