Fascicular VT Ablation - The Origin of the VT

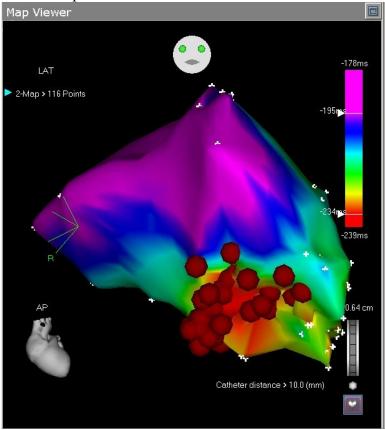
Shimon Rosenheck, Jeffrey Banker, Zehava Sharon Heart Institute, Hadassah Hebrew University Medical Center, Israel

Fascicular VT is a relatively rare entity and is encountered in patients without structural heart disease and without myocardial macroscopic scar. The usual ECG has RBBB and superior axis. Electro anatomic mapping revealed new information on the origin of left fascicular VT.

From among 66 VT ablated during the last 7 years, 6 originated in the left ventricle in patients without evidence of any heart disease. (2 women and 4 men). The site at which the ablation was successful was in the inferior apical area in 5 patients and in the mid lateral wall in one patient. The VT was mapped and ablated with termination of the VT during the ablation and rendered non inducible after the ablation. There was no scar on bipolar CARTO mapping. No conduction defects were observed after the ablation

Figure 1.

Partial LV picture in AP. The successful ablation area is in the inferior apical area



Conclusions:

Most of the fascicular VT originates in the inferior apical area and not from the normal conduction tissue, suggesting abnormal fascicular presence.