

**23<sup>rd</sup> Prague Workshop on Catheter Ablation**

**April 20, 2021**

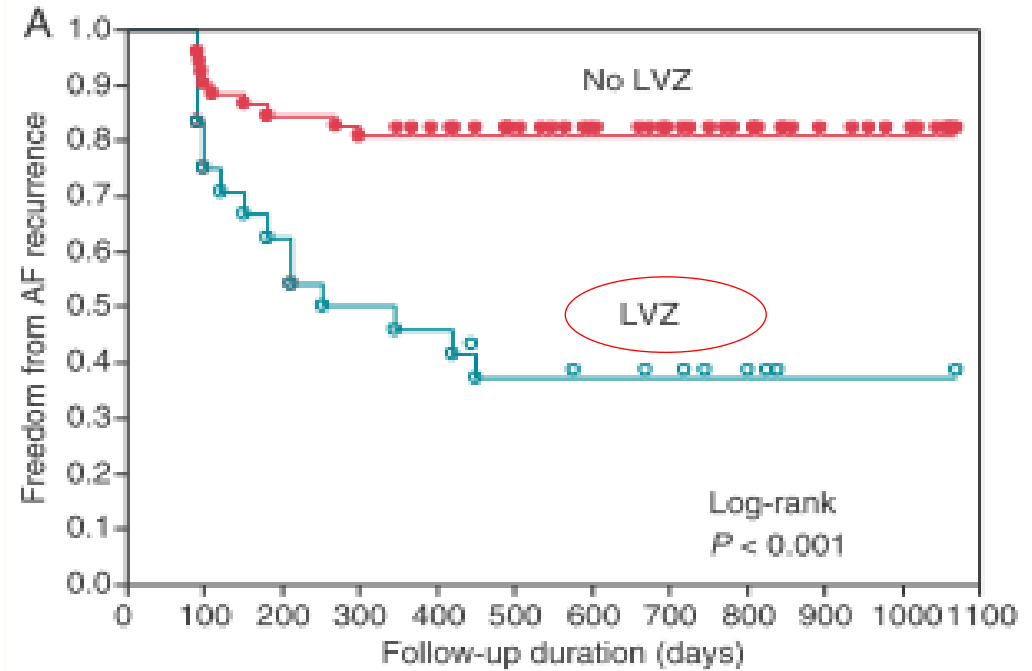
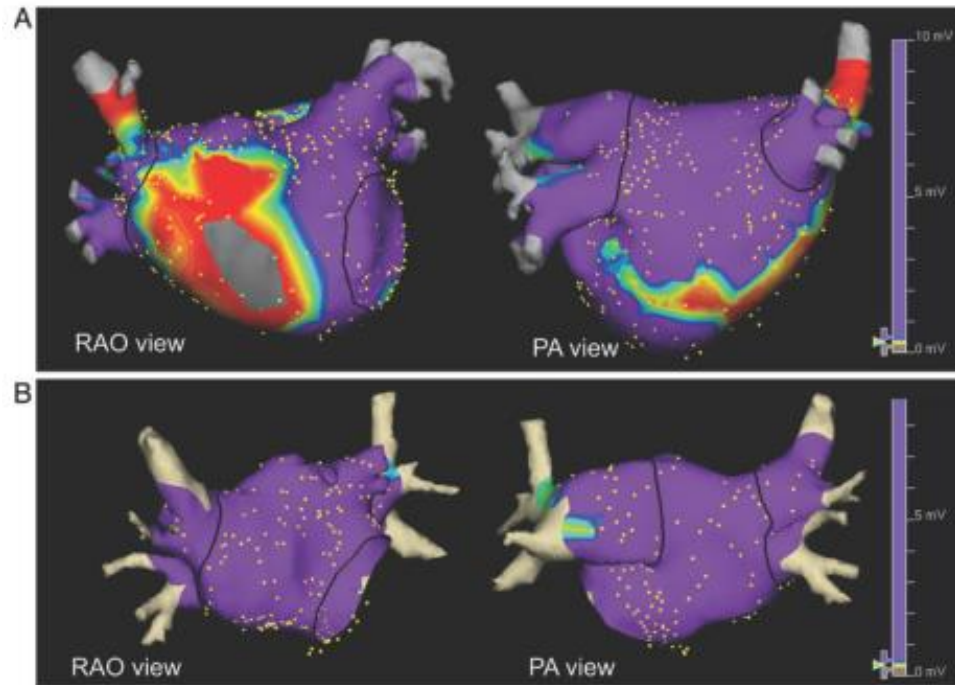
**Ablation of low voltage areas in persistent AF**

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# Conflict Of Interest

- Takanori Yamaguchi received honoraria from Abbott Medical Japan.
- Takanori Yamaguchi and Toyokazu Otsubo are affiliated with the Department of Advanced Management of Cardiac Arrhythmia, Saga University, sponsored by Abbott Medical Japan, Nihon Kohden Corporation, Japan Medtronic, Japan Lifeline, Boston Scientific Japan, and Fides-ONE Corporation.
- The other authors declare that they have no conflict of interest. This research did not receive a grant from any funding agency in the public, commercial, or not-for-profit sectors.

# Low-voltage Area < 0.5mV Predicts Recurrence after PVI alone

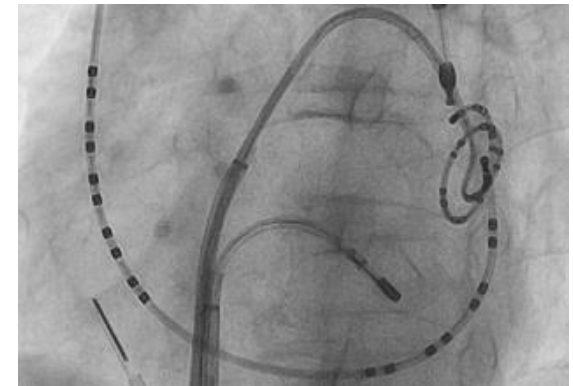
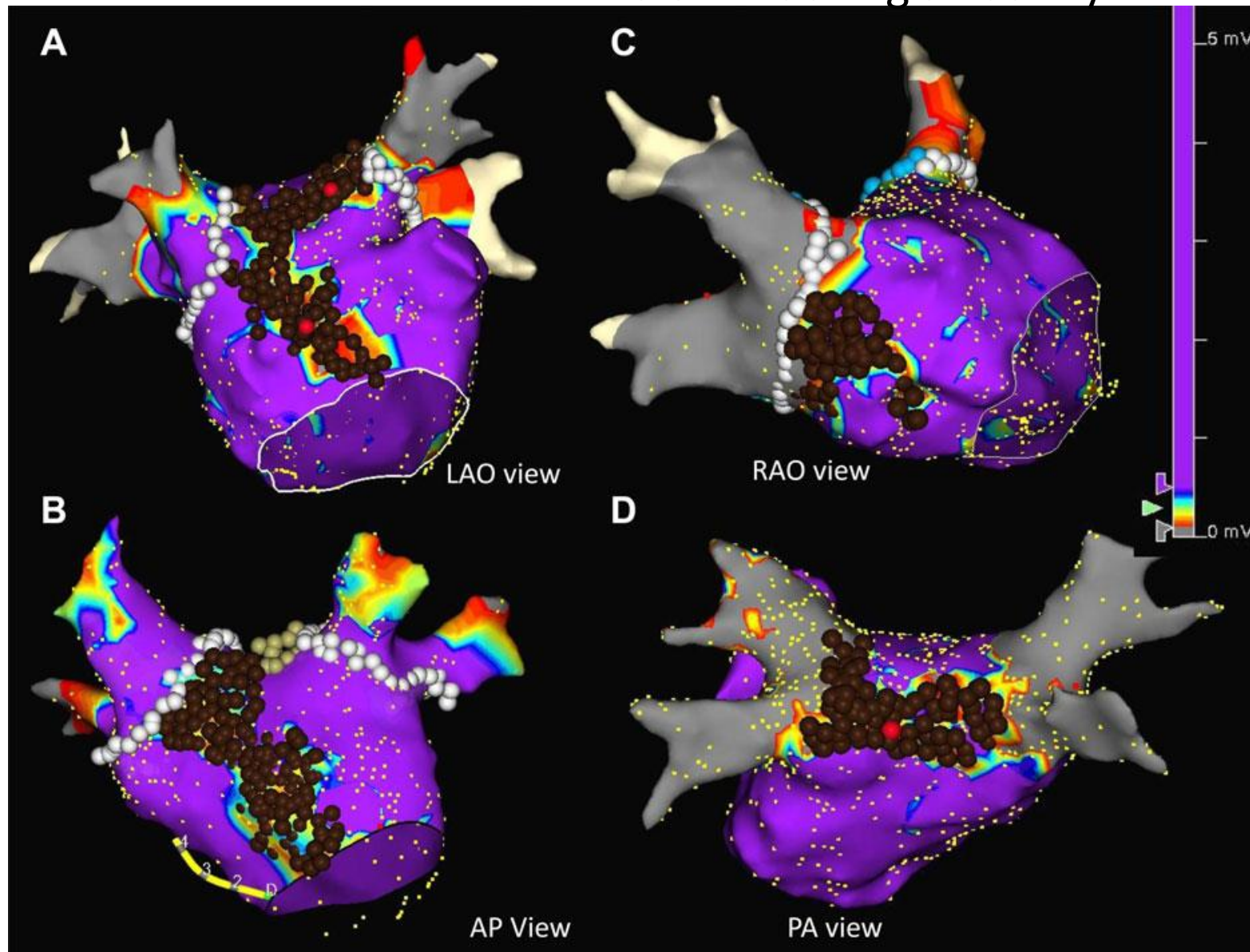


Yamaguchi, et al Europace. 2014;16(4):511-20)

LVZ has been considered as a surrogate of fibrotic tissue, and may be a marker of AF substrate

# Ablation Targeting LVA *on the assumption that LVA works as AF substrate*

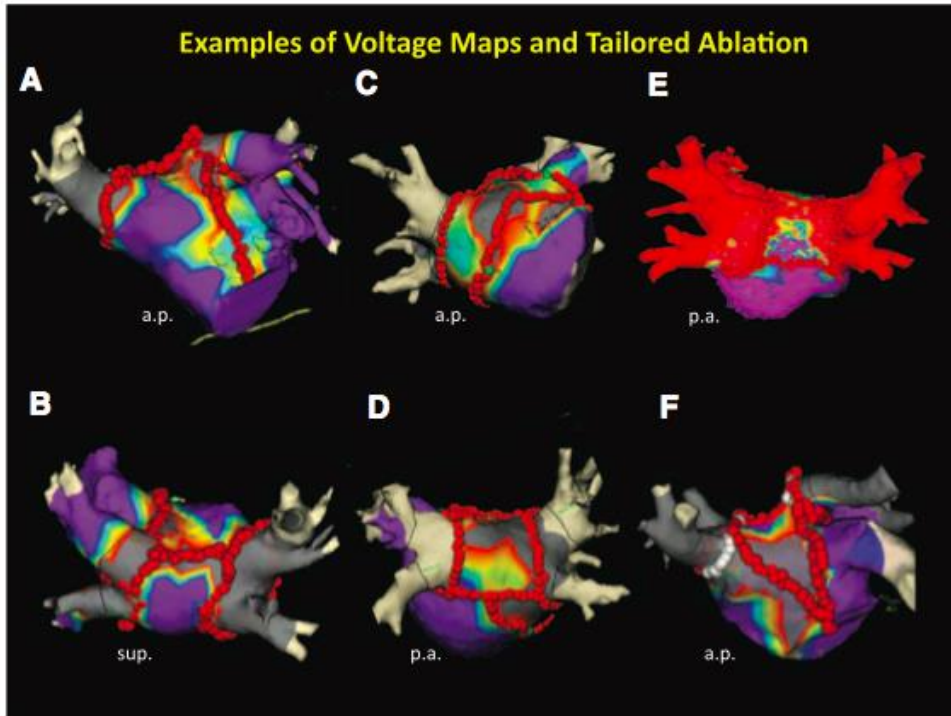
LVA < 0.5mV during sinus rhythm



101 patients with Nonparoxysmal AF

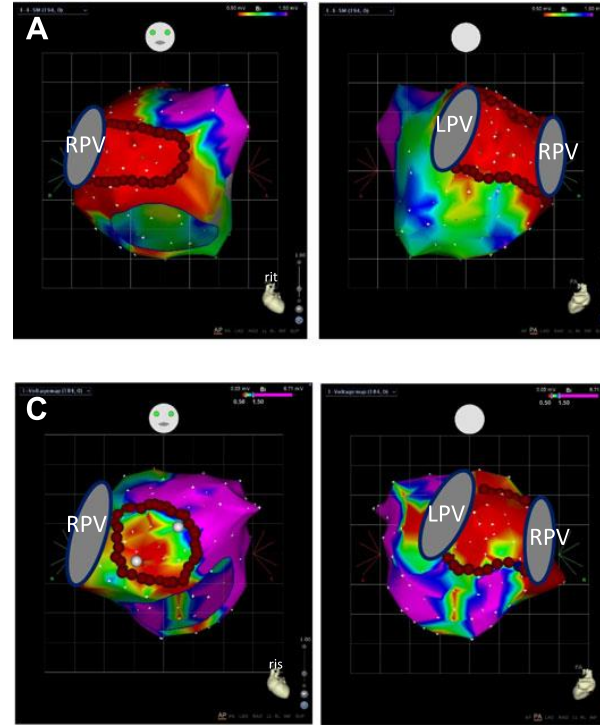
Yamaguchi JCE 2016

# Low-voltage based substrate ablation



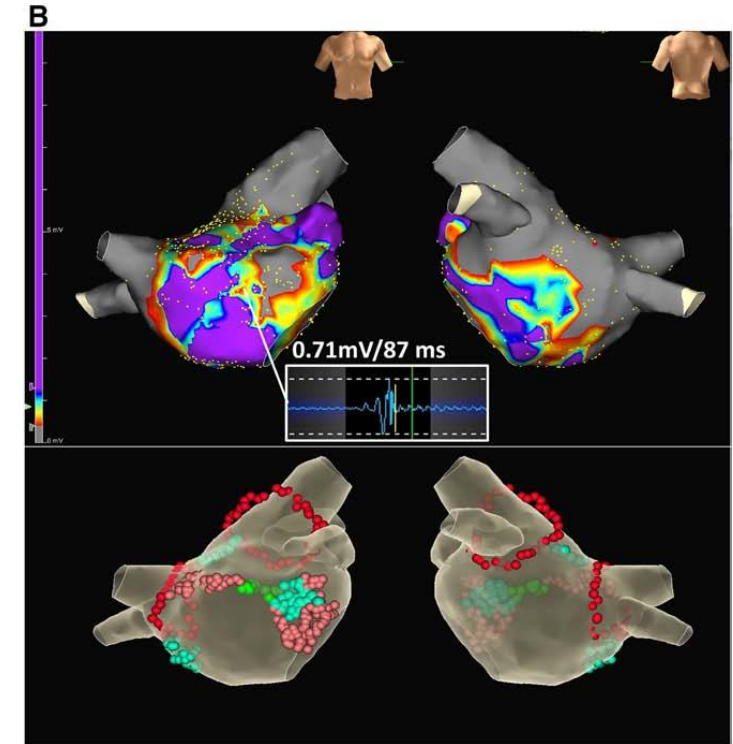
**Linear ablation across low-voltage area**  
**Isolation of low-voltage area**

