

INPLASY

The Value of Adjunctive Left Atrial Posterior Wall Isolation on Clinical Outcomes in Atrial Fibrillation Patients: a systematic review and meta-analysis

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202380127

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 30 August 2023 and was last updated on 30 August 2023.

INTRODUCTION

Review question / Objective It remains unclear whether additional left atrial posterior wall isolation (LAPWI) beyond pulmonary vein isolation (PVI) is beneficial in atrial fibrillation (AF) patients. This study evaluated the impact of adjunctive left atrium posterior wall isolation (LAPWI) on clinical outcomes of atrial fibrillation (AF) patients.

Condition being studied Recurrence of all atrial arrhythmia (AA), atrial fibrillation (AF), atrial flutter (AFL)/atrial tachycardia (AT) and procedural adverse events.

METHODS

Participant or population Patients with atrial fibrillation.

Intervention Additional left atrial posterior wall isolation (LAPWI) beyond pulmonary vein isolation (PVI).

Comparator Pulmonary vein isolation (PVI) only.

Study designs to be included Studies comparing PVI to PVI+PWI in patients with atrial fibrillation.

Eligibility criteria (1) Patients with atrial fibrillation. (2) additional left atrial posterior wall isolation (LAPWI) beyond pulmonary vein isolation (PVI) (3) outcomes Indicators: recurrence of all atrial arrhythmia (AA), atrial fibrillation (AF), atrial flutter (AFL)/atrial tachycardia (AT) and procedural adverse events.

Information sources We will search the references in the included trials and personal files. We will

request advice from experts in the field. In addition, we will search associated articles from meetings, and contacted the authors of included trials, if need.

Main outcome(s) A compound endpoints of safe outcomes.

Quality assessment / Risk of bias analysis We evaluated the methodological quality of the individual studies using the Cochrane risk of bias tool for RCTs.

Strategy of data synthesis We will consider using the number of participants and deaths between different groups for analysis. Mortality may also be reported.

Subgroup analysis (1) paroxysmal AF; (2) persistent AF (3)ablation with Cryoballoon.

Sensitivity analysis We conducted sensitivity analyses to investigate the influence of a single study on the overall pooled estimate of each predefined outcome.

Country(ies) involved China.

Keywords Atrial Fibrillation; Left Atrial Posterior Wall Isolation; pulmonary vein isolation.

Contributions of each author

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