Electrophysiologic study in the developed new conduction abnormality in post TAVI patients Ramathibodi hospital, Thailand.

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Introduction: The developed new conduction delay in post TAVI was occurred, which can be risk of sudden death, so EP study was used to evaluate risk of sudden death.

Methods: The Retrospective study between 1 November 2017 to 30 March 2019 in Ramathibodi hospital, Thailand. The patient who had the developed new conduction abnormality in post transcutaneous aortic valvular intervention during admission and was enrolled.

Result: 13 patients were enrolled in the study. 5 were male (38%), mean age 83 years old (range 73-91), mean STS M 6.37+/−3.9(range 2.36-15). The developed new conduction abnormality day was median 1 day (range 0-5 days), New Abnormal conduction were New LBBB 8 cases, Intermittent LBBB 2 cases, Alternating BBB 2 cases and RBBB with intermittent pace 1 case. The EP study date after developed new abnormal conduction was median 3 days (range 3-6 days). AH interval between PPM group and non PPM group were mean 120 (range 78-170 ms) vs 14 (range 87-142) P Value 0.801. HV interval between PPM group and non PPM group were mean 79 (range 46-114) vs 53(45-64) P value 0.011 Indication of Pacemaker was nodal block 1 case, prolong HV interval 3 case, complete heart block 1 case. Due to small sample of study, the predictive factor of PPM couldn't be identify.

Conclusion: New conduction abnormality in post TAVI should be electrophysiologic study for identify indication of pacemaker.