

The outcomes of «PROPHYLACTIC PULMONARY VEINS ABLATION (PULVAB)» RCT on comparison the prophylactic strategies in new onset atrial fibrillation after coronary artery bypass grafting

Amiran Sh. Revishvili, Vadim A. Popov, Egor S. Malysenko, Maksim M. Anishchenko, Natalia V. Popova

A.V. Vishnevsky National Medical Research Center of Surgery, Moscow, Russia



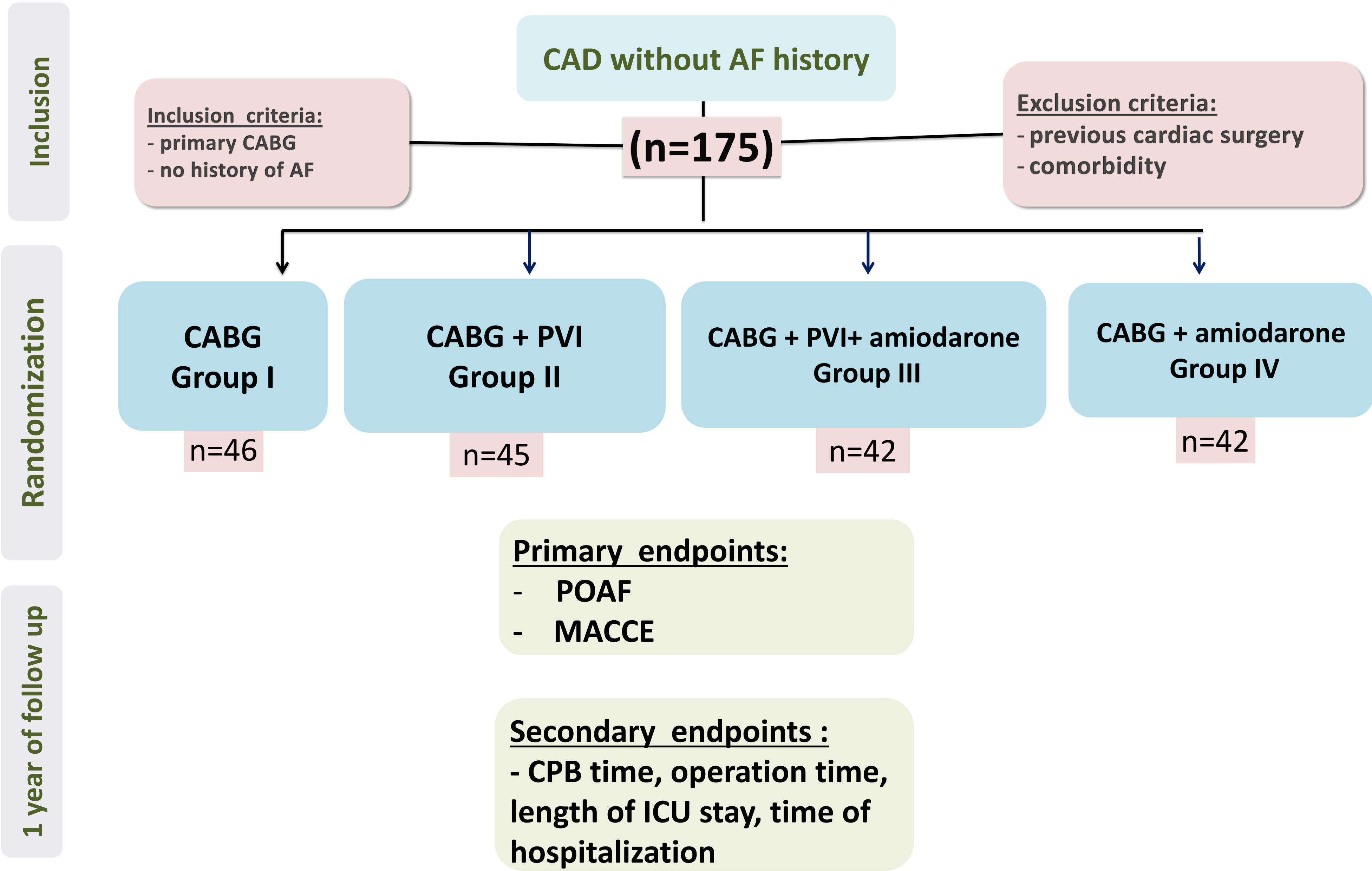
Results

AIM

To evaluate the results of prophylactic strategies in new onset POAF after CABG

