

# Ventricular Arrhythmias

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# Disclosures

- I have no financial conflicts of interest to disclose



# Learning Objectives

1. Appreciate the importance of prompt bystander resuscitation and some attitudinal barriers contributing to bystander hesitation
2. Recognize the benefits and limitations of ventricular tachycardia ablations
3. Identify the members of a multi-disciplinary team necessary to treat patients with ventricular arrhythmias



Allegro ♩ = 100

*tranquillo*

*mf*

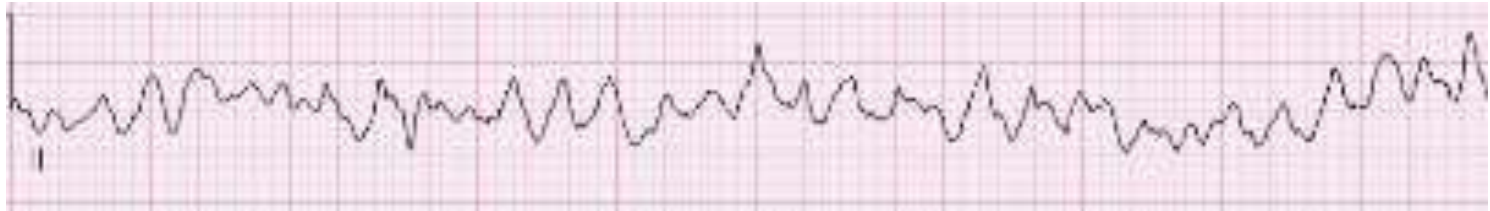
*p*

*dimin.*

Reo.

Reo.

# Timing Is Everything





A photograph of a stage with red curtains. The word "Intermission!" is written in white text in the center of the image. The stage floor is visible at the bottom, and there are two black rectangular objects on the floor. The lighting is dim, with the red curtains being the main source of color.

Intermission!









