Case report: Multi accessory pathways: endocardial and epicardial

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A 44 years - old male patient had been diagnosed WPW syndrome. He underwent to cath lab for electrophysiology study and ablation. The 12 lead ecg suggested an type A Wolff – Parkinson – White syndrom with left lateral pathway. We induced an narrow QRS tachycardia, the earliest atrial activation is on CS distal (same as A-V fusion wave on sinus rhythm). After successful ablation on CS distal, another tachycardia appeared which got different sequence in CS (the earliest atrial activation is on CS 7-8, but not fusion). We tried many time from left ventricular endocardial but not success. We tried approach via coronary sinus vein and stopped the tachycardia after 2 second. No more delta wave after ablation from CS.

12 lead surface ECG

Intra - cardiac electrograms and first tachycardia
After successful ablation in CSD

The second tachycardia appeared

Target site in coronary sinus vein
V-A disassociation after ablation

ECG after ablation (no more delta wave)

Conclusions:
There were both endocardia and epicardia pathway in a patient is very rare but still.