



Recurrence of arrhythmia following short-term oral **AMIO**darone after **CAT**heter ablation for atrial fibrillation: a double-blind, randomized, placebo-controlled study

Results from the AMIO-CAT trial

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Disclosures

No conflicts of interest

Background

- Patients undergoing catheter ablation for atrial fibrillation (AF)
 often experience arrhythmias within the first few months after
 ablation
- Effect of preventing early arrhythmias with antiarrhythmic drugs after ablation is unclear
- Treatment with antiarrhythmic drugs has been clinical practice in some ablation centres, but there are no guideline recommendations on this subject
- Amiodarone is considered the most effective antiarrhythmic drug to control AF
- <u>Aim</u>: to investigate whether short-term **amiodarone** treatment after AF ablation could improve later success of the ablation



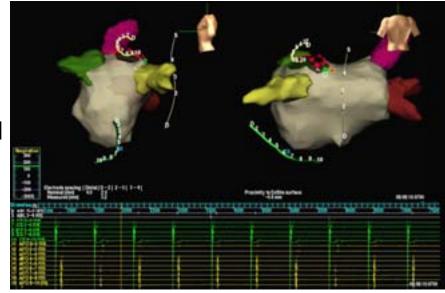
The AMIO-CAT trial

Patients

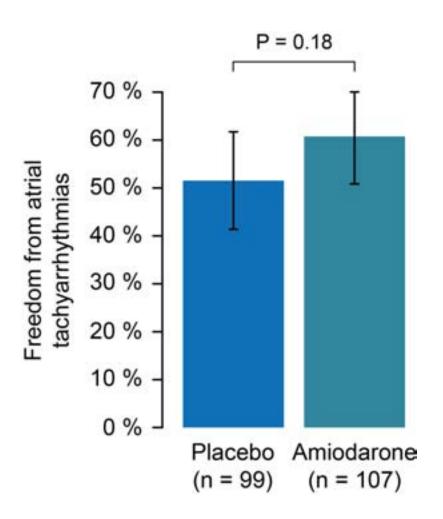
- Planned for ablation of atrial fibrillation (paroxysmal or persistent type)
 - 212 patients
 - 61 [54;61] years

Treatment and follow-up

- Catheter ablation
- 8 weeks of <u>amiodarone</u> or matched <u>placebo</u>
- 6-month follow-up
- 3-month "blanking period" (transient arrhythmias – not failure)



Results I



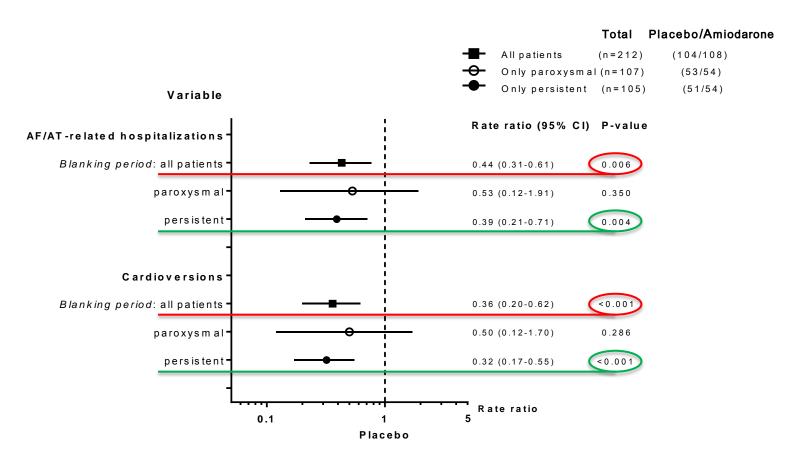
Primary endpoint:

 No difference in freedom from arrythmias at 6-month follow-up

Darkner et al. Eur Heart J 2014; published today

Results II

AF related hospitalizations and cardioversions within the first 3 months



Reduced hospitalization and cardioversion rates

Darkner et al. Eur Heart J 2014; published today



AMIO-CAT Trial - Summary

Amiodarone after ablation for atrial fibrillation

- Did not improve success after ablation at 6-month follow-up
- Reduced arrhythmia related hospitalizations and cardioversions within the first 3 months after ablation (more pronounced effect in patients with a history of longer episodes of atrial fibrillation)
- Treatment safe
- More transient side effects, but no difference in quality of life.

<u>Implications</u>: short-term amiodarone *not* standard treatment after ablation, but should be considered in patients with longer episodes of AF