Rolf et al. Circ AE 2014;5:825-833



**BIFA: Box isolation of fibrotic areas**

Kottkamp et al. JCE 2016;27:22-30

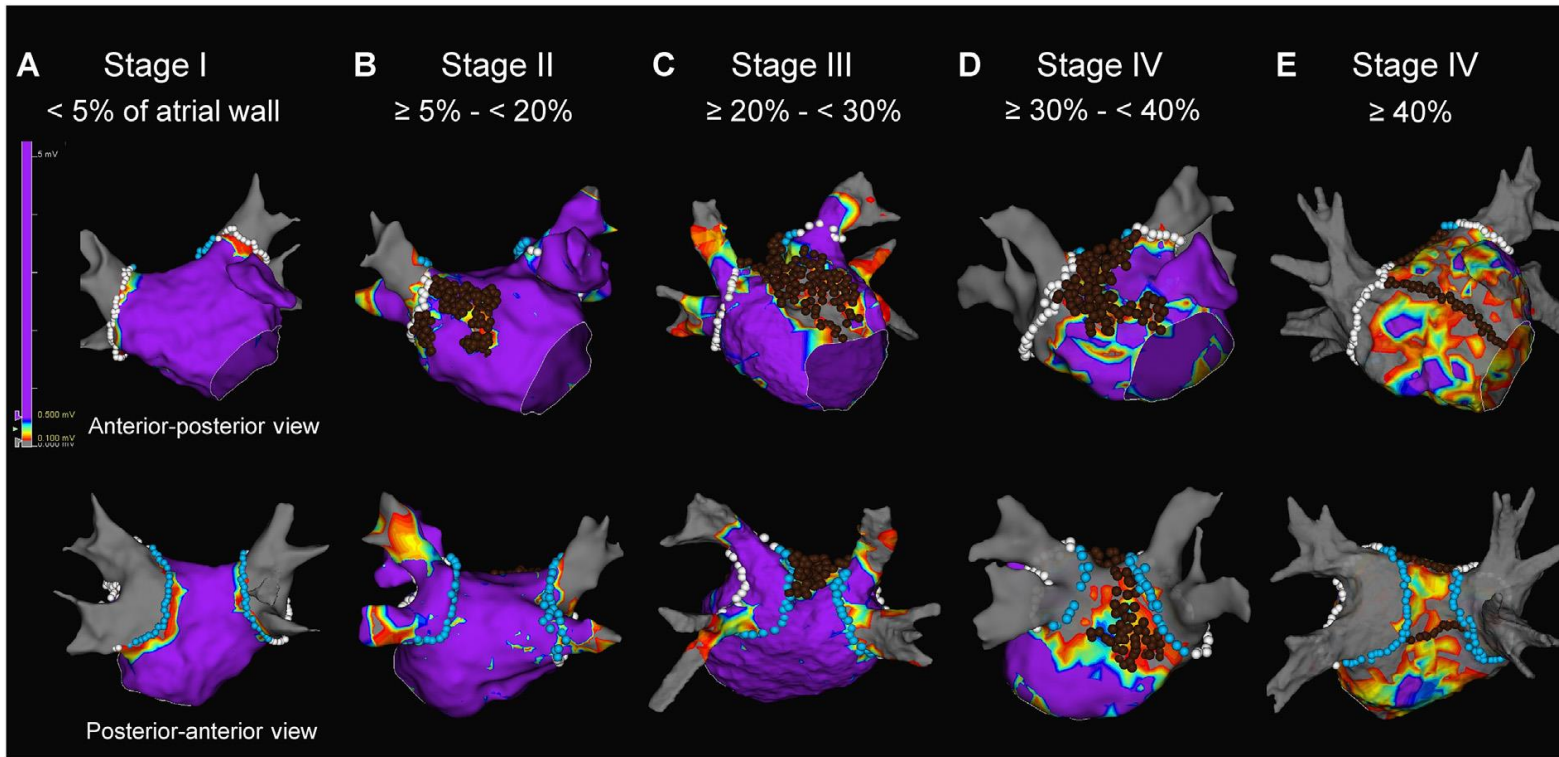


**LVA homogenization and de-channeling**

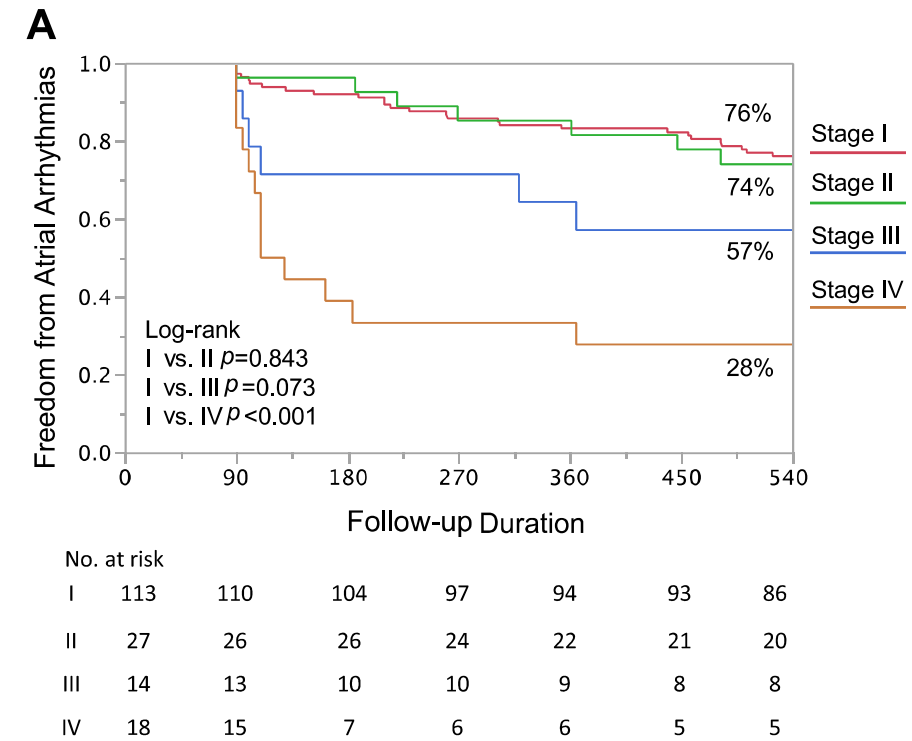
Yang et al. Circ Arrhythm Electrophysiol. 2016;9:e003382.



# Low-voltage based substrate ablation



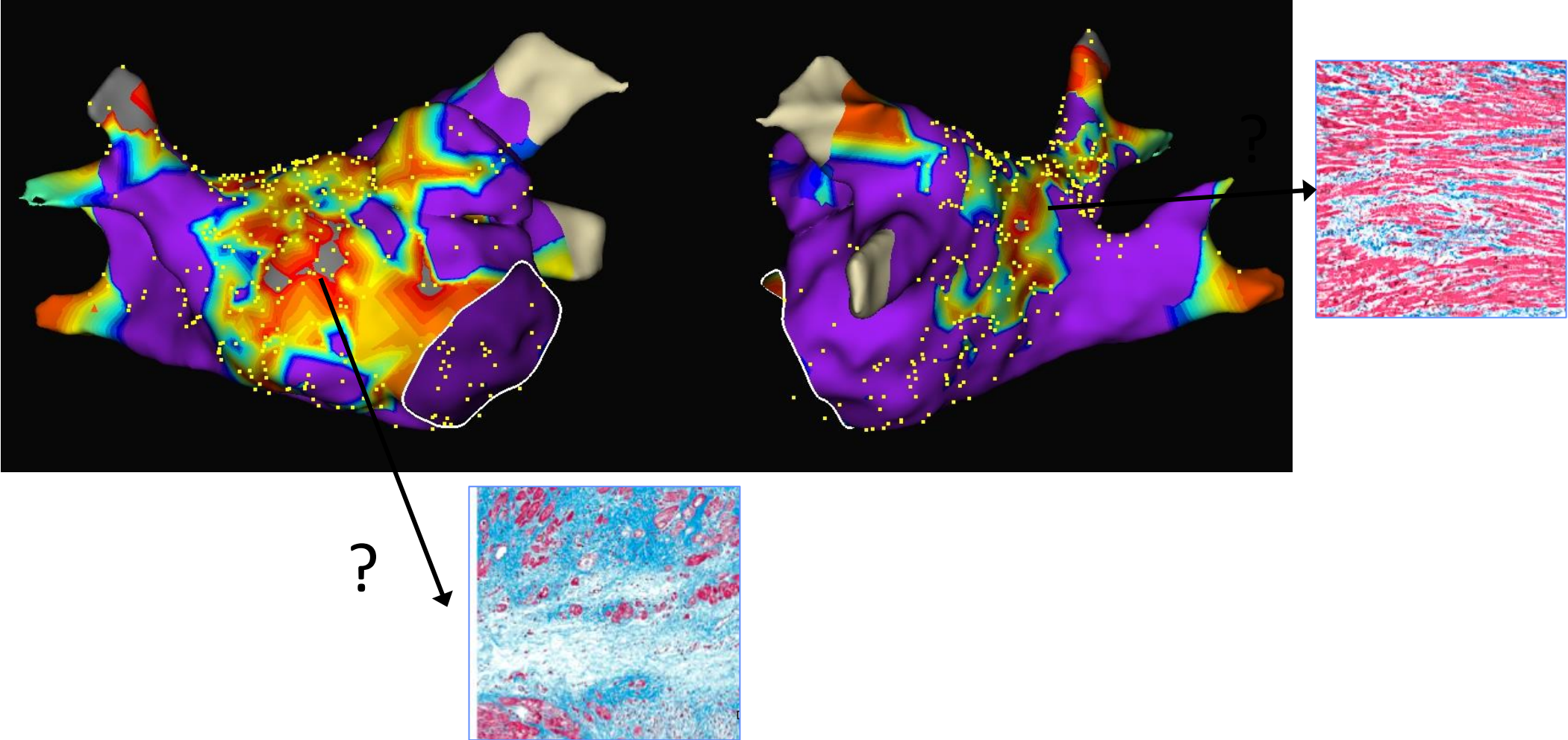
172 non-PAF patients  
 Stage 1 = 66%  
 Stage 2 = 16%  
 Stage 3 = 14%  
 Stage 4 = 10%