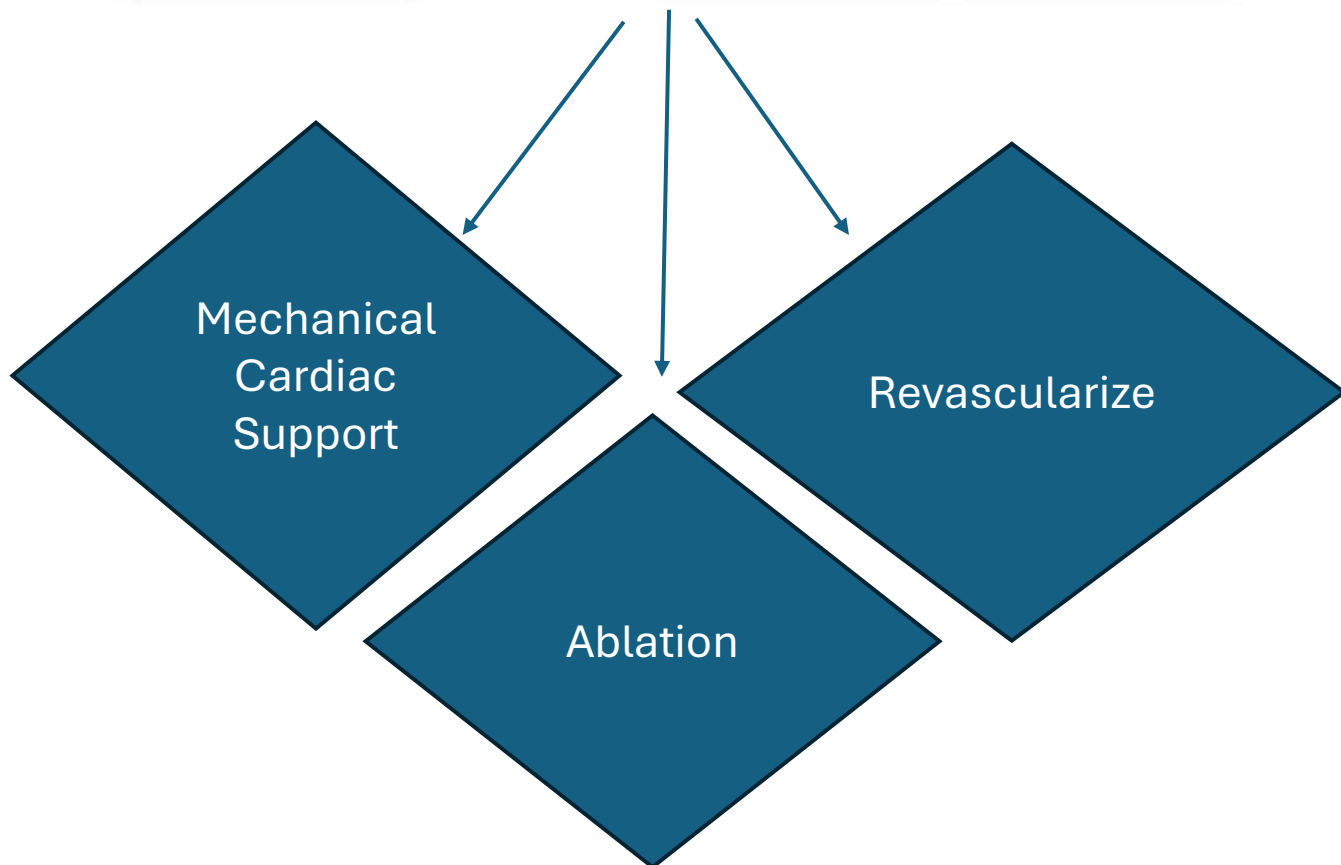
100 BPM



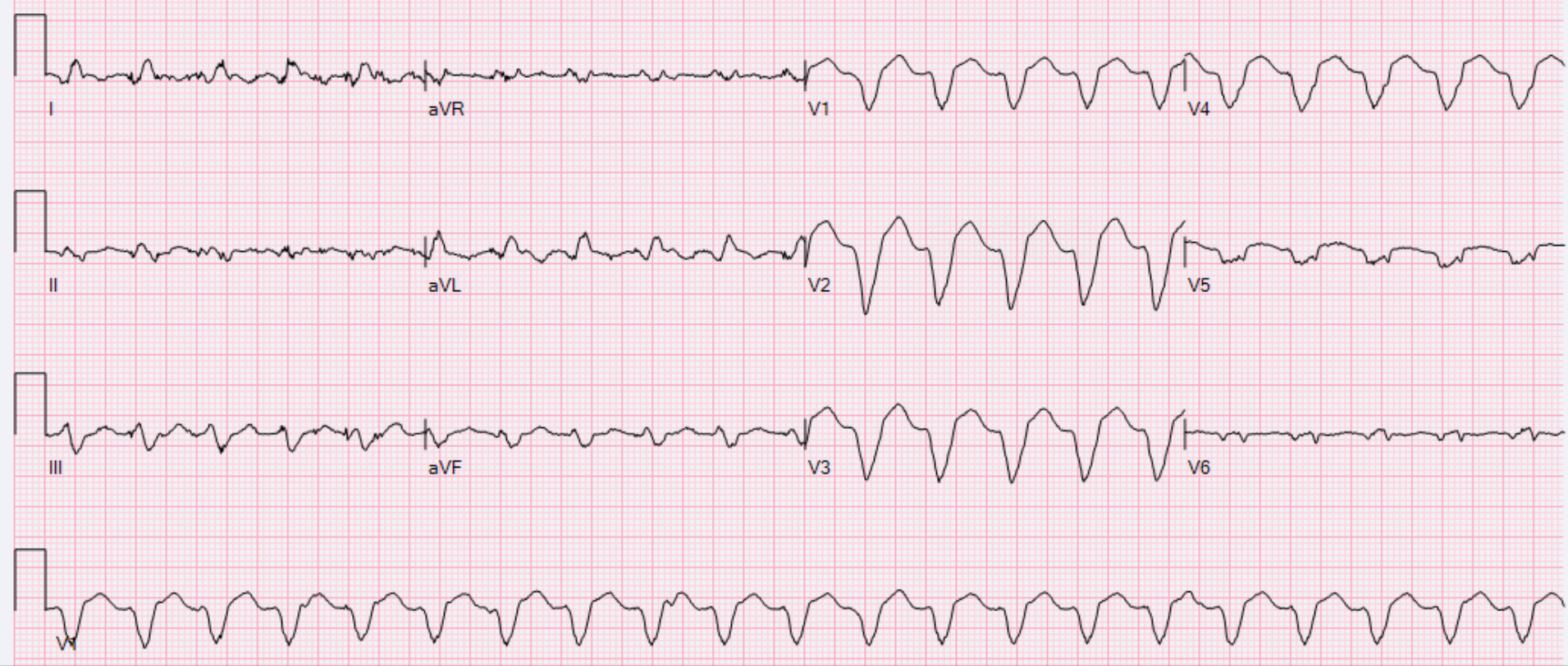
C & E





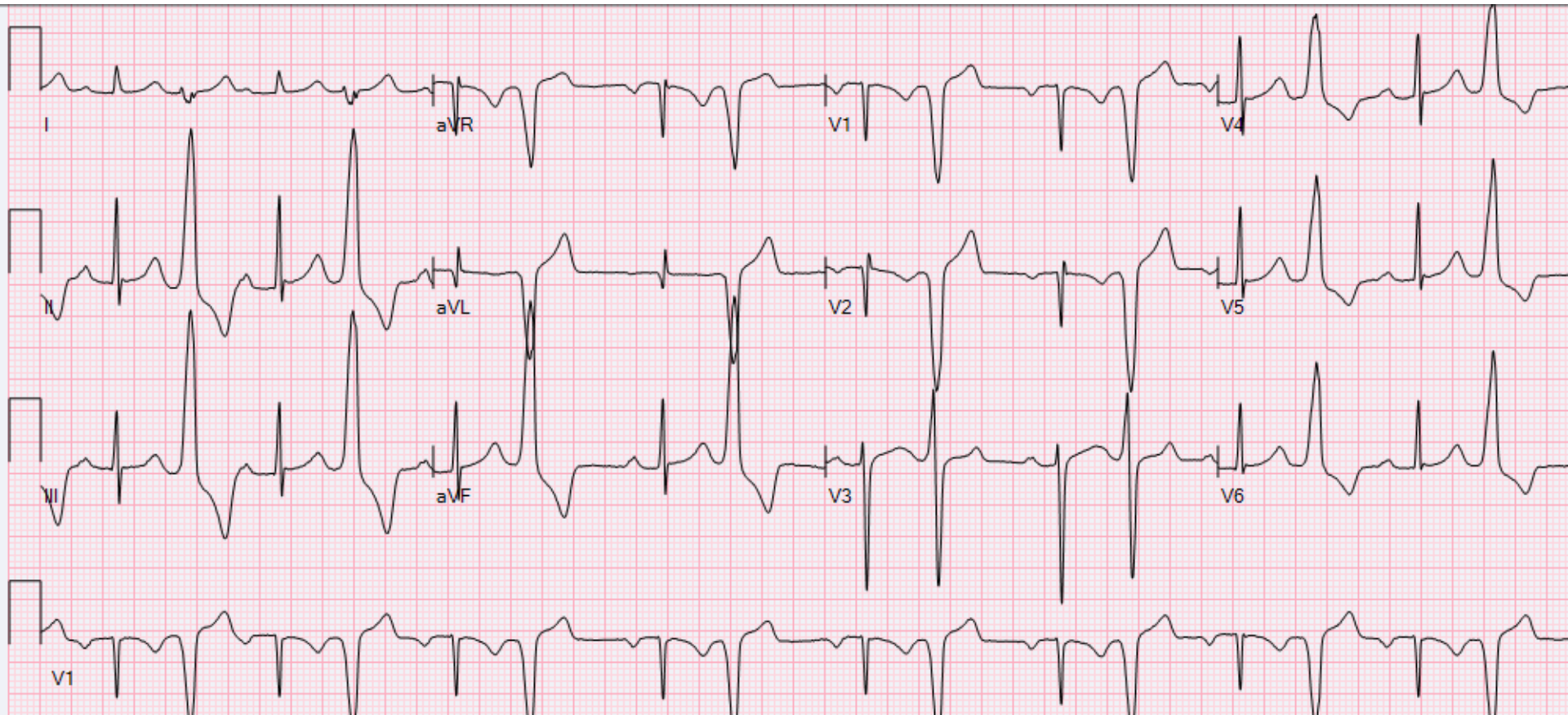


# 76-year-old male, history of MI

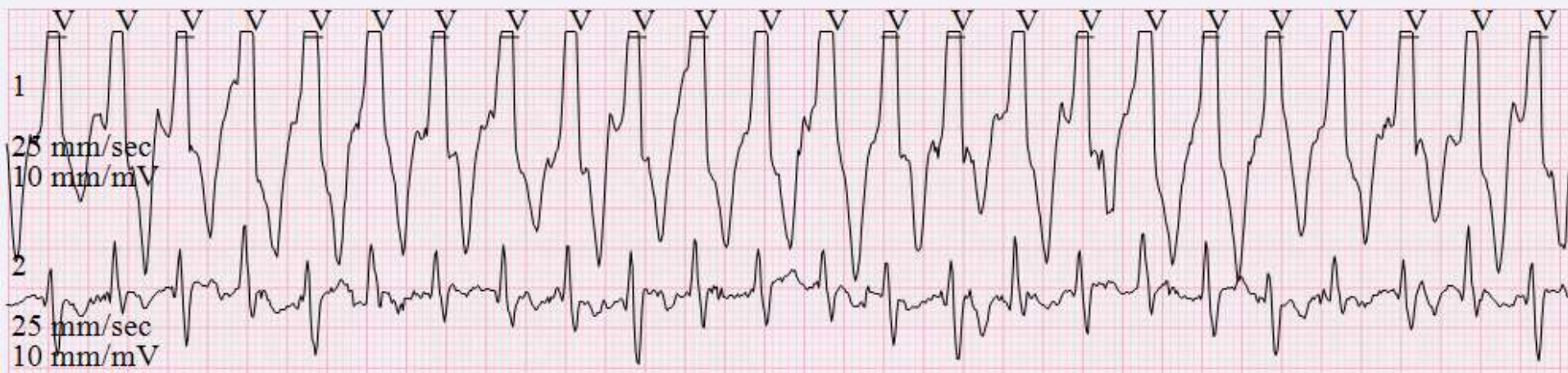


Lead	PR (ms)	QR (ms)	QT (ms)	QTc (ms)
I	180	90	390	390
II	180	90	390	390
III	180	90	390	390
aVR	180	90	390	390
aVL	180	90	390	390
aVF	180	90	390	390
V1	180	90	390	390
V2	180	90	390	390
V3	180	90	390	390
V4	180	90	390	390
V5	180	90	390	390
V6	180	90	390	390

