

Updates in Alcohol Septal Ablation for Hypertrophic Obstructive Cardiomyopathy

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ABSTRACT

The first Alcohol Septal Ablation (ASA) was performed more than 20 years ago (1994); since then, it has become a widely used technique for the treatment of highly symptomatic patients with hypertrophic obstructive cardiomyopathy. It has been shown that post-procedural basal septal shrinking as a result of myocardial scarring is followed by a decrease of the left ventricular obstruction, regression of left ventricular hypertrophy within the first post-procedural year, improvement of diastolic function, and reduction of the degree of mitral regurgitation. All of these changes are accompanied by significant symptom relief. Although there is rather limited evidence of post-procedural long-term survival, all of the presented studies are consistent in the low incidence of sudden death and similar prognosis with age- and the sex-matched general population. Recently, studies dealing with mildly symptomatic patients and younger patients demonstrated the encouraging long-term outcome of ASA patients. Also, it has been shown that a post-ASA residual obstruction is an independent predictor of worse post-procedural course.

Keywords: Alcohol Septal Ablation; Symptoms

BIOGRAPHY

Prof. Josef Veselka, MD, PhD attended medical school at Charles University, Prague, Czech Republic, and graduated in 1989. He is the chief of the Department of Cardiology in Motol University Hospital, which is the largest Czech hospital. His main area of

expertise and interest are cardiomyopathies and interventional cardiology, and he is one of the pioneers in the field of structural and coronary interventions. He has published more than 300 scientific papers, edited 6 monographs and textbooks, and is a member of several editorial boards of the medical journal.

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