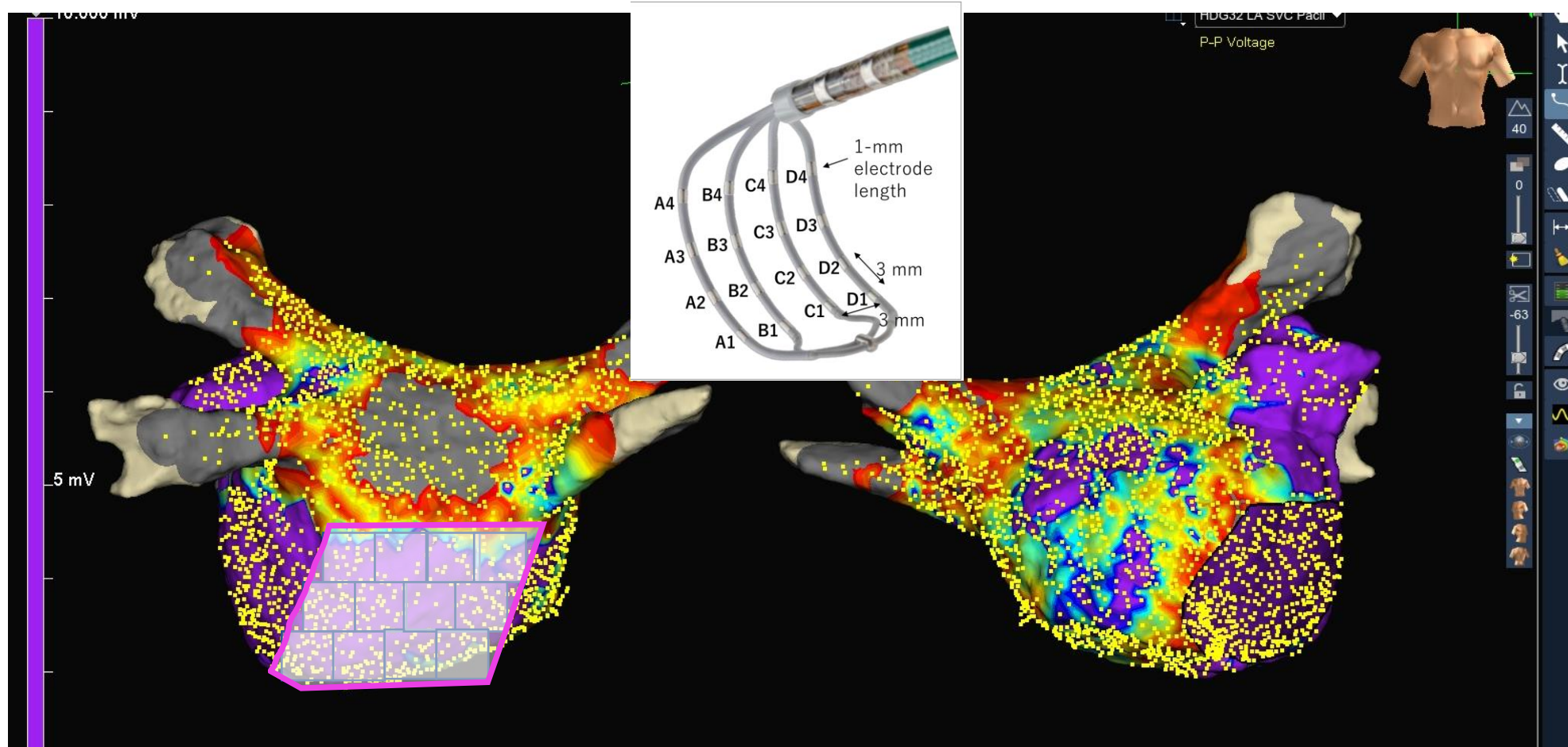
Yamaguchi et al. J of Cardiology 2018

*Does low voltage area reflect local fibrosis (or local diseased tissue)?  
Does Non-Low voltage area reflect healthy tissue?*

<0.5 mV



# mean LA voltage

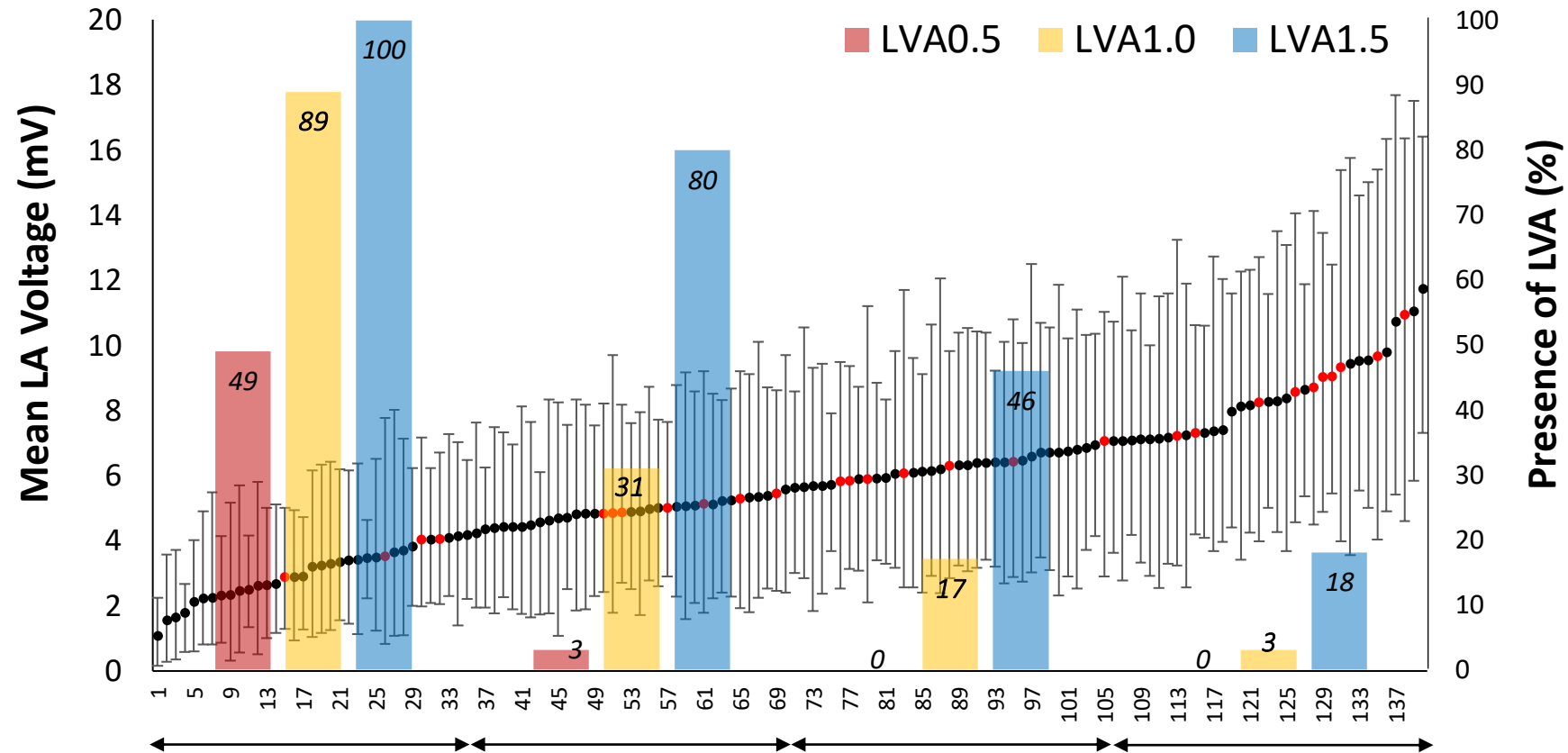


High-density voltage map was created using HD grid during right atrial appendage pacing  
LA was subdivided into each 1cm<sup>2</sup> area.  
Mean LA voltage was calculated using the highest voltage of each sub-area in the whole LA.