# 46-year-old female, normal heart



# Her Holter: 496 runs of VT, longest 748 beats





# Work-Up

## His

- Echo unchanged
  - LVEF 30%
  - Apical aneurysm
- LHC no new stenoses

## Hers

- Echo = normal

# Work-Up



Echo – always



Left heart cath – rule out CAD



Right heart cath -  
hemodynamics

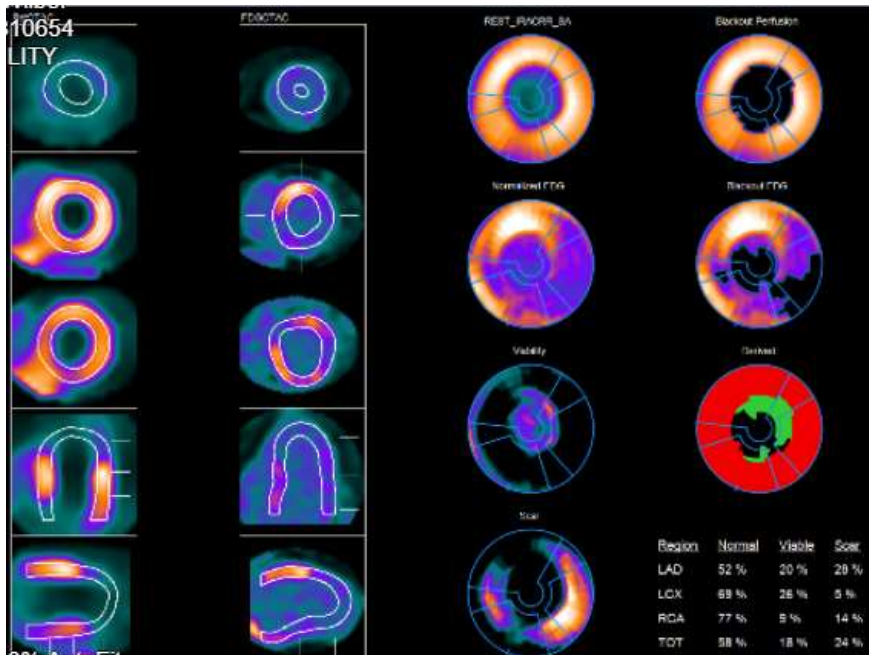


MRI – cardiomyopathies



PET - sarcoidosis

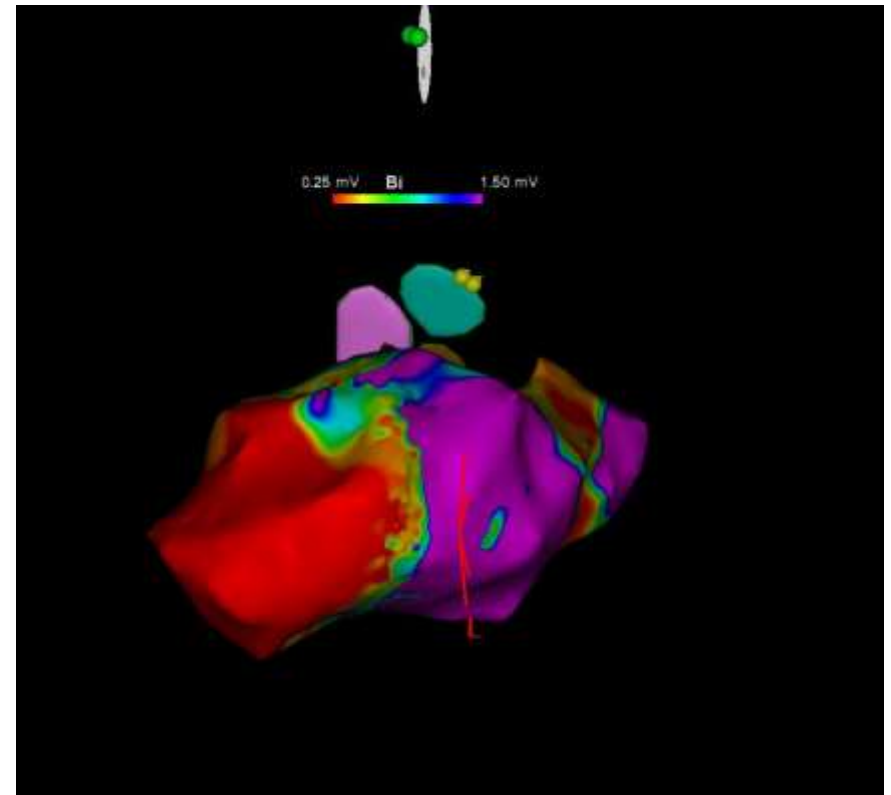
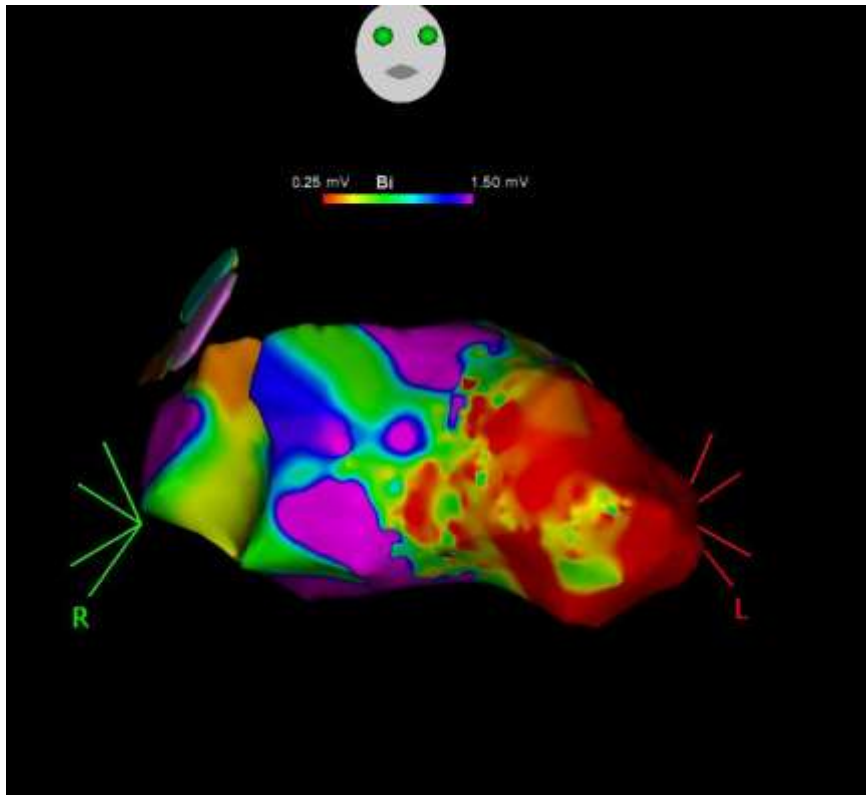
# VT + structural heart disease: Scar is present = ICD