RCT PULVAB

ClinicalTrials.gov Identifier: NCT 03857711



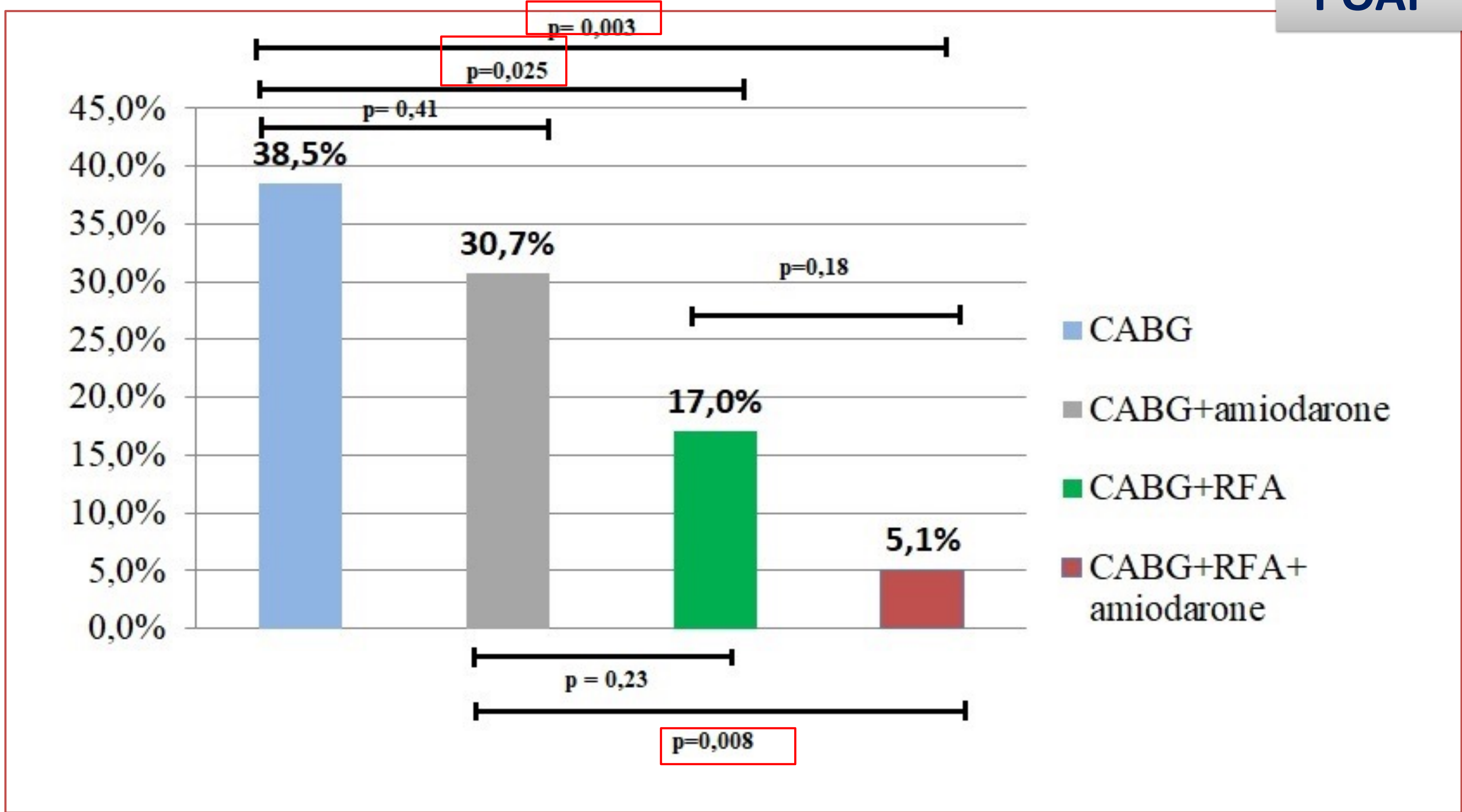
Patients baseline characteristics

No statistically significant differences

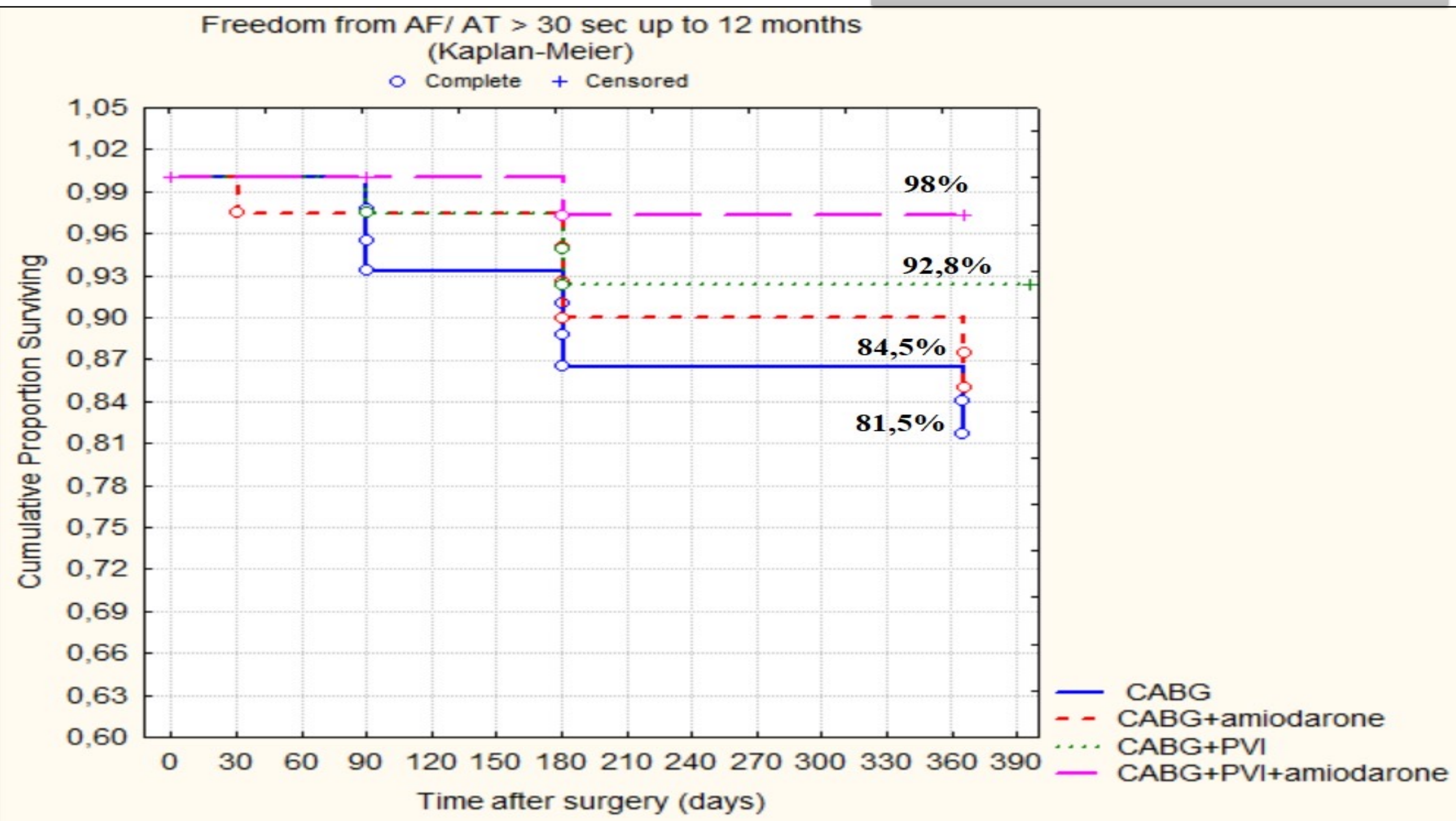
Primary endpoints

	CABG (n=46)	CABG + PVI (n=45)	CABG + PVI + amiodarone (n=42)	CABG + amiodarone (n=42)	P-value
Primary endpoints					
POAF, (n)	18 (40%)	7 (15,5%)	2 (4,8%)	14 (33.3%)	0,005
MACCE, (n)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1,000
Secondary endpoints					
Ventilation time (h)	13.1±7.2	12.6±7.24	9.4±11.2	12±10.1	0,001
ICU stay (h)	29.6±17.7	22.7±15.5	20.1±14.1	21.1±12.1	0,003
Time of hospitalization, (days)	21.2±5.0	18.1±7.6	19.2±4.8	20.2±4.2	0,016
Operation time (min),	253 ± 37.7	250.4 ± 42.5	249.2 ± 29.1	248.2 ± 31	0,114
CPB time (min)	88.6 ± 19.2	92.1 ± 18.4	91.8 ± 17.3	88.1 ± 17.3	0,081
Sinus rhythm at discharge (%)	95.5%	97.6%	97.6 %	95.5%	0,213