Figure 1

# Relationship between LVA and mean LA voltage

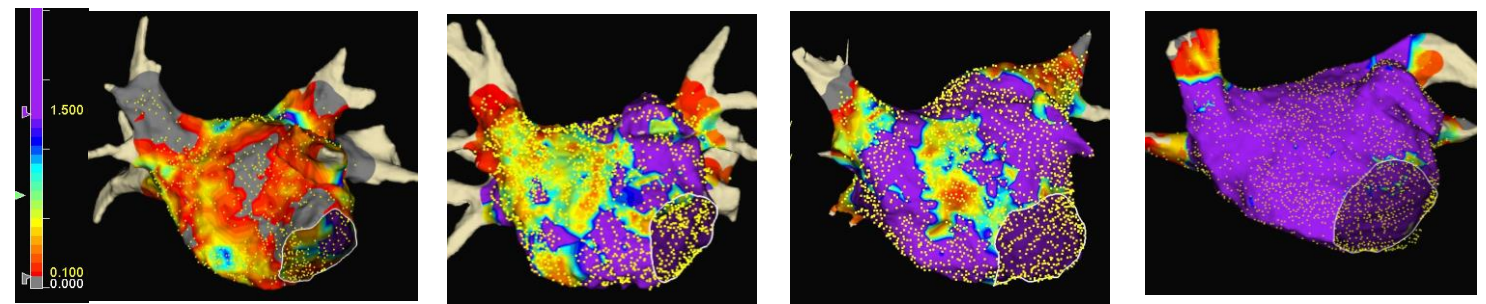


Q1

Q2

Q3

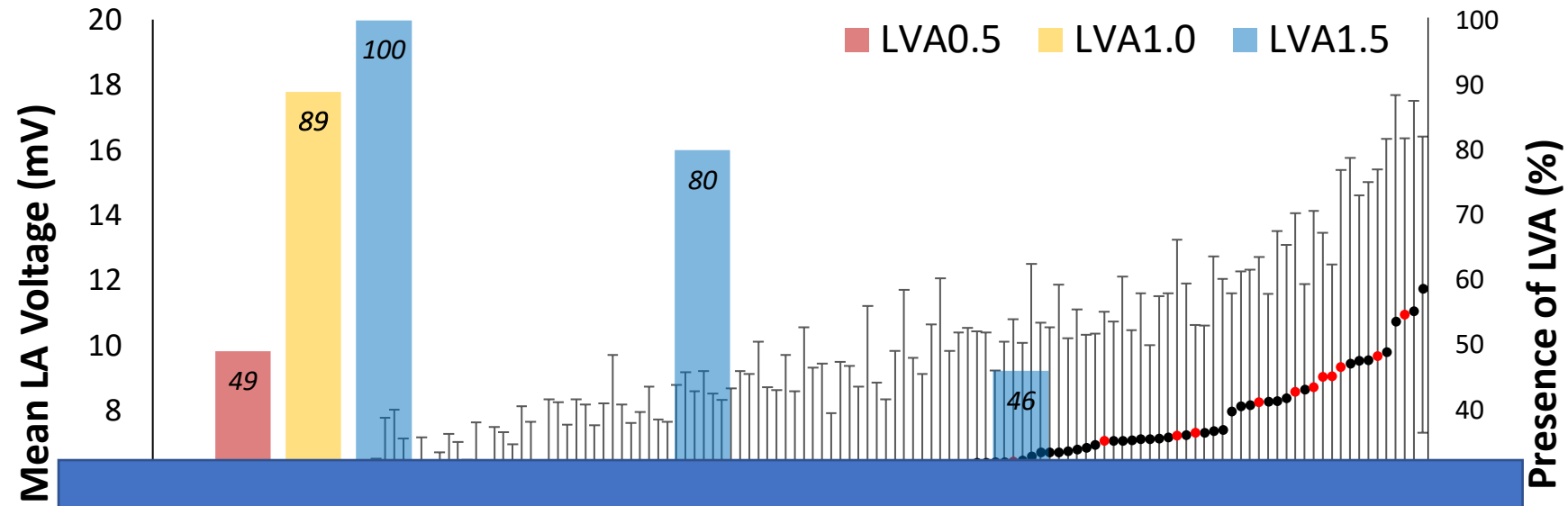
Q4



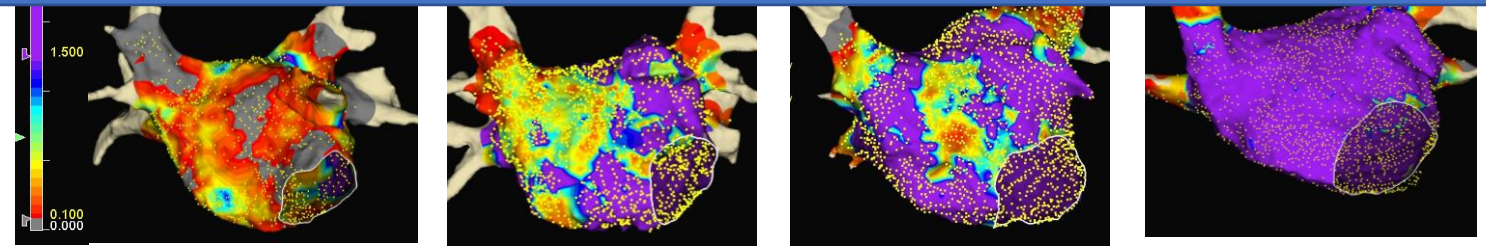
LVA defined as < 1.5mV

Figure 1

# Relationship between LVA and mean LA voltage

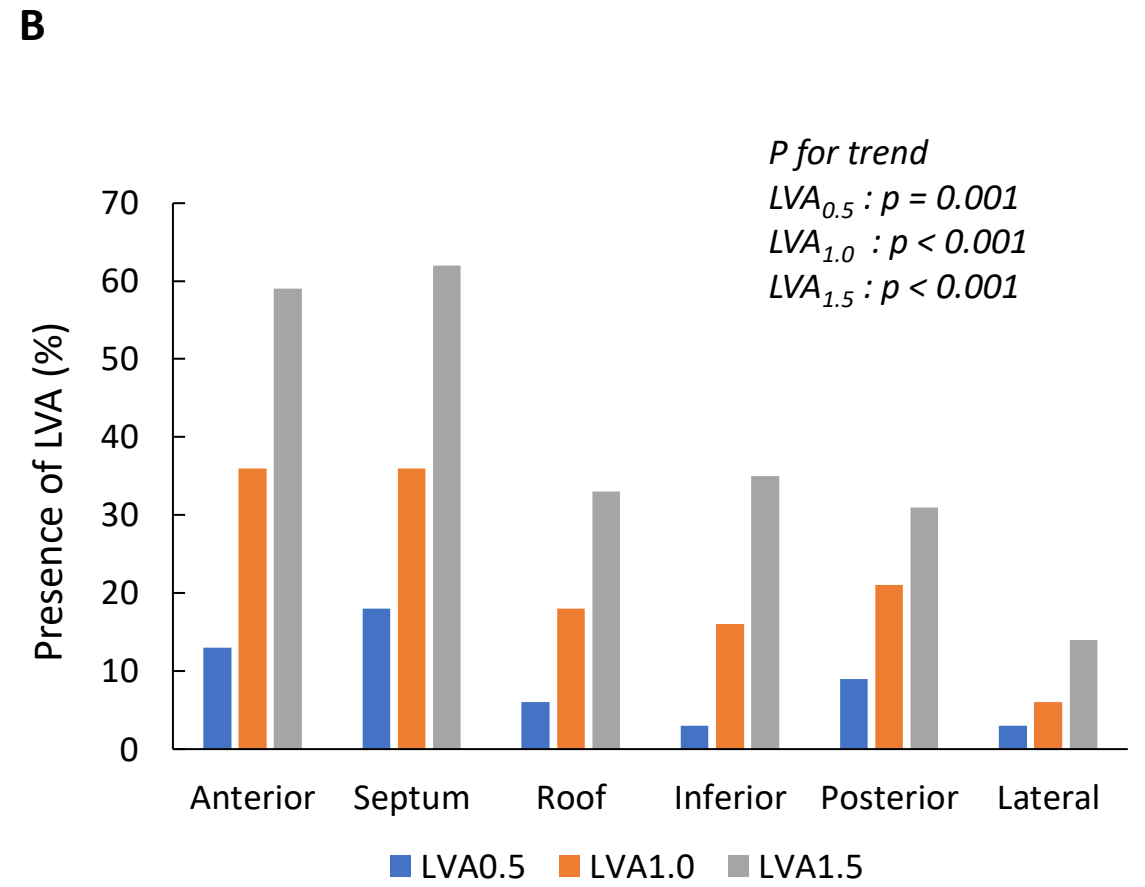
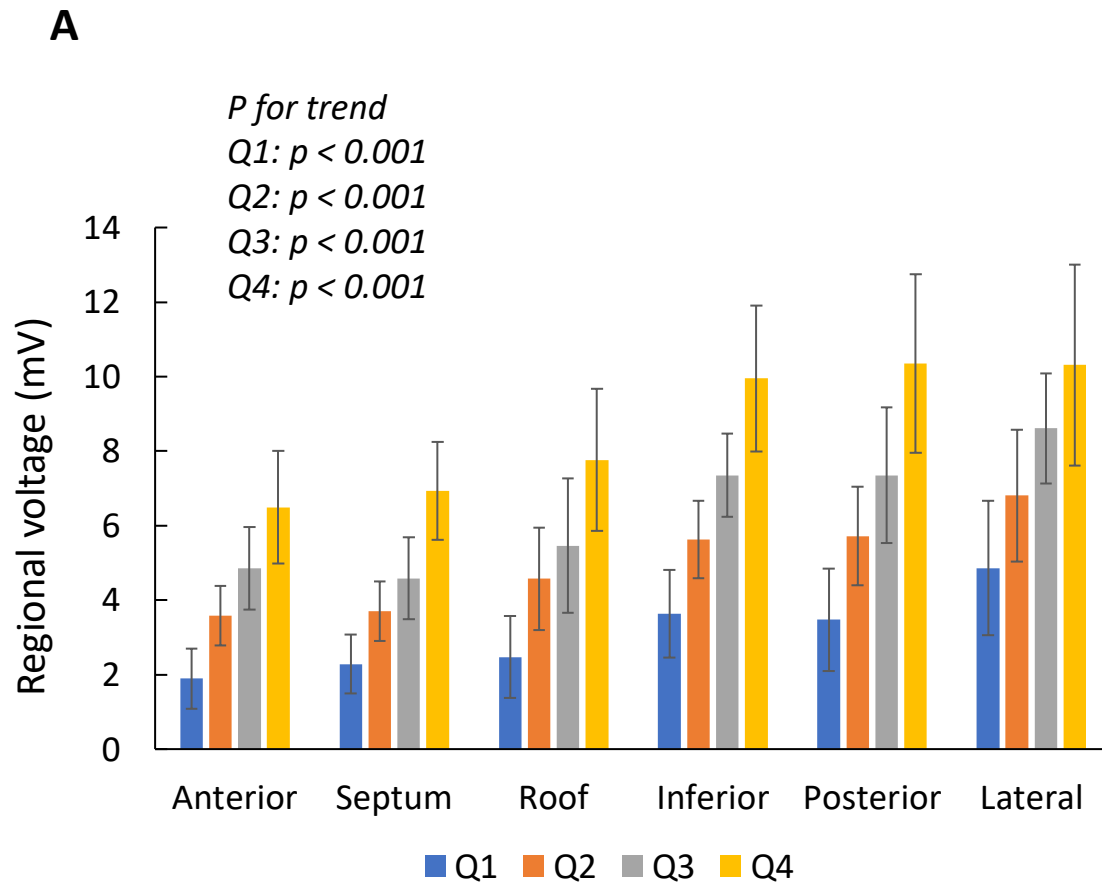


While individual LVAs represent localized voltage reduction, the presence of LVA reflects the global voltage reduction.



LVA defined as < 1.5mV

Figure 2 Relationship between regional voltage, mean LA voltage, and LVA

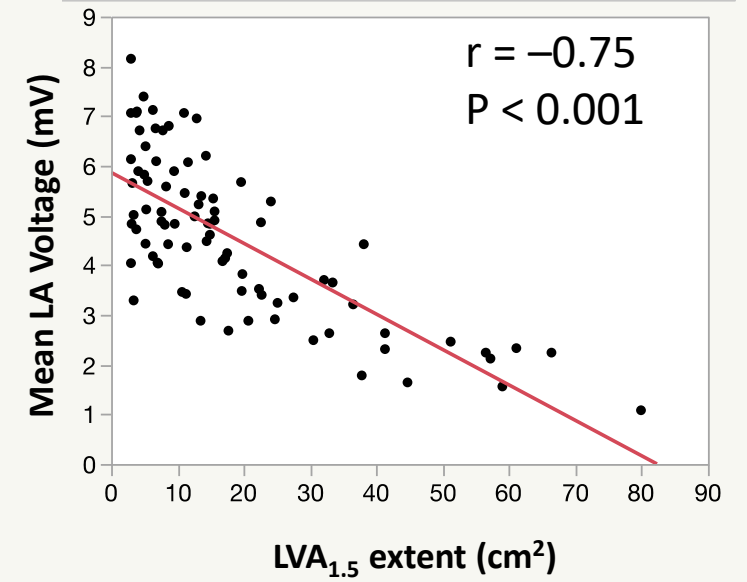
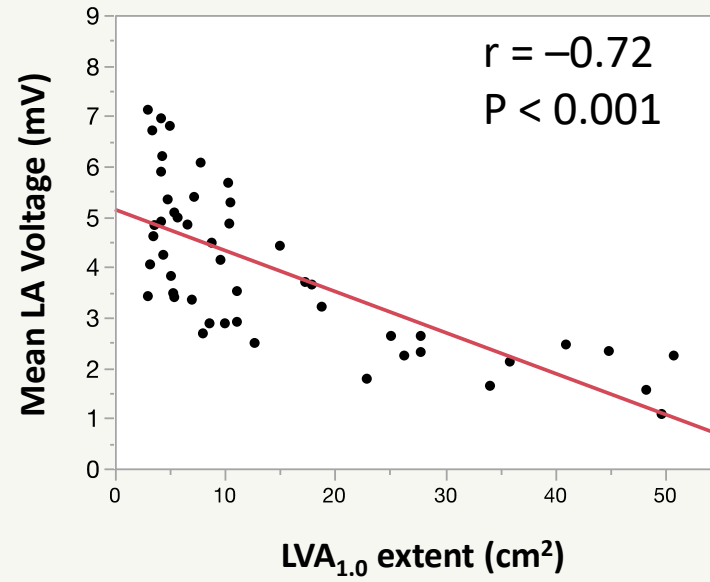
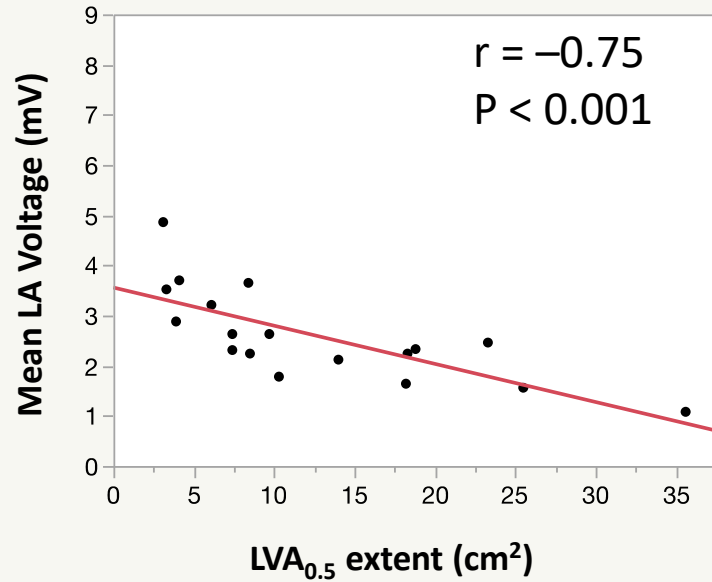