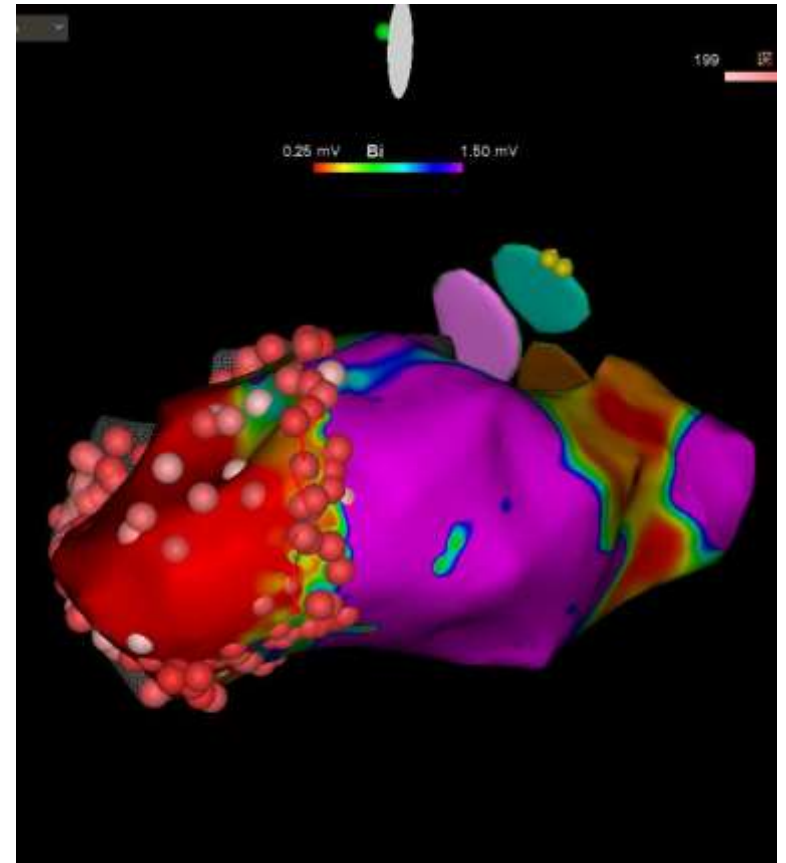
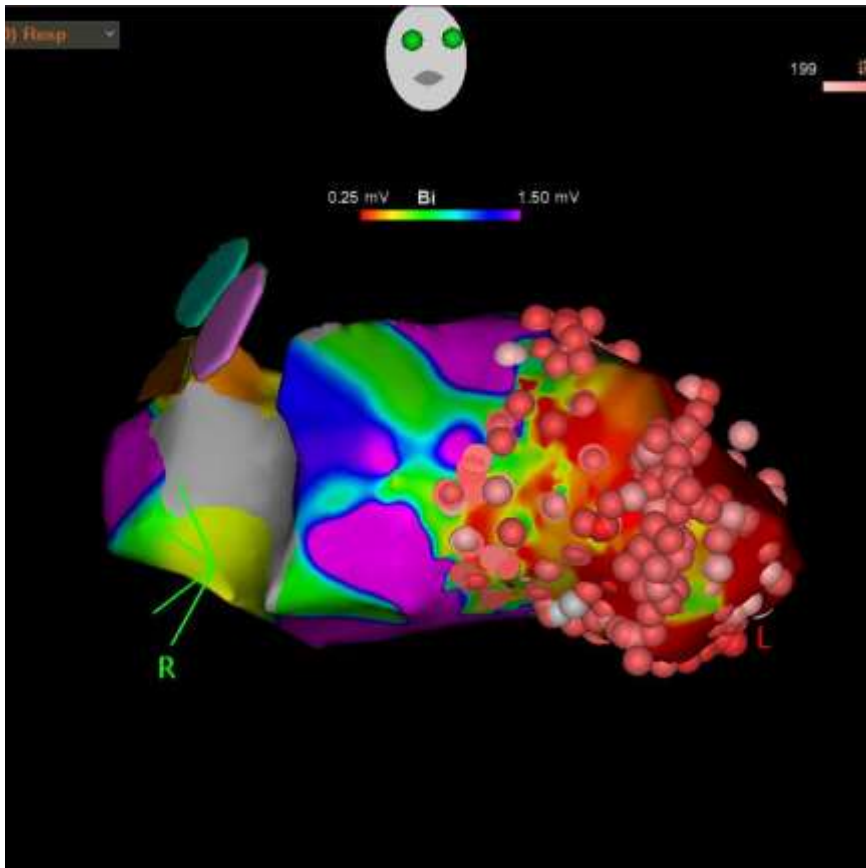
## ICD **28%** Risk Reduction in mortality

Oseroff O, et al. Subanalyses of secondary prevention implantable cardioverter-defibrillator trials: antiarrhythmics versus implantable defibrillators (AVID), Canadian Implantable Defibrillator Study (CIDS), and Cardiac Arrest Study Hamburg (CASH). *Curr Opin Cardiol.* 2004 Jan;19(1):26-30.

# Substrate Ablation: Burn the Scar



# Substrate Ablation: Burn the Scar



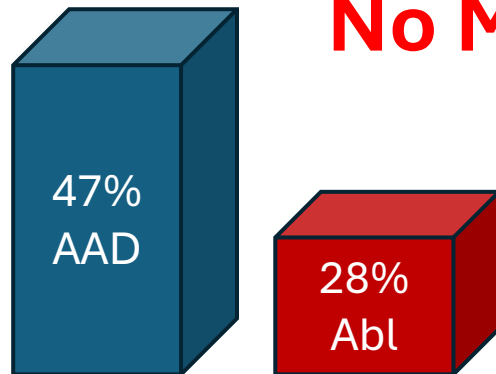
# Substrate Ablation Efficacy

## **SURVIVE-VT = 144 pts**

Substrate Ablation vs. AAD

Composite Endpoint

- Severe treatment-related complications
- Cardiac Hospitalization
- Electrical Storm



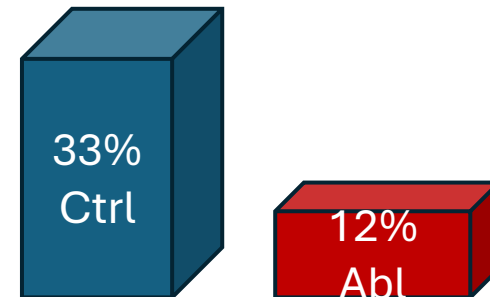
Arenal Á, et al. Substrate Ablation vs Antiarrhythmic Drug Therapy for Symptomatic Ventricular Tachycardia. J Am Coll Cardiol. 2022 Apr 19;79(15):1441-1453.

