

Hubungan antara ketebalan dinding atrium kiri dengan rekurensi aritmia atrial pada pasien pasca ablasi fibrilasi atrium = Correlation between left atrial wall thickness with recurrence of atrial arrhythmia in post atrial fibrillation ablation

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Abstrak

Latar Belakang: FA merupakan salah satu masalah aritmia yang paling umum terjadi dengan prevalensi yang terus meningkat seiring dengan penuaan populasi dan peningkatan angka kejadian penyakit kardiovaskular. Manajemen FA dengan ablasi mampu mengurangi gejala pasien, namun angka rekurensi FA yang masih tinggi (10- 30%) pasca ablasi terus menjadi bahan penelitian dengan mekanisme yang masih belum dipahami. Remodelling atrial memiliki peran penting dalam progresi FA. Ketebalan dinding atrium kiri yang bervariasi menyebabkan adanya perbedaan propagasi dan penetrasi dari tindakan ablasi, sehingga penilaian ketebalan dinding atrium kiri penting dalam proses tindakan ablasi FA.

Tujuan: Mengetahui hubungan antara ketebalan atrium kiri dengan rekurensi aritmia atrial pasca ablasi FA.

Metode: Penelitian ini merupakan studi kohort retrospektif dengan menggunakan data pasien ablasi fibrilasi atrium di RSJPD Harapan Kita pada periode Januari 2018- Januari 2023. Evaluasi rekurensi aritmia atrial dilakukan dengan EKG 12 sadapan, pemeriksaan Holter monitoring 24 jam. Penilaian ketebalan dinding atrium kiri dilakukan dengan pemeriksaan CT scan kardiak. Dilakukan analisis bivariat dan multivariat antara ketebalan dinding atrium kiri dengan rekurensi aritmia atrial pasca ablasi.

Hasil: Dari 127 pasien pasca ablasi FA, didapatkan rata-rata pasien berusia 55 tahun dengan jenis kelamin laki-laki 64%. Berdasarkan tipe FA didapatkan 65% merupakan FA paroksismal. Ketebalan dinding atrium kiri (OR 1,56; IK 95% 1,20-2,03; p value < 0,001) dan diameter atrium kiri berdasarkan ekokardiografi (OR 1,07; IK 95% 1,00- 1,14; p value 0,0038) berhubungan secara signifikan dengan rekurensi aritmia atrial pasca ablasi.

.....Background: Atrial fibrillation (AF) is the most common arrhythmia and its prevalence increases with age. Management of catheter ablation is effective in reducing symptom burden but its recurrence rate is still considered high (10-30%) with unclear mechanism. Atrial remodeling plays important role in AF progression. The left atrial wall thickness (LAWT) is heterogenous which cause different propagation and penetration of ablation power. Recurrence of arrhythmia atrial after catheter ablation for atrial fibrillation (AF) has been considered as a common phenomenon but its mechanism and implication in long-term outcome has not been fully understood.

Objective: We aimed to clarify the relation between left atrial wall thickness and arrhythmia atrial recurrences after ablation

Metode: A total of 127 patients with history of catheter ablation for AF were consecutively recruited from period of January 2018- January 2023. Recurrences was defined as recurrence of atrial tachyarrhythmia using surface electrocardiogram and Holter monitoring. LAWT was assessed using cardiac CT scan. The statistical analysis was performed to find the relationship between the left atrial wall thickness and arrhythmia atrial recurrences.

Results: From 127 patients post catheter ablation for AF, patients included mean age of 55 years old and

64% patients are male. Based on type of AF, most of patients (65%) are paroxysmal AF. The mean left atrial wall thickness (OR 1,56; IK 95% 1,20- 2,03; p value < 0,001) and diameter of left atrium from echocardiography (OR 1,07; IK 95% 1,00-1,14; p value 0,0038) were significantly associated with arrhythmia atrial post catheter ablation.

Conclusion: Left atrial wall thickness assessed with CT cardiac increased 4.4 times arrhythmia atrial recurrences post catheter ablation of AF.