# Relationship between the extent of LVA and mean LA voltage

LVA <0.5mV

LVA <1.0mV

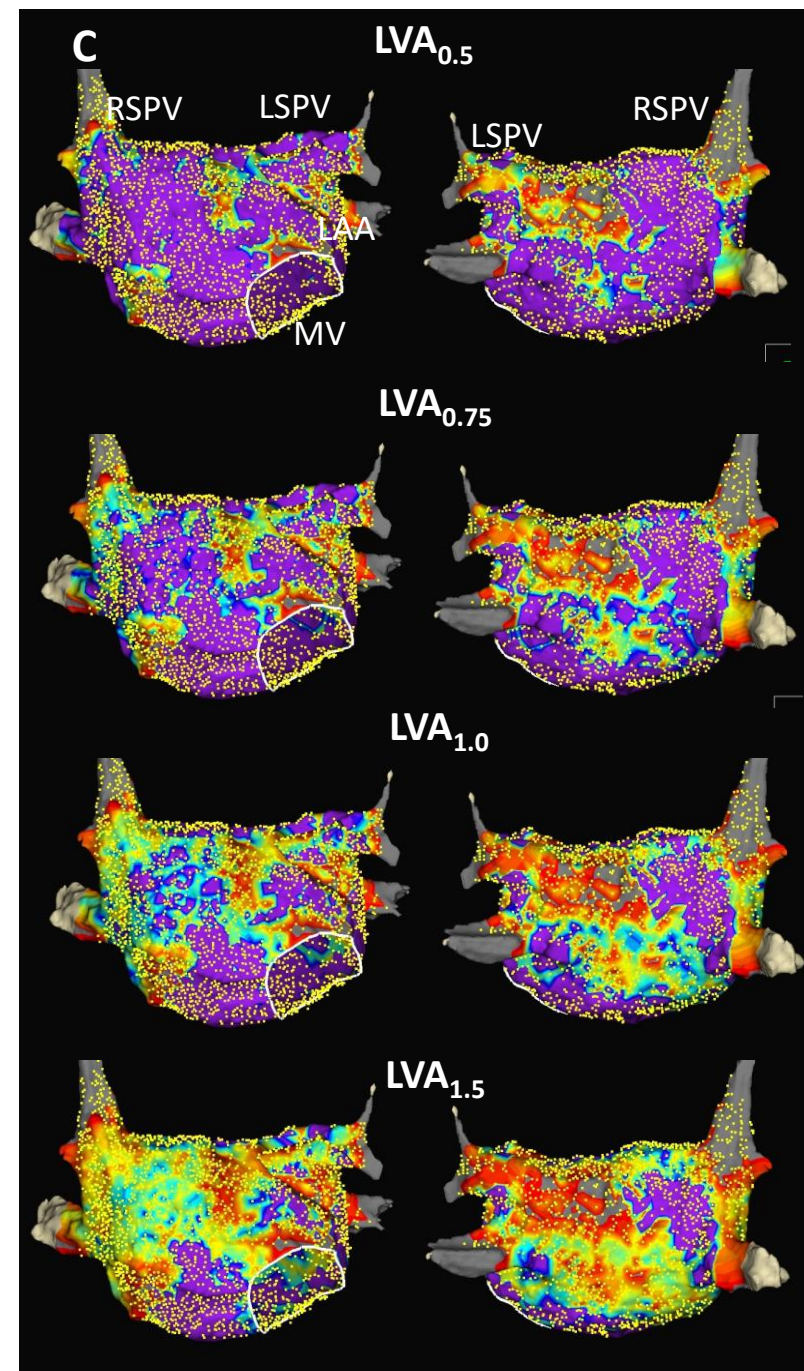
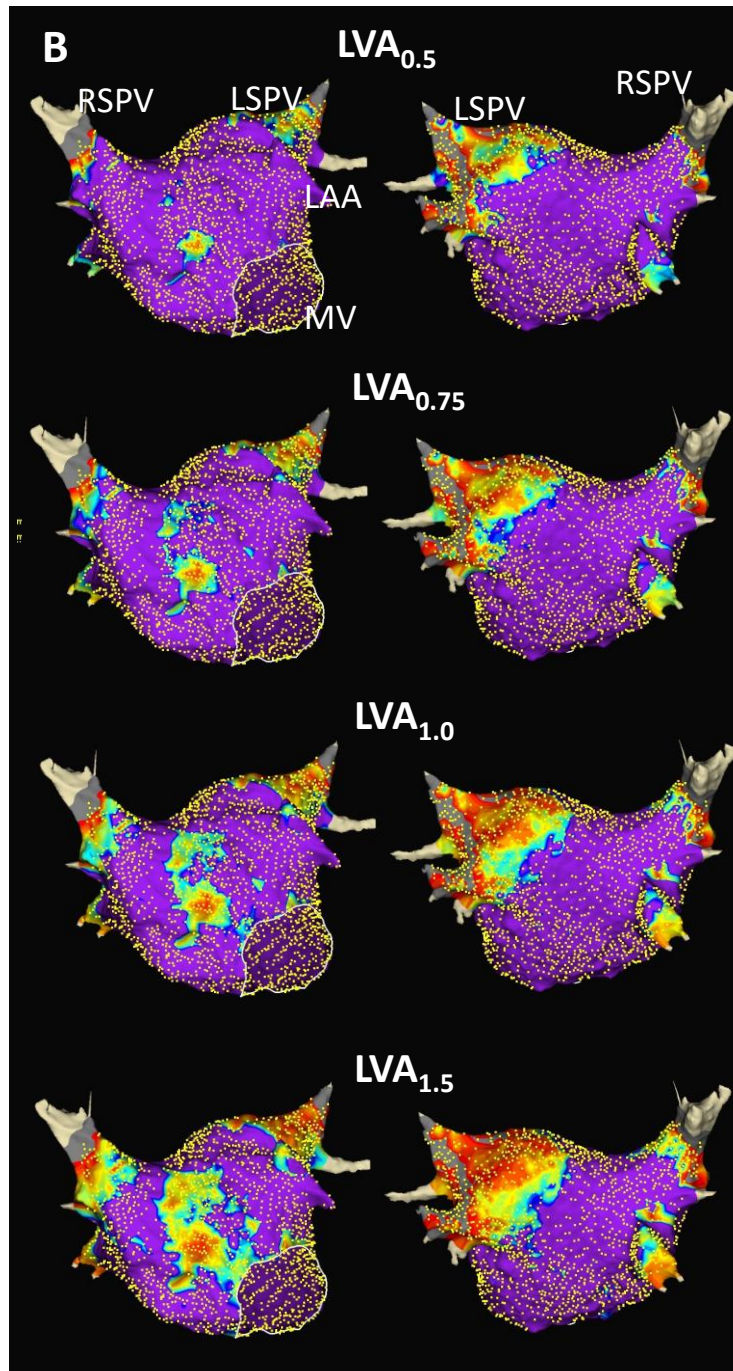
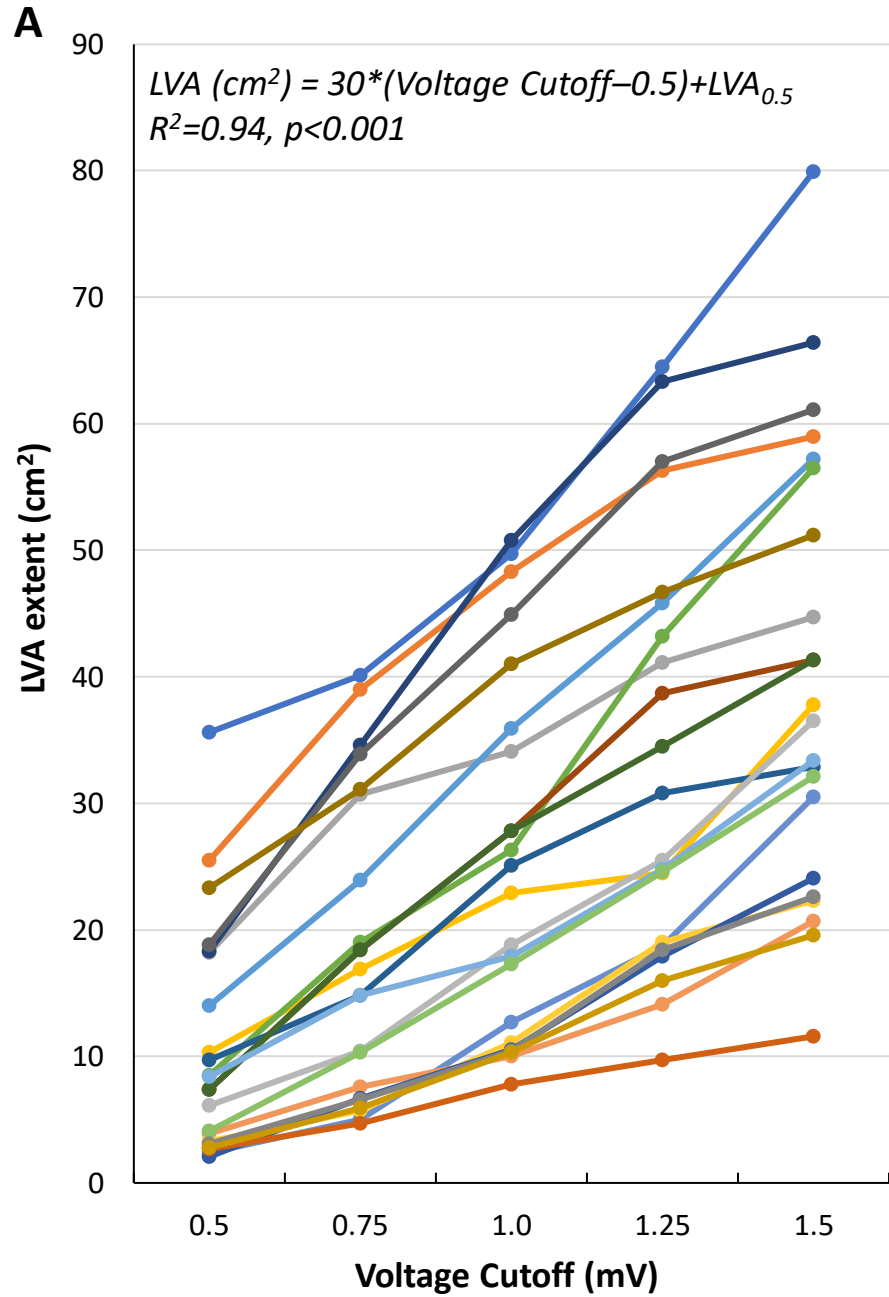
LVA <1.5mV



There was a negative linear relationship between LVA extent at any cutoff and mean LA voltage.

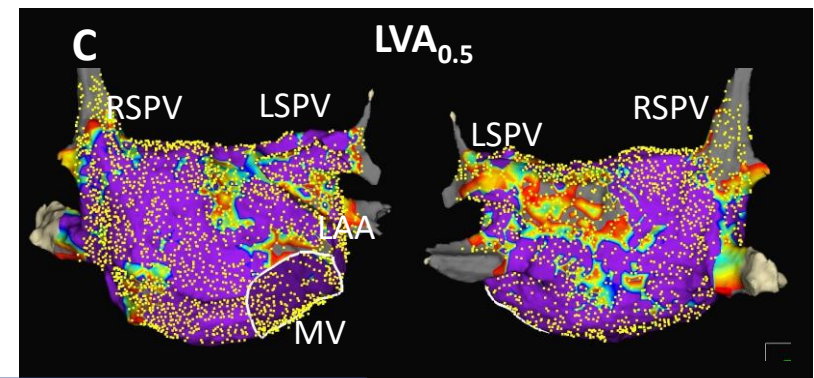
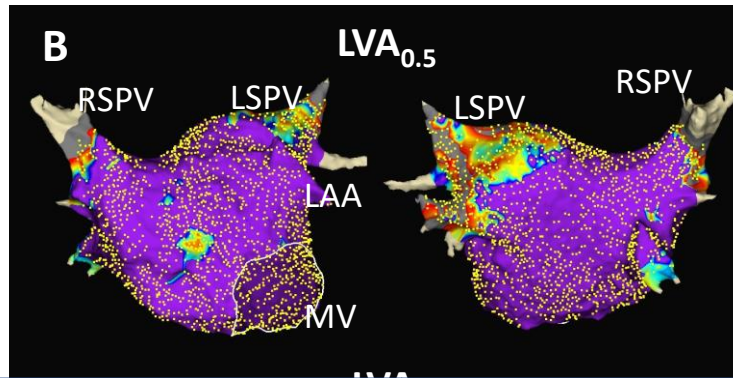
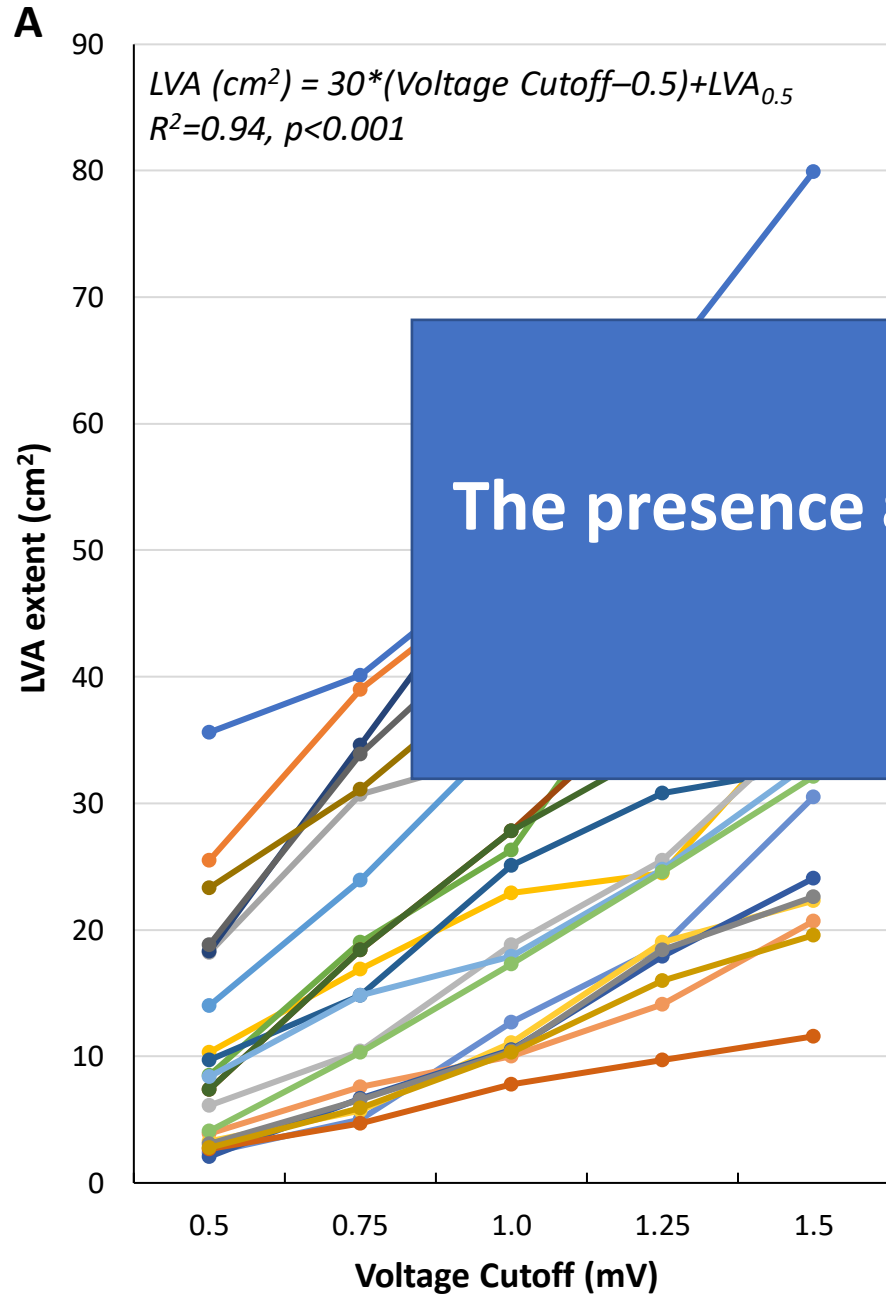