## **SMASH-VT = 128 pts**

Substrate Ablation vs. Control

- Appropriate ICD therapies (ATP + Shocks)

**No Mortality Difference**



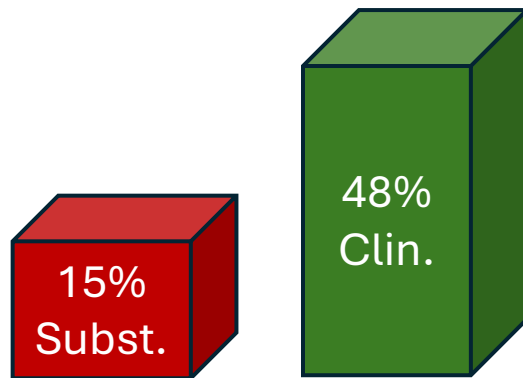
Reddy VY, et al. Prophylactic catheter ablation for the prevention of defibrillator therapy. N Engl J Med. 2007 Dec 27;357(26):2657-65.

# Substrate Ablation Efficacy

**VISTA = 144 pts**

Substrate Ablation vs. Clinical VT

AAD: 12% Substrate; 58% Clinical



**So I do both:**

- **induce clinical VT**
- **extensive substrate modification**

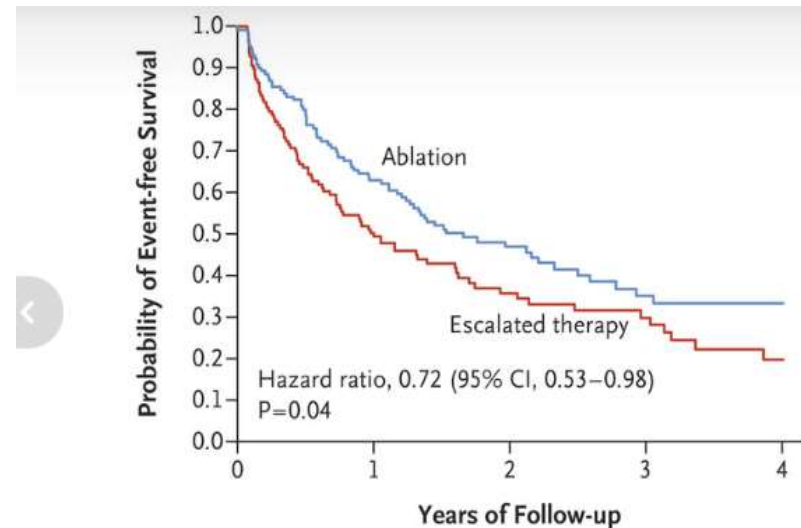
Di Biase L, et al. Ablation of Stable VTs Versus Substrate Ablation in Ischemic Cardiomyopathy: The VISTA Randomized Multicenter Trial. J Am Coll Cardiol. 2015 Dec 29;66(25):2872-2882.

# Ablation vs. Escalated AAD

**VANISH Trial – 259 patients**

**40% Lower  
Shock Burden**

Samuel M, et al. Ventricular Tachycardia and ICD Therapy Burden With Catheter Ablation Versus Escalated Antiarrhythmic Drug Therapy. *JACC Clin Electrophysiol.* 2023 Jun;9(6):808-821.



No. at Risk	0	1	2	3	4
Ablation	132	80	40	20	8
Escalated therapy	127	61	25	17	6

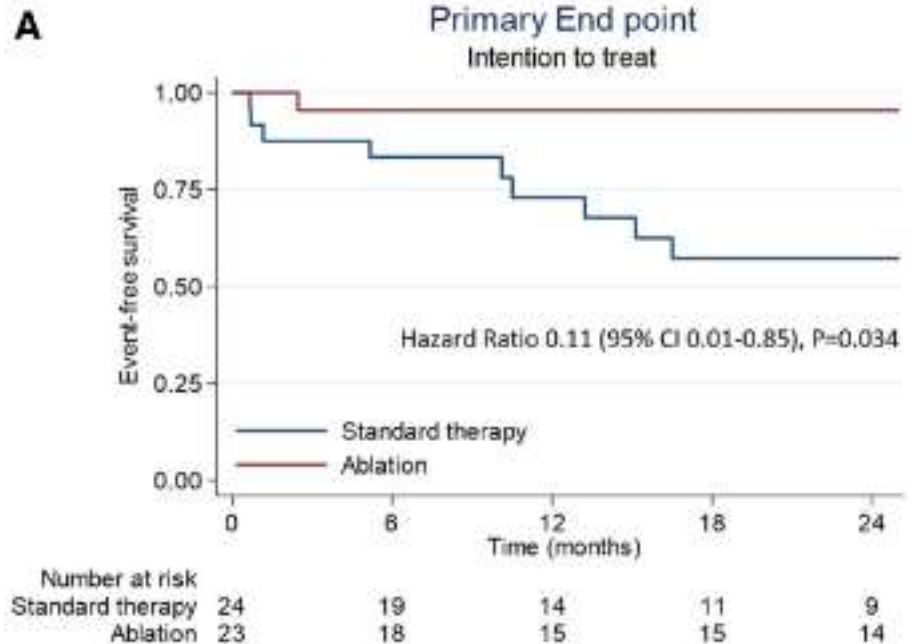
Sapp JL, et al. Ventricular Tachycardia Ablation versus Escalation of Antiarrhythmic Drugs. *N Engl J Med.* 2016 Jul 14;375(2):111-21.



