

# Help Patients Live Better. Longer.

Increasingly more data show that surgical ablation (SA) during heart surgery reduces mortality, risk of stroke, and other post-surgical complications. Patients who undergo concomitant treatment may have reduced hospital length of stay (LOS).<sup>5</sup> One study showed that one year after coronary artery bypass graft (CABG) surgery with surgical ablation for atrial fibrillation (Afib), **survival improved by as much as 42%**.<sup>1</sup> As long as 10 years after CABG surgery, Afib patients who received concomitant treatment still show a **20% improvement in life expectancy**.<sup>11</sup>

What's more, concomitant surgical ablation gives patients with non-paroxysmal Afib the highest chance at restoring normal sinus rhythm (NSR).<sup>15-17</sup> Patients with a surgically restored NSR show improvement in quality of life and reduced mortality.<sup>18,9</sup>

## Patients with Restored NSR Live Better.

In the majority of studies, patients achieving sinus rhythm demonstrate improved symptoms, as well as quality of life.<sup>19</sup>

A wealth of data led the Surgical Thoracic and Heart Rhythm Societies to make a **Class I recommendation** that patients with Afib undergoing valve or coronary surgeries receive surgical Afib treatment.<sup>19,20</sup>

## References:

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**AAD:** antiarrhythmic drugs

**ATAs:** atrial tachyarrhythmias

**AADs:** antiarrhythmic drugs

**ACs:** anticoagulants

**MVR:** mitral valve repair

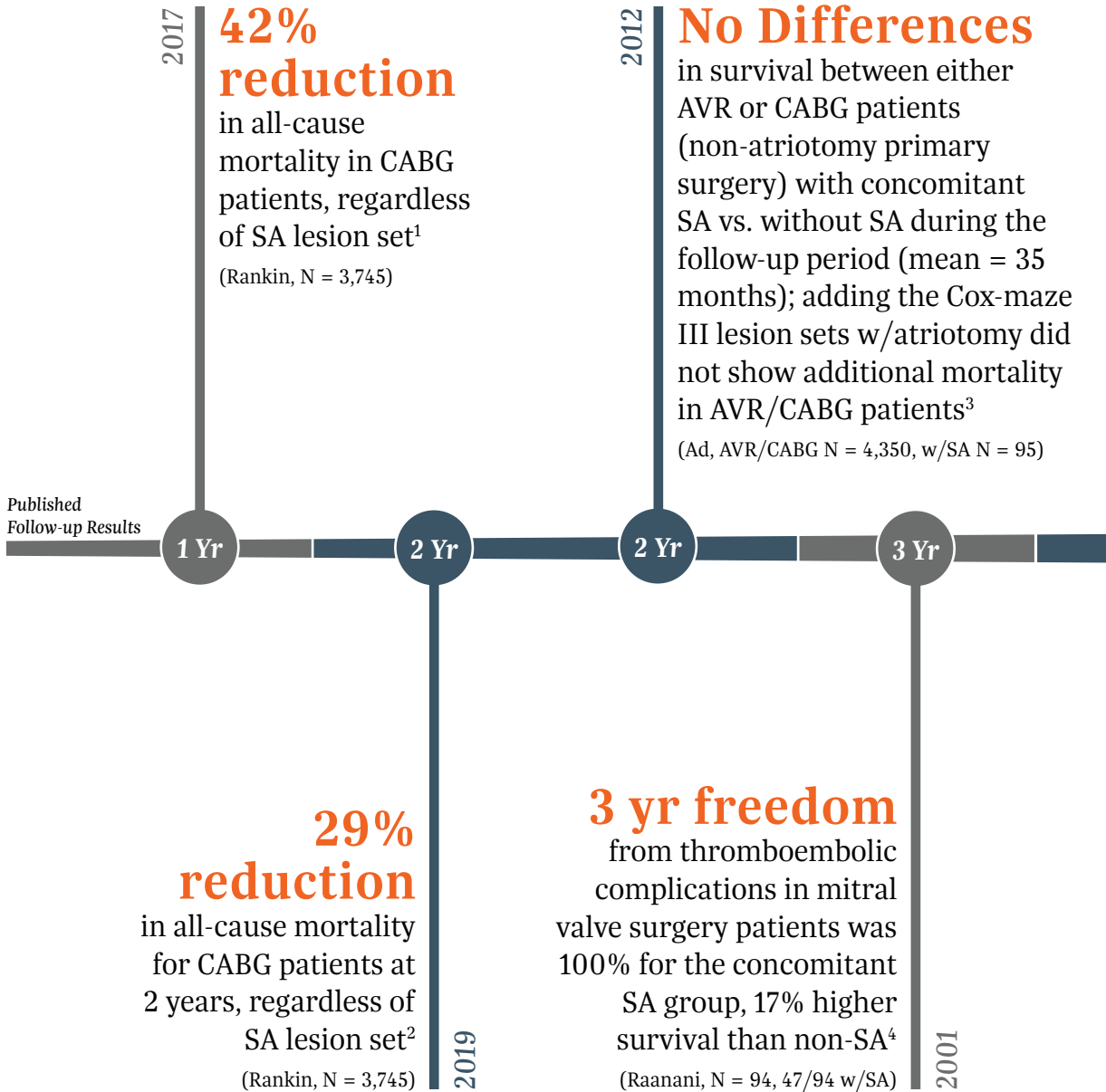
**Help Patients Live Better.  
Longer.**