## Supplemental Figure 2

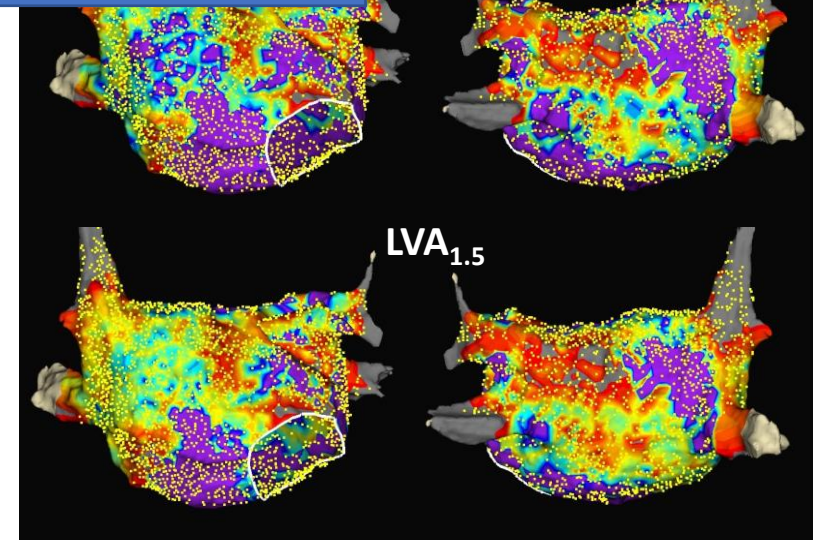
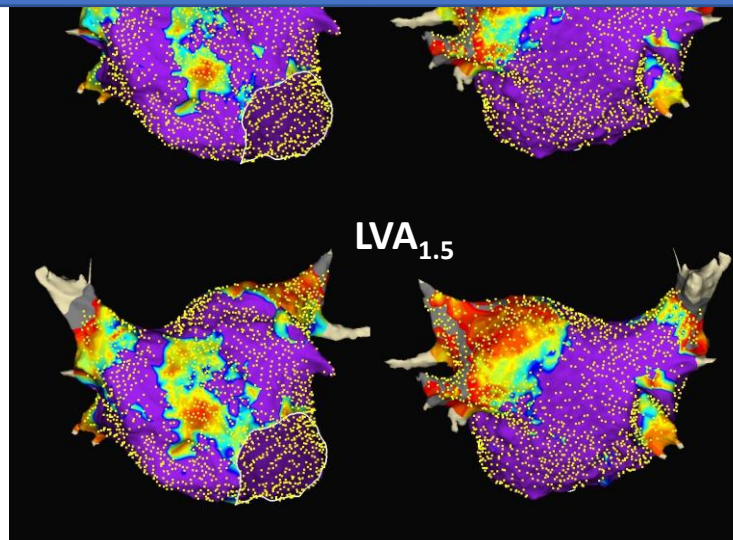
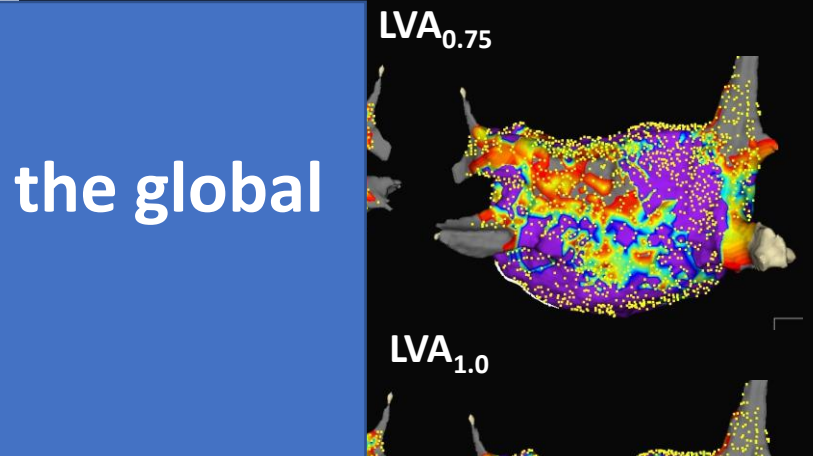
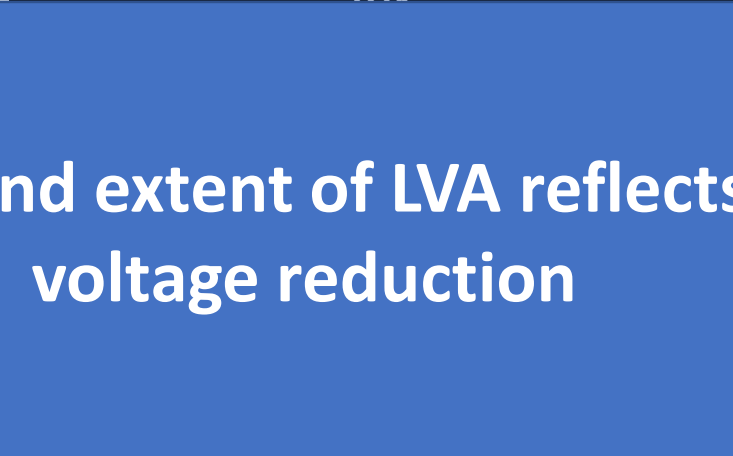




## Supplemental Figure 2



The presence and extent of LVA reflects the global voltage reduction



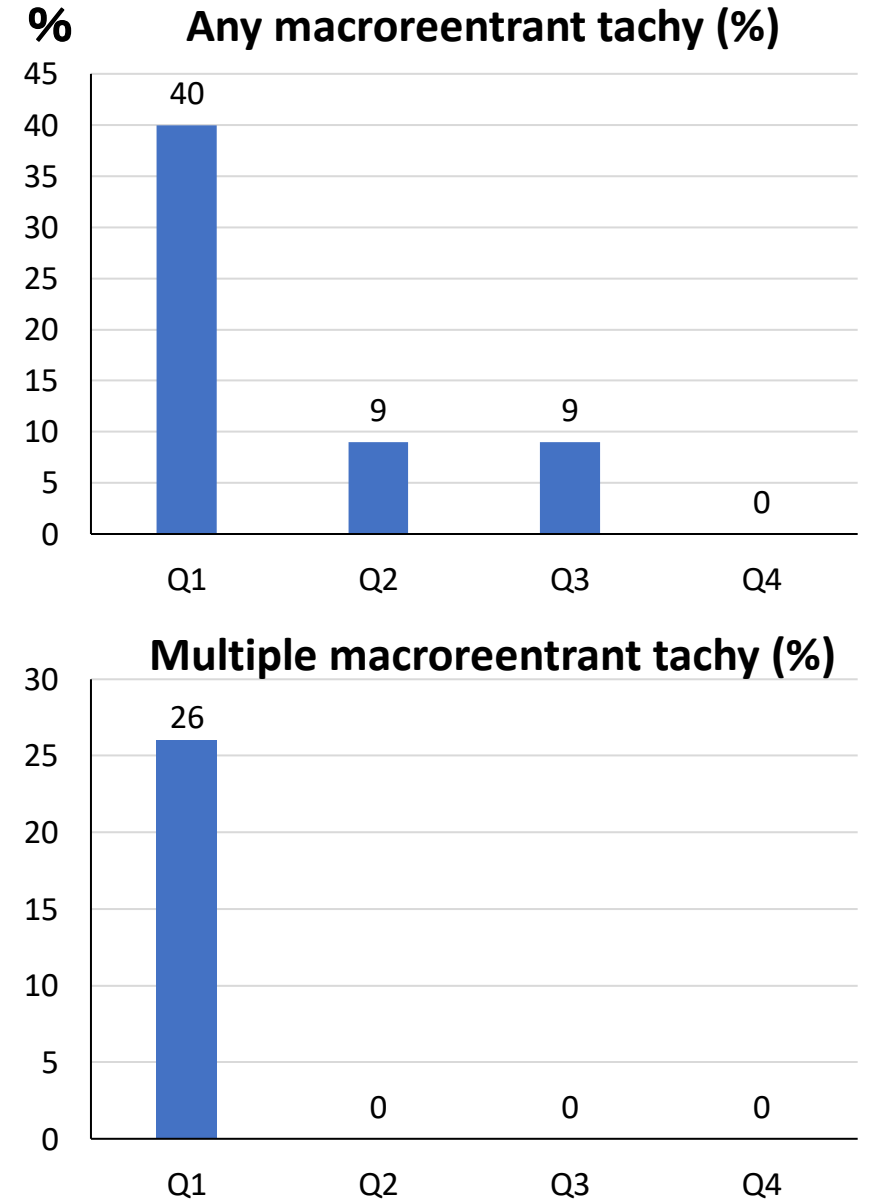
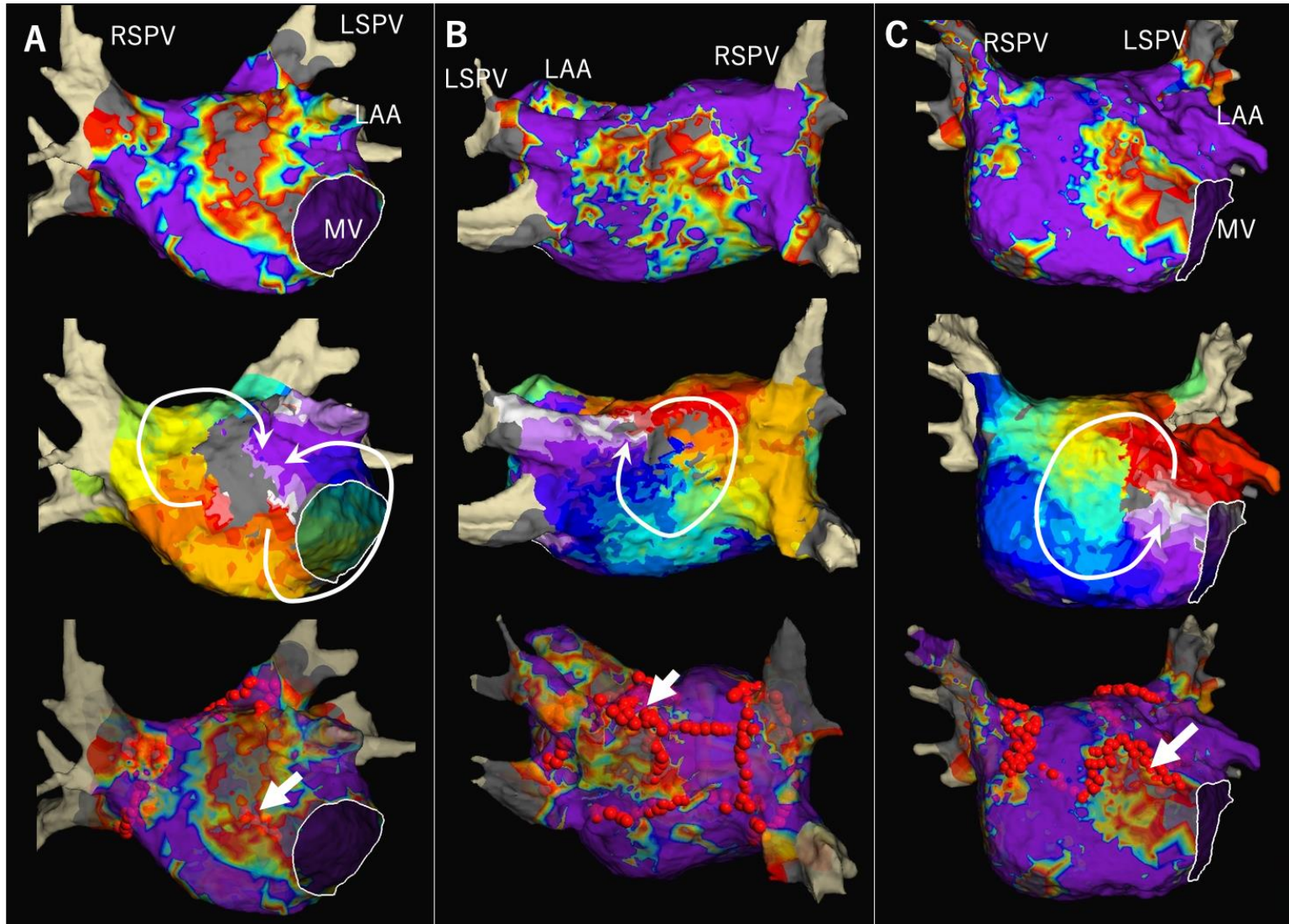
## **Can the LVA be a target for AF substrate ablation?**

**Although we previously reported the efficacy of LVA ablation,  
Based on this study, my current opinion would be 'No',  
because LVA is a reflection of global voltage reduction.**

**Why LVA ablation improved outcomes in the previous studies?**

# Relationship between mean LA voltage and inducibility of LA macroreentrant tachycardia

Figure 3



The critical isthmuses of the AT were identified in the LVA  $<0.5\text{mV}$



## **Can the LVA be a target for AF substrate ablation?**

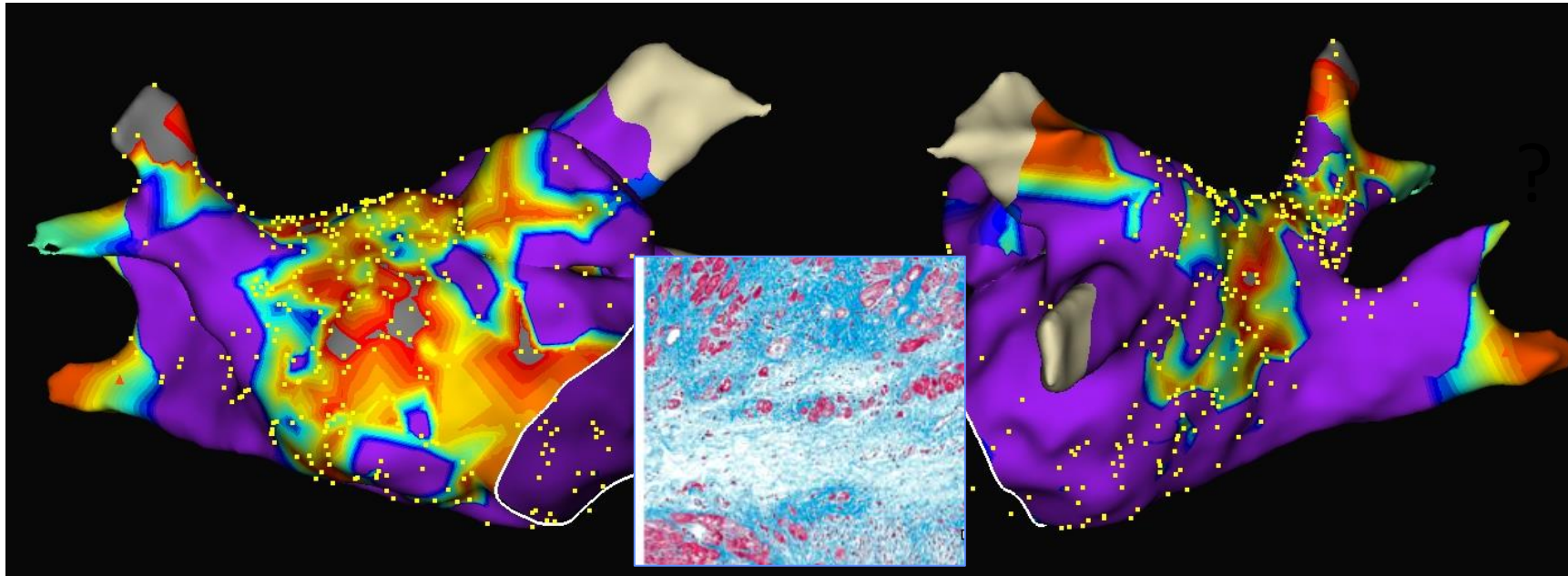
**Based on this study, my opinion would be 'No',  
because LVA is a reflection of global voltage reduction.**