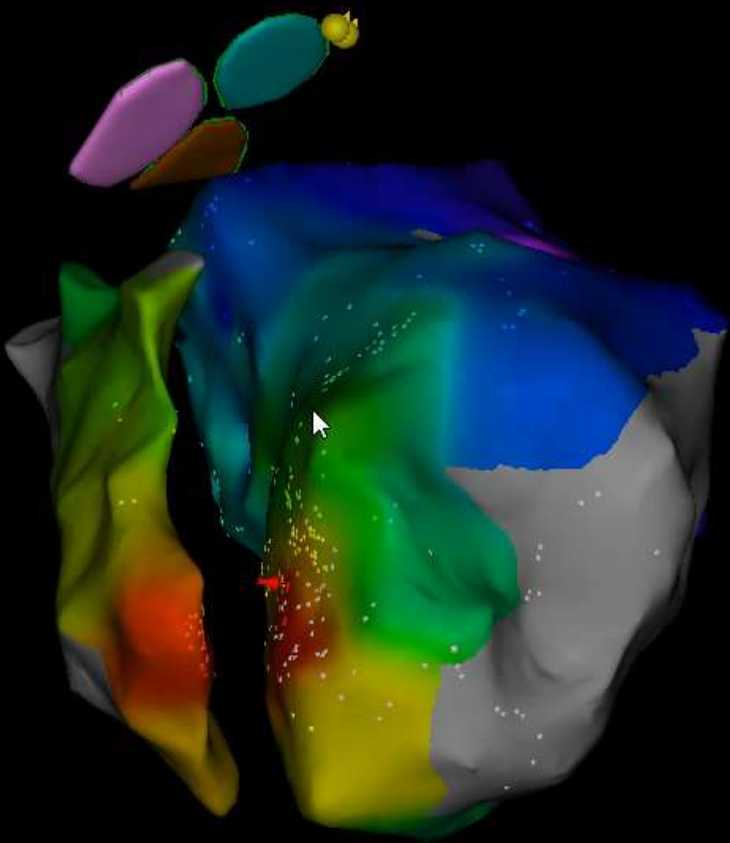
# Timing of First Ablation

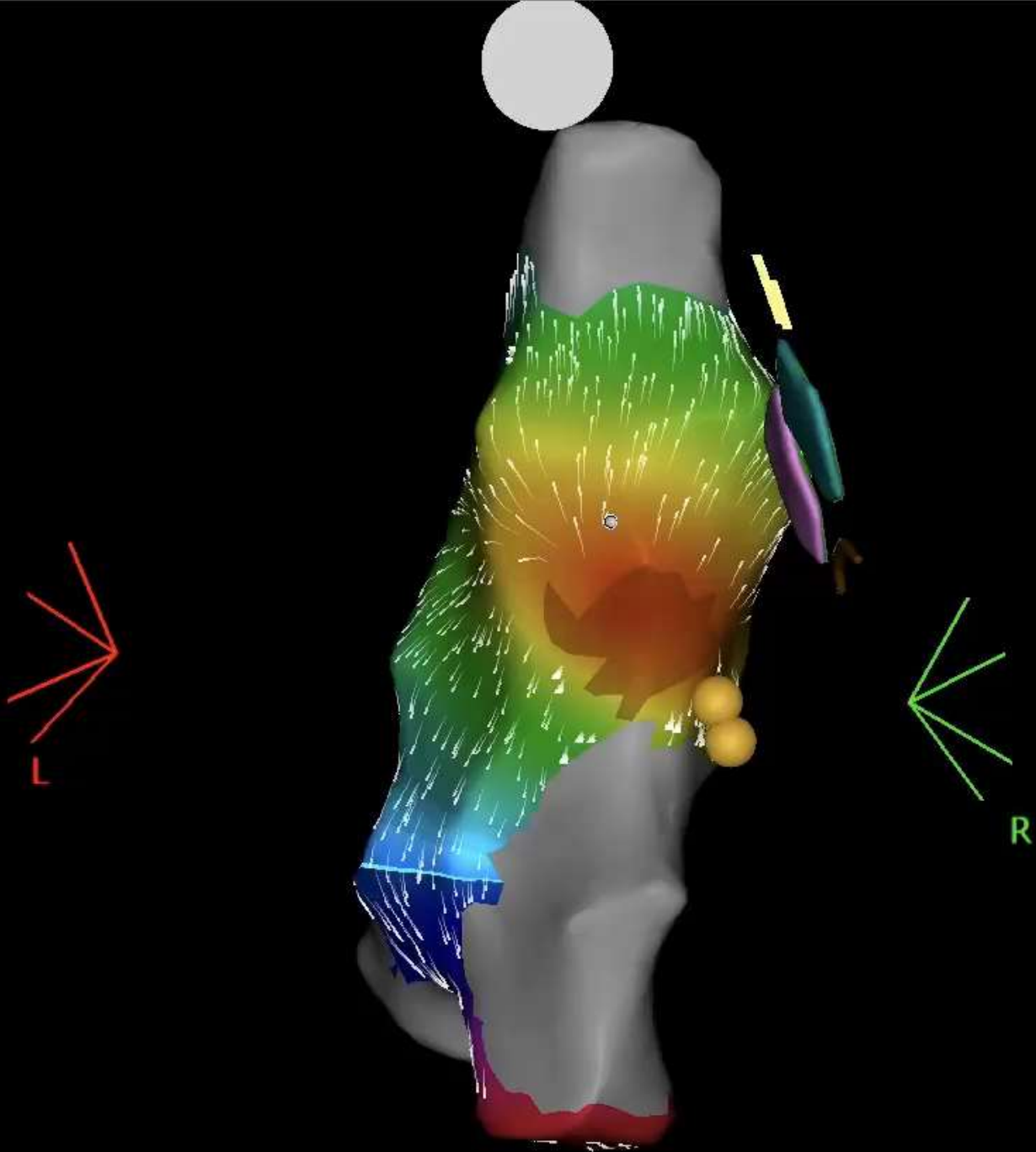
## PARTITA Trial

- 517 patients x 2.4 years
- 56 patients shocked
- 47 randomized, ablation vs. Meds
- Outcome: Death or Hospitalization : 4% vs. 42%

