

Contemporary atrial fibrillation management

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Chapter 5 - Comprehensive statements

Related to the PhD Thesis

- 1) PVI treatment comes at a certain cost, mainly caused by the ablation procedure itself. Thus, more effective and efficient methods like vHPSD or cryoablation are needed to further reduce costs for the intervention and prevent repeat procedures.
- 2) Higher employment rates and fewer early retirements in PVI vs. MDT are crucial from a socio-economic perspective and should be a strong argument for caregivers to allocate money to electrophysiology.
- 3) First-line PVI can clearly provide benefits over AAD and should be offered to our patients, as it is far more effective in maintenance of sinus rhythm than AAD.
- 4) In persistent AF new treatment targets like LVA-guided ablation could improve outcomes and reduce repeat ablations.

Related to the field of cardiology

- 5) Early restoration of sinus rhythm has been shown to be beneficial for patient outcome, will be an important factor in future AF therapy, and PVI will play a key role in it.
- 6) Caregivers should be provided with objective data on various technologies and their alternatives to facilitate the formation of rational decisions in healthcare management.
- 7) Technologies like vHPSD and cryoablation provide reduced ablation times for PVI, freeing resources in the EP laboratory, which is crucial for a more efficient use of staff and facilities.

Related to the scientific impact

- 8) PVI reveals an economically attractive alternative to MDT and is able to restore health expenditure of the individual patient to the level before AF.
- 9) Healthcare expenditures for ablation therapy are a reasonable investment in our AF patients. It impacts important socio-economic factors and might even improve mortality.