

Prospective randomized control trial compare between Uni and Bipolar RF ablation in Mitral valve disease patients.

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Introduction: The association between mitral valve disease and atrial fibrillation (AF) is common. The classical Maze demonstrated excellent result. A simplified Maze with radiofrequency ablation is good result with low risk. Atrial reduction would improve better outcome.

Material and Method: From September 2007 to September 2011, a radiofrequency ablation concomitant with mitral valve operation was performed on 126 patients. All patients presented with permanent atrial fibrillation. The underlying diseases were rheumatic heart disease in 190 patients (73.1%), degenerative heart disease in 68 patients (26.2%), and congenital heart disease in 2 patients (0.8%). Left atrial reduction was done on 239 patients (91.9%).

Results: Valve replacement was performed in 154 patients (59.2%), mitral valve repair in 106 (40.8%). We had 5 operative deaths (1.9%). Three patients need permanent pacemaker implantation. Atrial fibrillation disappeared in 92.3% immediate after operation, 85.2% , 72.5% on day one and seven, 66.9%, 83.1% , 86.4% at 1,3,and 6 month, 86.8%,86.5%,88%,89%,and 87.5% at one, two, three, four, and five year. We found preoperative left atrial size larger than 60 mm. (p=0.002), postoperative left atrium bigger than 50 mm. (p<0.001), technique of reduction if left atrium >60 mm. (p=0.017), and AF on day 7 (p< 0.001) are factors influence success. Five year survival rate for nonAF patients are better than AF one (p=0.002).

Conclusion: Radiofrequency ablation combined with mitral valve surgery is safe and beneficial to continuous AF concomitant with mitral valve disease patients.

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