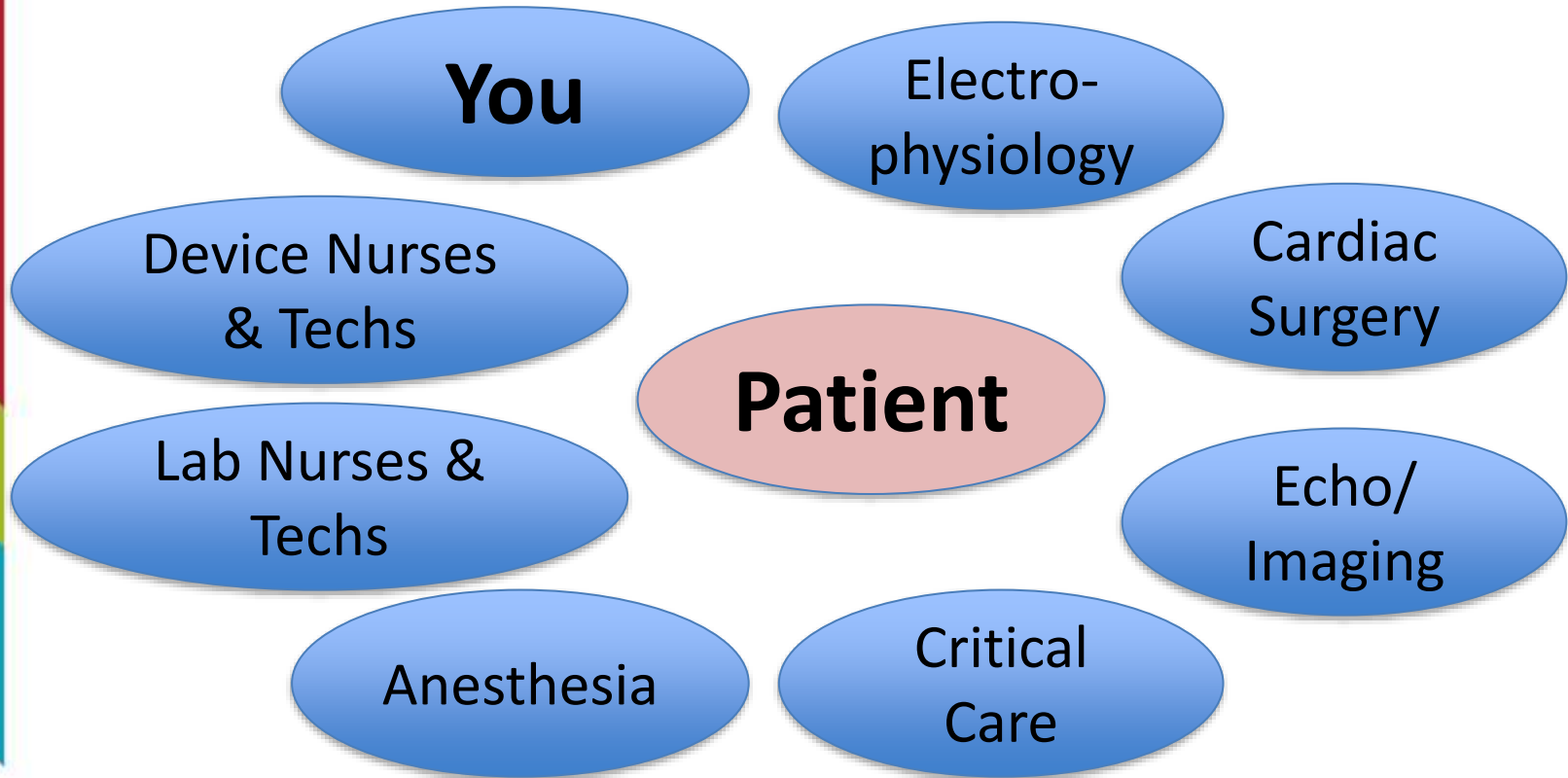


Della Bella P, et al. Does Timing of Ventricular Tachycardia Ablation Affect Prognosis in Patients With an Implantable Cardioverter Defibrillator? Results From the Multicenter Randomized PARTITA Trial. *Circulation*. 2022 Jun 21;145(25):1829-1838.

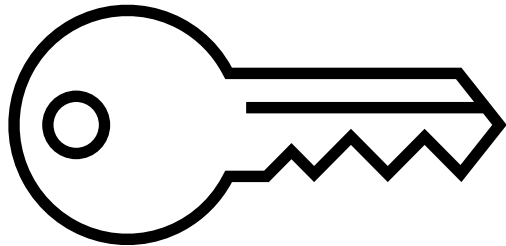




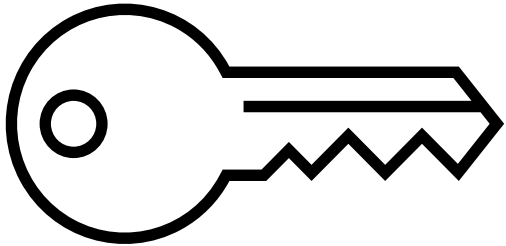
# Team



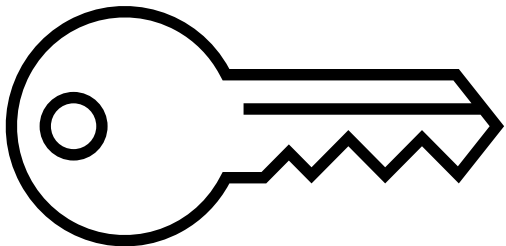
# Keys to Survival



**Promptly Initiate Resuscitation**



**Timely Referral**



**Coordinating Care**