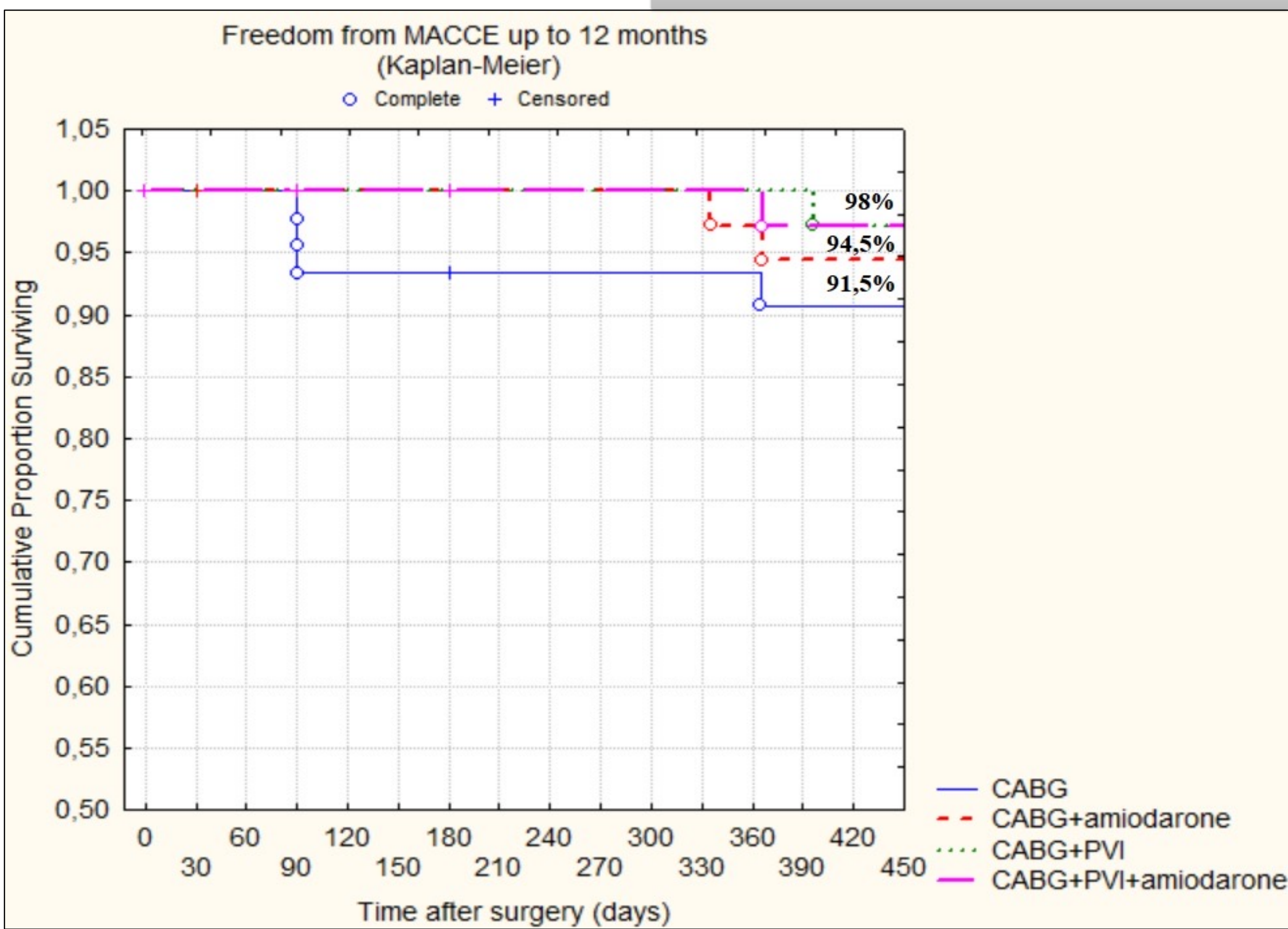
POAF



Freedom from AF



Freedom from MACCE



Conclusion

PVI alone or in combination with amiodarone as a preventive approach significantly reduces the incidence of new onset POAF after CABG and doesn't increase rates of short- and long-term complications.