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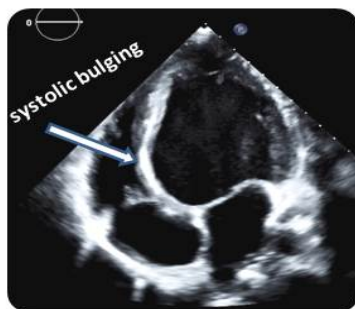
A Young Patient with mid-septal accessory pathway accompanied by left ventricular dysfunction

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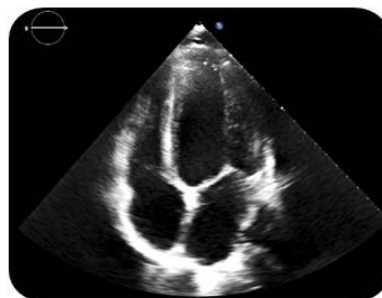
Objectives: Early septal activation may induce asynchronous ventricular activation in patients with WPW-pattern

We report the case of a 16-years old patient with WPW-pattern and a highly impaired LV-function (EF 33%) due to asynchronous ventricular activation because of a midseptal accessory pathway(AP). The patient is a refugee from Nigeria who presented to our outpatient clinic because of progressive limitation of his physical capacity. X- ray showed cardiomegaly. Neither tachycardia, nor treatment but two times episodes of syncope were reported. Echocardiography revealed an asynchronous septal motion with systolic bulging. A successful resynchronization was achieved by catheter ablation of the AP. Following an improvement of both the dyssynchronia and LV function (EF50%) could be seen. Despite sustained synchronous ventricular activation in 6 month follow up LV-EF was still slightly reduced. This unexpectedly long persistence of systolic function is presumably explained by the duration of asynchronous ventricular activation of over one decade.

Conclusion: Catheter ablation of septal pathways may result in ventricular dyssynchrony, yet early ablation may be beneficial for complete recuperation of LV function.



before ablation



after ablation