

Heart Foundation

Catheter ablation as a therapy for atrial fibrillation

The National Heart Foundation of Australia has released a consensus statement on catheter ablation as a therapy for atrial fibrillation (AF) on the 21 January 2013 in the Medical Journal of Australia.

Atrial fibrillation (AF) is estimated to affect 1%–2% of the population. It is increasing in prevalence, particularly with increasing age of the population. AF is associated with excess mortality, considerable morbidity and hospitalisations, especially from stroke and heart failure. AF is responsible for a significant and growing societal financial burden.

The aim in this consensus statement is to provide recommendations on the use of primary catheter ablation for AF in Australia, on the basis of current evidence. The main indication for catheter ablation of AF is the presence of symptomatic AF that is refractory or intolerant to antiarrhythmic medication.

The best results are seen in younger patients with paroxysmal AF, without structural heart disease or marked atrial enlargement. Ablation techniques for patients with persistent AF are still undergoing evaluation. Discontinuation of warfarin or equivalent therapies is not considered a sole indication for this procedure.

After AF ablation, anticoagulation therapy is generally recommended for all patients for at least 1–3 months. Discontinuation of warfarin or equivalent therapies after ablation is generally not recommended in patients who have a CHADS₂ score of ≥ 2 .

To find out more visit www.heartfoundation.org.au/atrial-fibrillation

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To find out more and to register visit www.heartfoundation.org.au/conference