## **Why LVA ablation improved outcomes in the previous studies?**

**LVA ablation might have eliminated a substrate for LA macroreentrant  
tachycardia.**

*What is the primary cause of atrial voltage reduction?  
No histological validation has been reported*

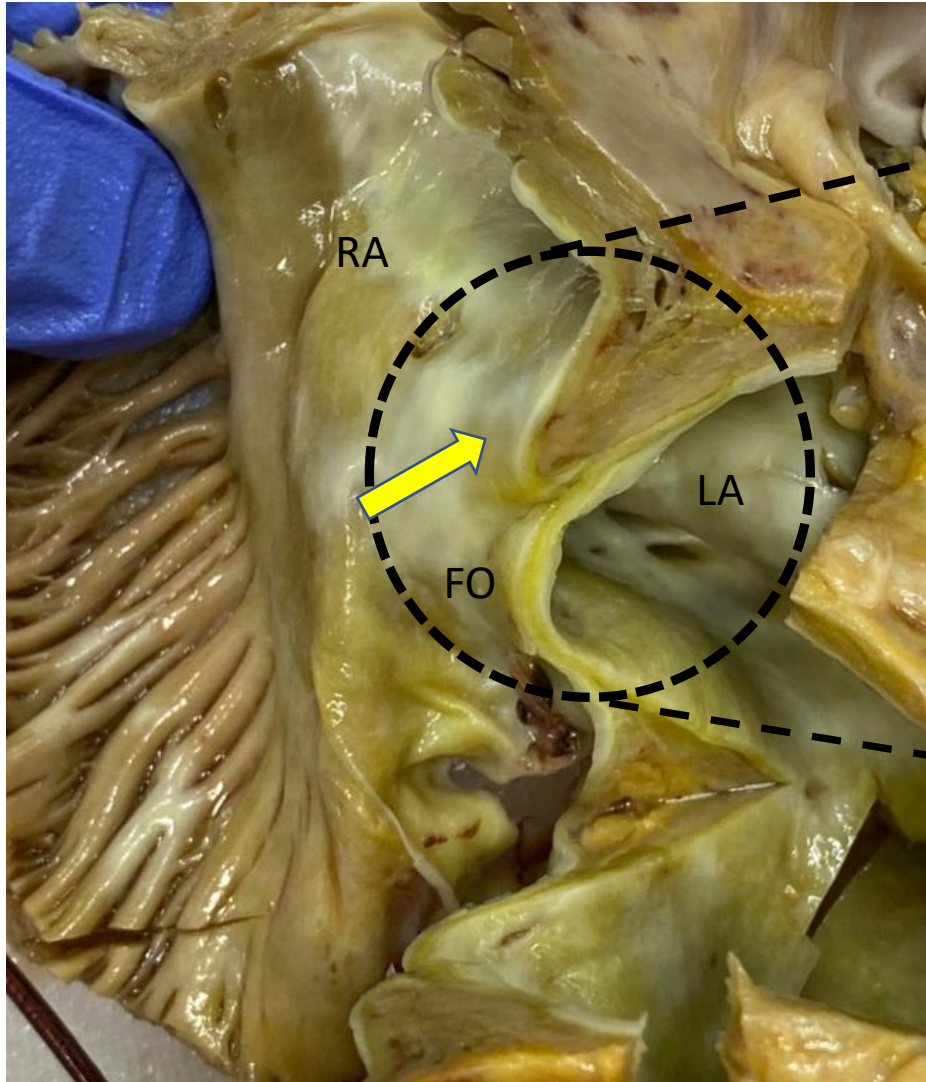
<0.5 mV



?

Among the 140 patients, 28 patients underwent histological evaluation of biopsy samples obtained from RA septum

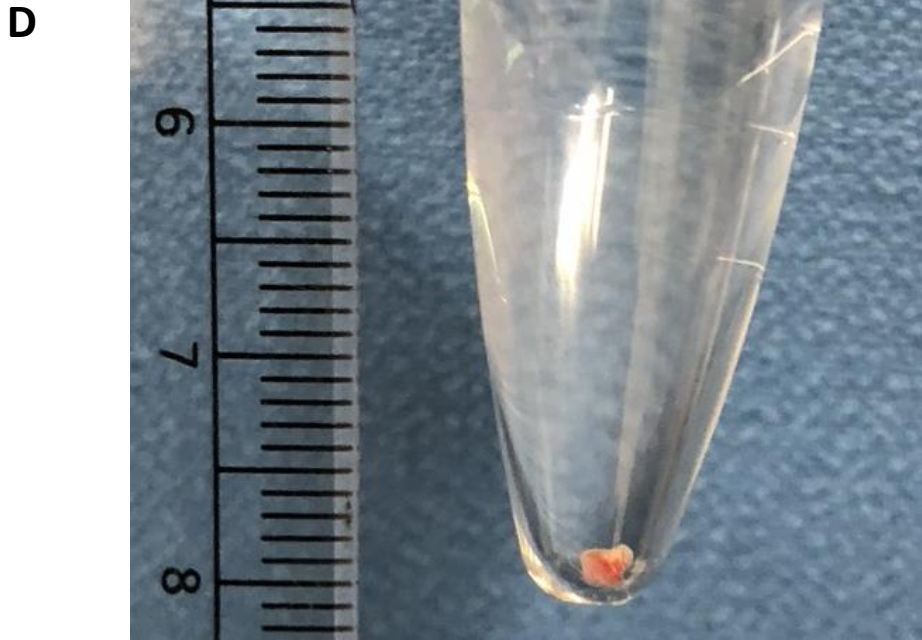
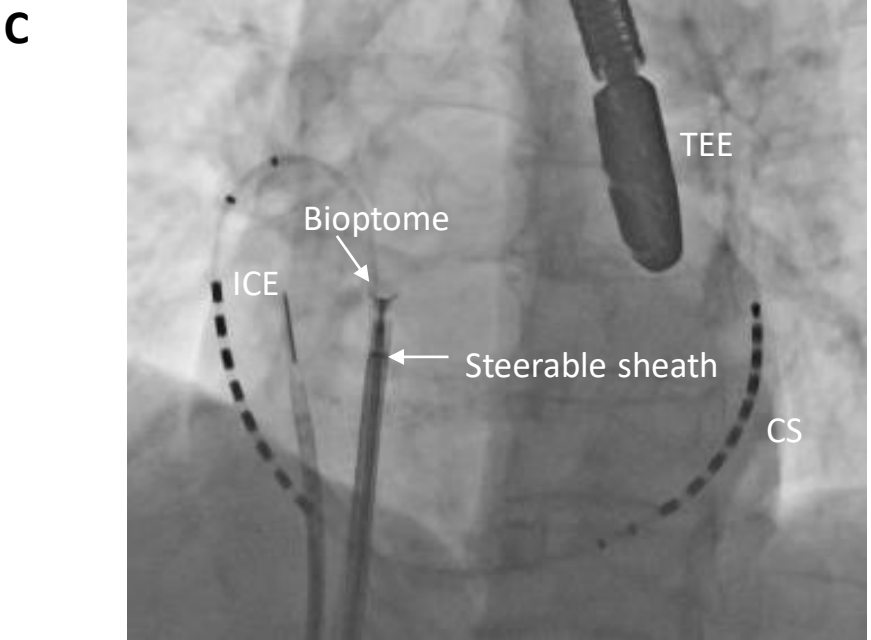
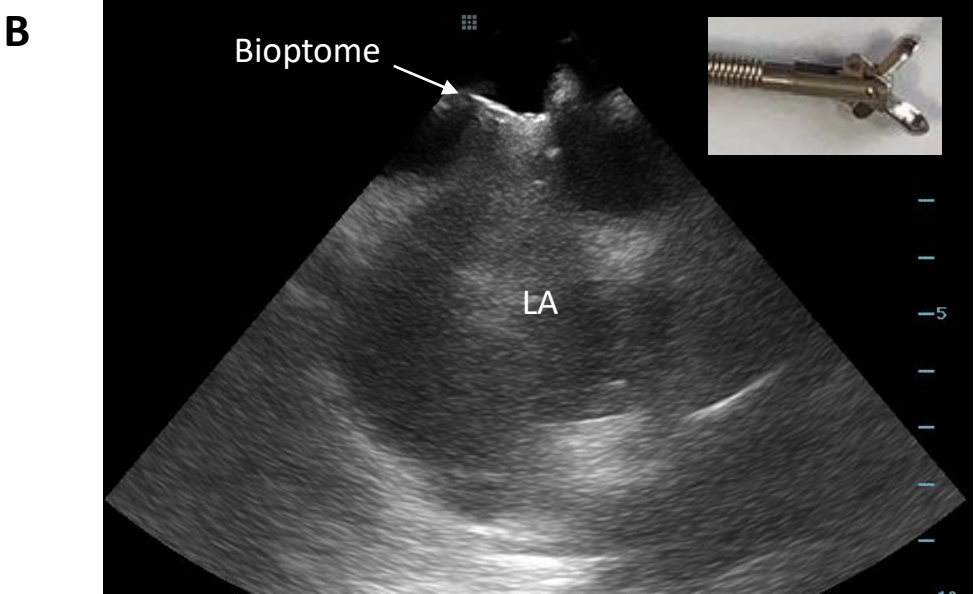
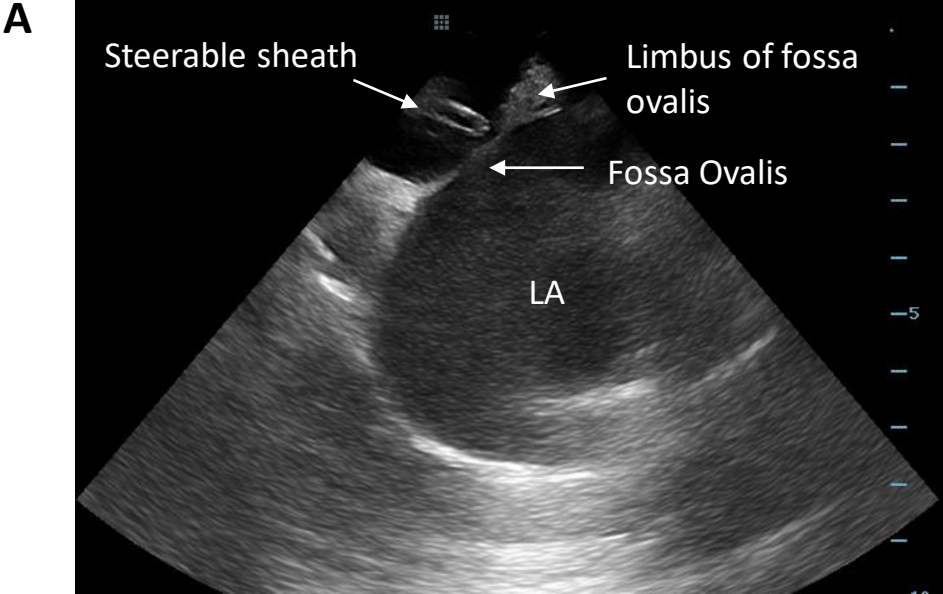
# Biopsy site at limbus of fossa ovalis



