

Clinical trials of catheter ablation for atrial fibrillation in all type of patients

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1 catheter ablation

Trial	Treatments	Patients	Trials design and methods
catheter ablation vs control			
Forleo , 2009 n=35/35 follow-up: 12 months	pulmonary vein isolation versus antiarrhythmic drug treatment	patients with diabetes mellitus type 2 and paroxysmal or persistent AF	Parallel groups open Italy
A4 (Jais) , 2008 [NCT00540787] n=53/59 follow-up: 12 months	catheter ablation versus antiarrhythmic drugs	patients with paroxysmal AF resistant to at least 1 antiarrhythmic drug.	Parallel groups open France,Canada, USA
ThermoCool AF , 2008 [NCT00116428] n=106/61 follow-up: 9 months	catheter ablation versus antiarrhythmic drug therapy with a class I or III drug	patients with AF who were nonresponsive to previous treatment with antiarrhythmic drugs	Parallel groups open
Oral , 2006 n=77/69 follow-up: 12 months	circumferential pulmonary-vein ablation and amiodarone versus amiodarone and two cardioversions during the first three months alone	patients with chronic atrial fibrillation	Parallel groups open Italy, USA
APAF (Pappone) , 2006 n=99/99 follow-up: 12 months	left atrial catheter ablation versus 65279;Flecainide acetate, propafenone hydrochloride, or sotalol hydrochloride	65279;Drug-refractory paroxysmal AF >=6mo	Parallel groups open Italy
CAFCOAF (Stabile) , 2006 n=68/69 follow-up: 12 months	left atrial catheter ablation plus amiodarone or other drugs versus Amiodarone or other drugs	Drug-refractory or drug-intolerant paroxysmal or persistent AF	Parallel groups open blinded assessment Italy
Lakkireddy , 2006 n=138/139 follow-up:	-	-	Parallel groups USA
Wazni , 2005 n=32/35 follow-up: 12 months	Pulmonary vein isolation versus Flecainide, propafenone, or sotalol; amiodarone if needed	Drug-naive monthly symptomatic AF >=3mo	Parallel groups open USA, Italy,Germany
Krittayaphong , 2003 n=15/15 follow-up: 12 months	left atrial catheter ablation versus amiodarone	drug-refractory amiodarone-naive paroxysmal or persistent AF >=6mo	open Thailand

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Trial	Treatments	Patients	Trials design and methods
CABANA , 2018 <i>unpublished</i> [NCT00911508].] n=2204 follow-up:	left atrial catheter ablation versus current state-of-the-art therapy with either rate control or rhythm control drugs	patients with untreated or incompletely treated AF	Parallel groups open North America, Western and Eastern Europe, Asia, and Australia
STOP-AF , 2010 [NCT00523978] n=163/82 follow-up: 12 mo	cryo-balloon catheter for pulmonary vein isolation versus nonfailed antiarrhythmic drugs	patients with paroxysmal atrial fibrillation	Parallel groups open
MANTRA-PAF <i>ongoing</i> [NCT00133211] n=NA follow-up: 2 years	Radiofrequency Ablation versus Medical Antiarrhythmic Treatment	Paroxysmal Atrial Fibrillation	Parallel groups open
RESOLVE-AF <i>ongoing</i> [NCT00111488] n=200 follow-up:	Surgical Ablation with Microwave Energy versus control	patientst with permanent atrial fibrillation	Parallel groups open

References

Forleo, 2009:

Forleo GB, Mantica M, De Luca L, Leo R, Santini L, Panigada S, De Sanctis V, Pappalardo A, Laurenzi F, Avella A, Casella M, Dello Russo A, Romeo F, Pelargonio G, Tondo C Catheter ablation of atrial fibrillation in patients with diabetes mellitus type 2: results from a randomized study comparing pulmonary vein isolation versus antiarrhythmic drug therapy. J Cardiovasc Electrophysiol 2009;20:22-8 [18775050] [10.1111/j.1540-8167.2008.01275.x](https://doi.org/10.1111/j.1540-8167.2008.01275.x)

A4 (Jais), 2008:

Jas P, Cauchemez B, Macle L, Daoud E, Khairy P, Subbiah R, Hocini M, Extramiana F, Sacher F, Bordachar P, Klein G, Weerasooriya R, Clmenty J, Hassagerre M Catheter ablation versus antiarrhythmic drugs for atrial fibrillation: the A4 study. Circulation 2008 Dec 9;118:2498-505 [19029470]

ThermoCool AF, 2008:

Oral, 2006:

APAF (Pappone), 2006:

CAFCOAF (Stabile), 2006:

Lakkireddy, 2006:

Wazni , 2005:

Krittayaphong, 2003:

CABANA, 2018:

STOP-AF, 2010:

MANTRA-PAF, :

RESOLVE-AF, :

2 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and meta-analysis in the field of all major heart and vessels diseases.

The TrialResults-center database provides a unique view of the treatment efficacy based on all data provided directly from clinical trial results, offering a valuable alternative to personal bibliographic search, published meta-analysis, etc. Furthermore, it would allow comparing easily the various concurrent therapeutic for the same clinical condition.

Rigorous meta-analysis method is used to populate TrialResults-center: widespread search of published and non published trials, study selection using pre-specified criteria, data extraction using standard form.

TrialResults-center is continually updated on a weekly basis. We continually search all new results (whatever their publication channel) and these news results are immediately added to the database with a maximum of 1 week.

TrialResults-center is non-profit and self-funded.