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 evaluation of 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 (range78-170 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.