Our autopsy case



Supplemental Figure 2





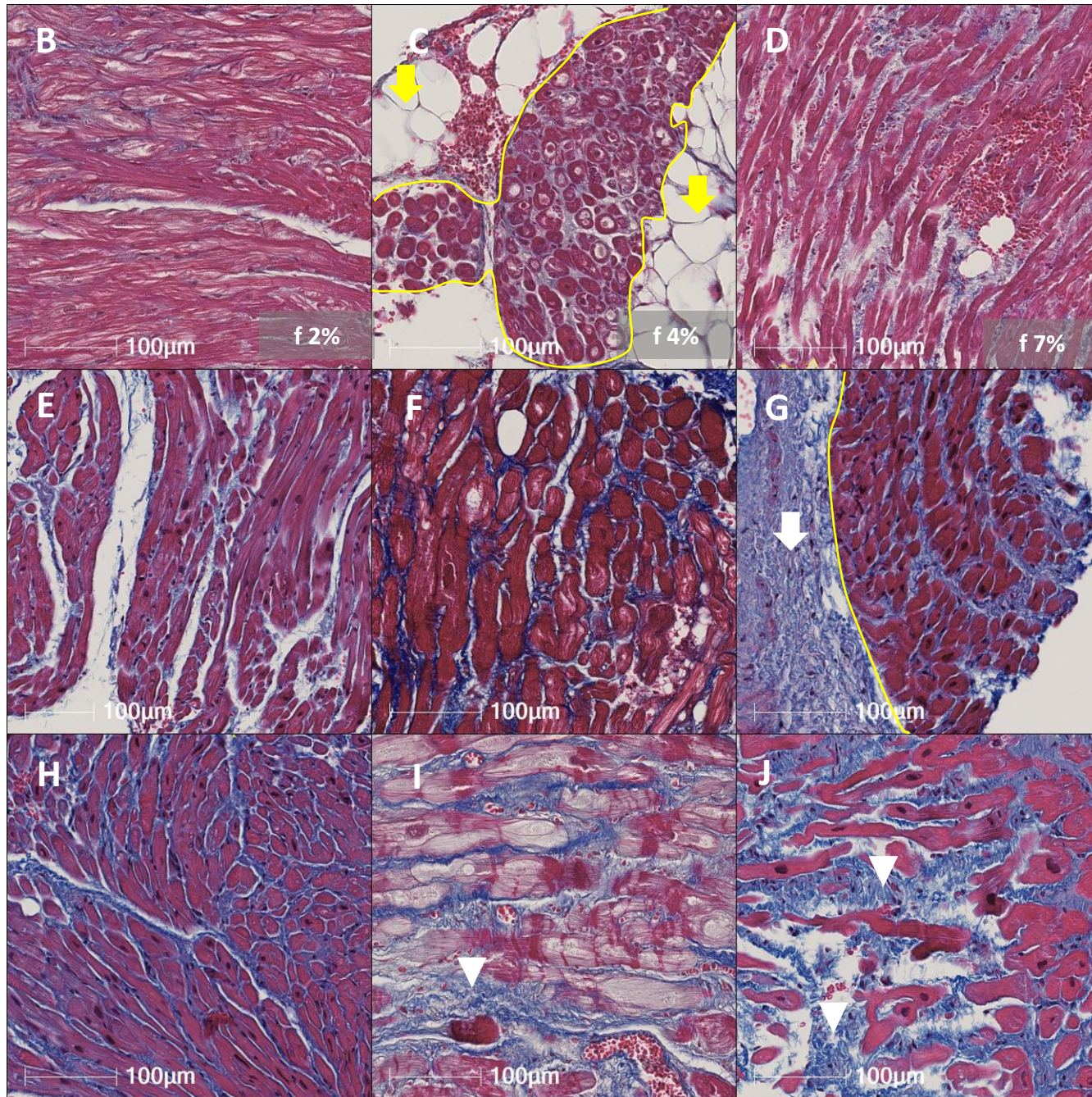
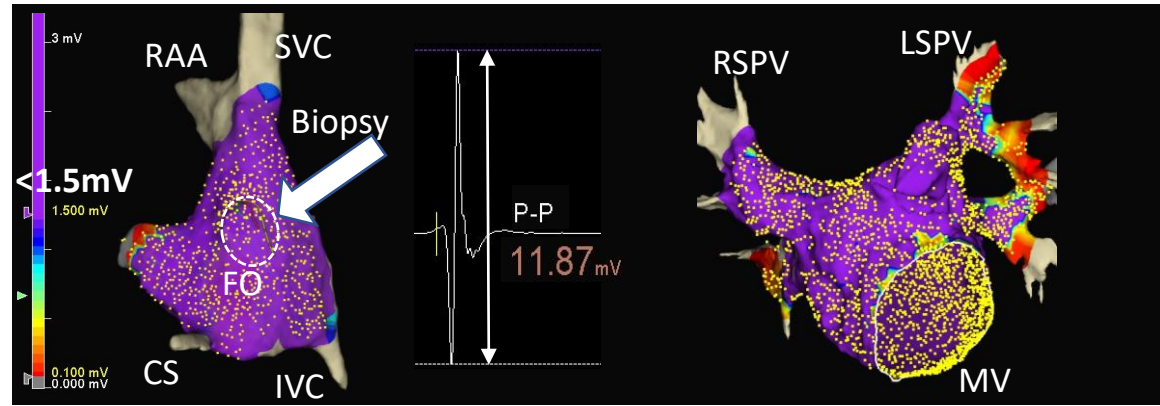


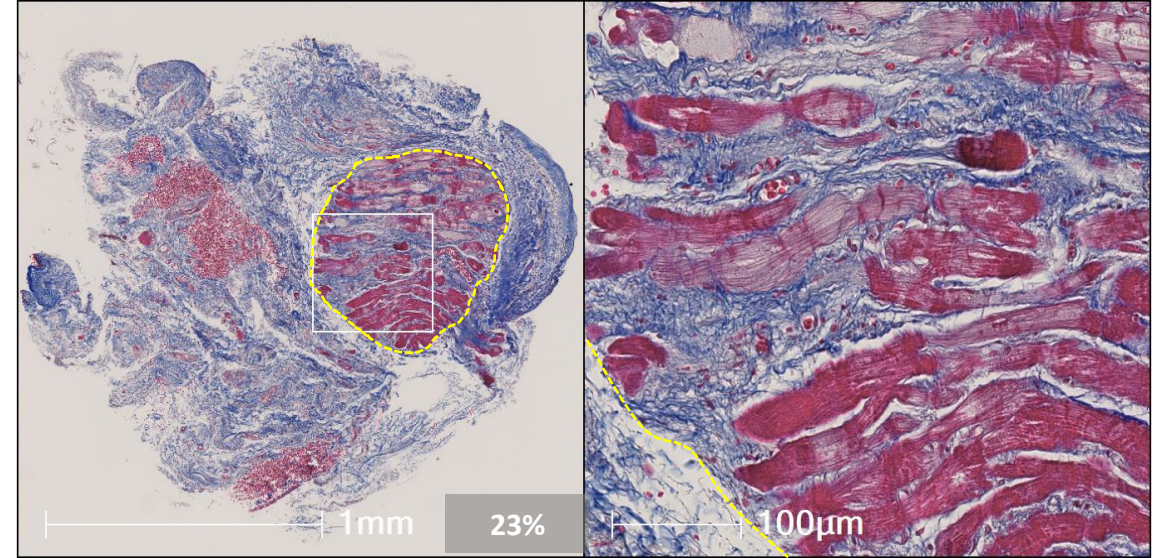
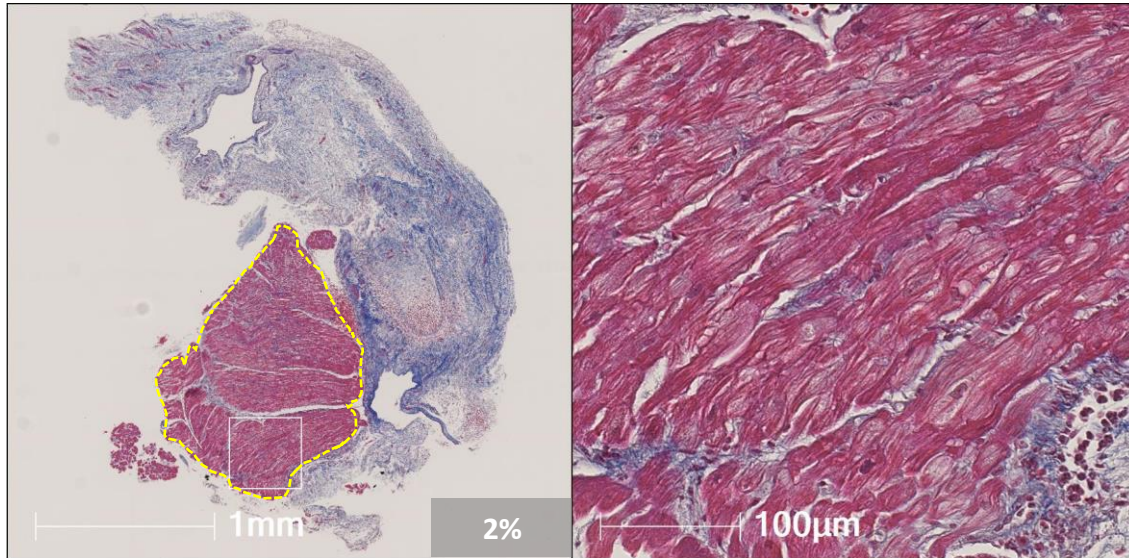
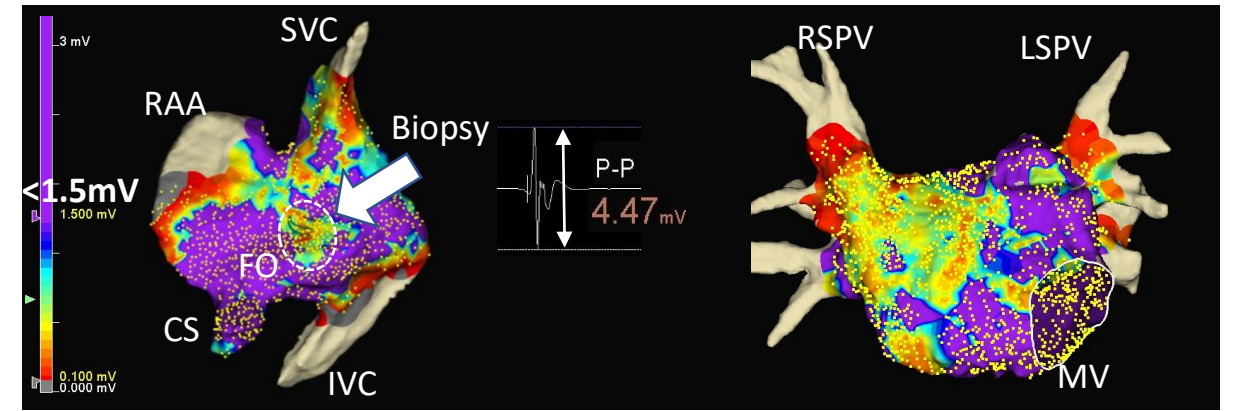


Figure 6

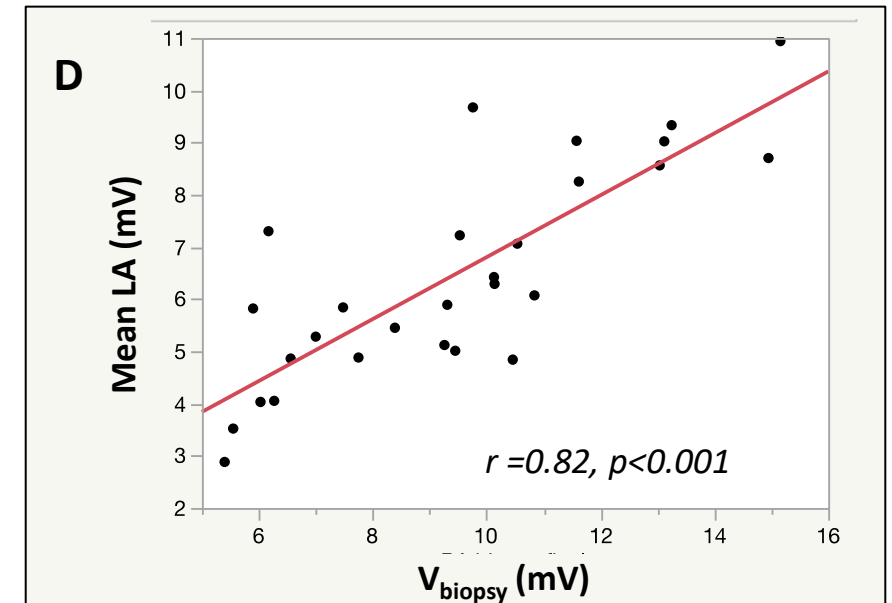
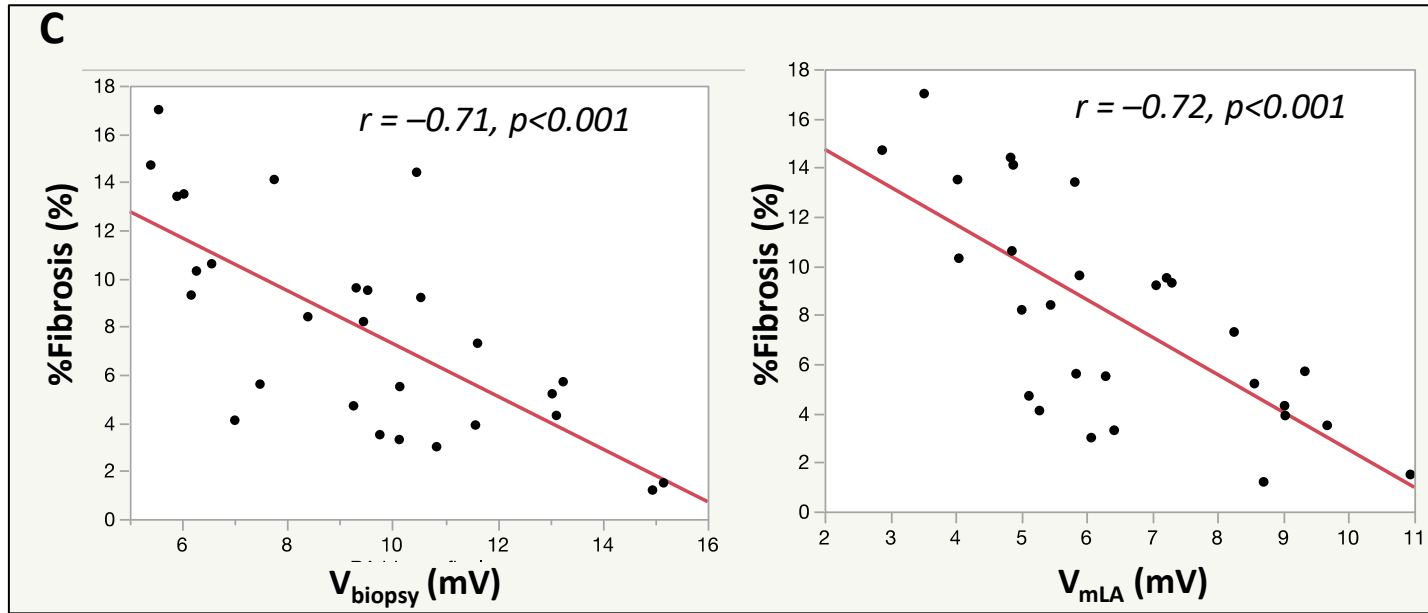
A



B



# Relationship between bipolar voltage and fibrosis



Suggesting the primary cause of voltage reduction at biopsy site and in the LA is fibrosis.

## Conclusion

- LVA is a local reflection of diffuse voltage reduction, the primary cause of which was histologically revealed as fibrosis.
- LVA would not be an exclusive substrate for AF, but could be a substrate for LA macroreentrant tachycardia.
- Currently, we do not ablate LVA as AF substrate modification, but target it as AT substrate when AT is induced after PVI.
- Let's see a video live demonstration!