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P Wave Index and Atrial Fibrillation Recurrence

P Dalgası İndeksi ve Atriyal Fibrilasyon Nüksü

LETTER TO THE EDITOR
EDİTÖRE MEKTUP

Dear editor,

We recently read with keen interest a novel study of an effective novel index of P wave duration-to-amplitude ratio for predicting the recurrence of atrial fibrillation ablation by Doğduş et al.[1] It was such excellent work to explore the likelihood of atrial fibrillation (AF) recurrence after the ablation procedure using a simple parameter. Previous studies had investigated the risk factors for recurrence, such as age, persistent AF,[2] left atrial diameter,[3,4] and atrial remodeling using delayed enhancement magnetic resonance imaging[5], however, with a lack of sensitivities and specificities. Some minor drawbacks need to be addressed in this current study.

In our understanding, based on the protocol presented in the study, P wave morphology was measured single time following the ablation procedure by a 12-lead electrocardiogram (ECG) and the electrophysiology (EP) system. To the best of our knowledge, the emergence and visibility of P wave following ablation are a subject of debate, with the possibility of changing its morphology days to months after ablation.[6] We assume that the P wave parameter needs to be measured several times to obtain reliable numbers. The authors should also explain why the duration and amplitude of the P wave were only measured in lead II, as several other studies measured P wave indices using the maximum (longest) duration in 12-lead ECG.[7,8]

Declaration of Interests: The authors declare that they have no competing interest.

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Denny Suwanto, M.D.[1]
Eka Prasetya Budi Mulia, M.D.[1,2]

[1]*Department of Cardiology and Vascular Medicine, Universitas Airlangga Faculty of Medicine, Dr. Soetomo General Hospital, Surabaya, Indonesia*
[2]*Department of Cardiology and Vascular Medicine, Dr. R. Soetrasno General Hospital, Rembang, Indonesia*

Corresponding author:
Eka Prasetya Budi Mulia
✉ eka.prasetya.budi-2017@fk.unair.ac.id, ekapbmulia@gmail.com

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