A: Unipolar mapping with a wire in branch of great cardiac vein near left ventricular summit recorded good signal, preceding QRS onset by 40ms.

B: Occlusion of the suitable vein by an over the wire balloon and ensure no leakage of contrast. After than total of 2.5mL of absolute alcohol was injected in small bolus.

C: Post procedural MRI demonstrated transmural late gadolinium enhancement created by alcohol ablation. Noted the mid ventricular late gadolinium enhancement in lateral and inferoseptal wall consistent with underlying nonischemic cardiomyopathy.