**ACT**  

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**against Afib**

# 14 articles, 48,000 patients show that SA patients live longer.



2019

## 31% higher

survival at 5 years, not dependent on SA lesion set<sup>5</sup>

(Iribarne, N = 20,407)

2012

## No Difference

in survival between patients in the Afib SA group and patients in the no-Afib-prior-to surgery group at 1, 3, and 5 years<sup>7</sup>

(Lee, N = 3,262, w/preoperative Afib N = 813; 565/3,262 had concomitant SA)

2009

## 29% higher

5-year survival with SA, and 33% higher 5-year survival for subset of patients with left atrial diameter of more than 60 mm preoperatively<sup>9</sup>

(Louagie, N = 103)

5 Yr

5 Yr

5 Yr

5 Yr

5 Yr

6

Estimated survival of **76% at 5 years**, with freedom from ATAs and AADs at 70% at 5 years<sup>6</sup>  
(Schill, N = 135)

2017

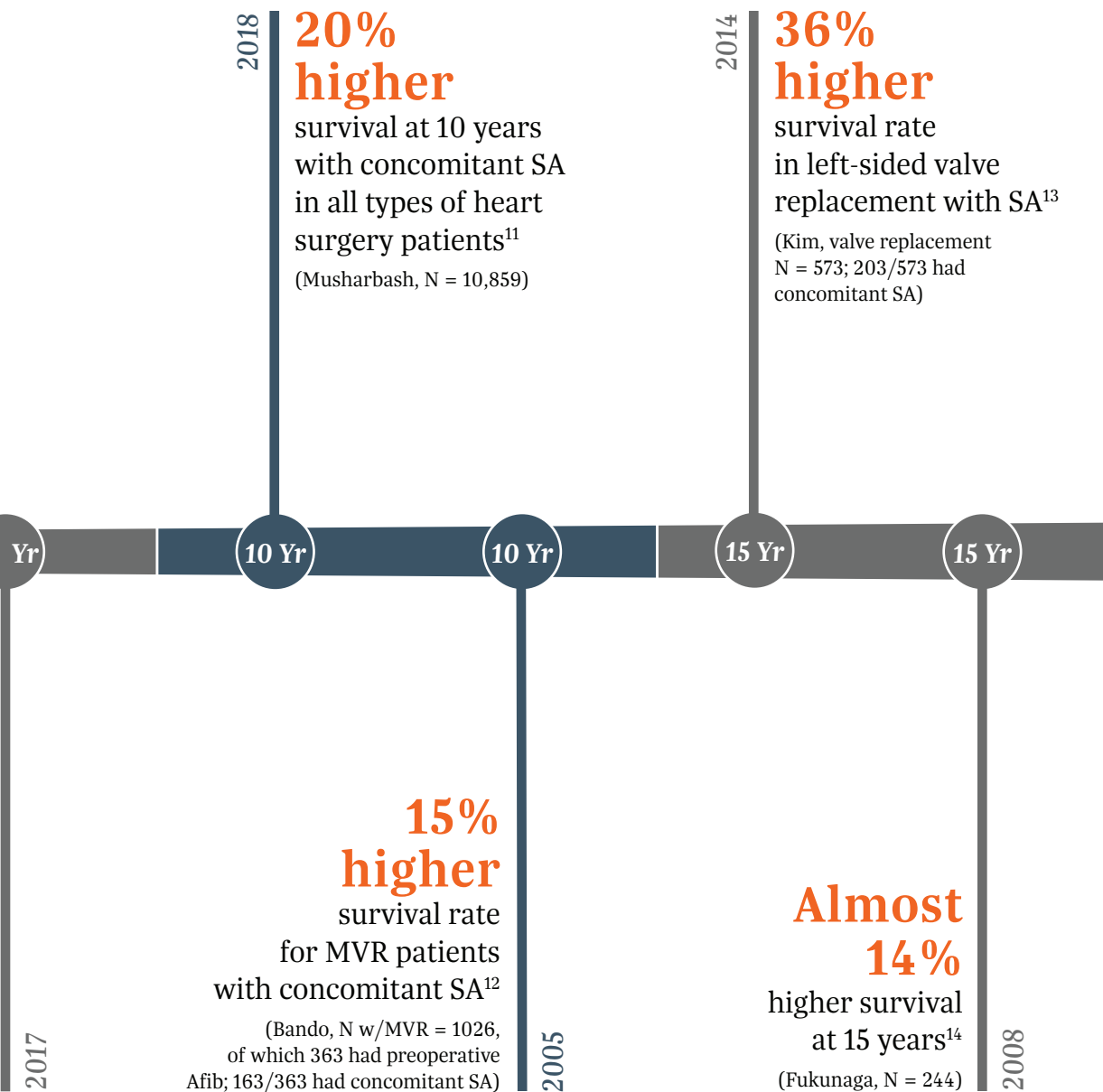
**8% higher** survival rate at 5 years<sup>8</sup>

(Attaran, N = 113)

2011

**No Increase** in perioperative rates of mortality or morbidity for concomitant SA patients with Afib undergoing CABG, AVR, or both, but SA reduces postoperative Afib burden and increases mid-term Afib-free survival out to 6 years<sup>10</sup>

(Al-Atassi, N = 375, 129/375 had concomitant SA)



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