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Accessory pathway ablation: microelectrodes reveal the hidden signals

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A 73-year-old woman was referred for ablation of a concealed accessory pathway and paroxysmal atrial fibrillation. Pulmonary vein isolation was performed using the QDOT Micro® catheter (Biosense Webster, Inc., CA, USA). Afterwards, sustained atrioventricular re-entry tachycardia was induced, and the right-sided septal accessory pathway was mapped. While the atrial electrogram was not clearly discernible with conventional bipolar electrodes of the 3.5 mm ablation catheter, the three additional microelectrodes (1.5 mm apart, filter settings 16–500 Hz) of the QDOT Micro® revealed the nearfield atrial bipolar electrograms (*in Panel A) at the site of the shortest ventriculoatrial interval. Ablation at this spot (Panel B) terminated the tachycardia in 2.2 s. This case shows that high-resolution mapping by QDOT Micro® helps guiding ablation by detection of discrete nearfield signals.

Conflict of interest: none declared.

