Surgical treatment of atrial fibrillation using radiofrequency ablation
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SECTION I; INTRODUCTION AND TECHNIQUES

1. Introduction

2. Surgical treatment of atrial fibrillation; a systematic review
   *European Journal of Cardio-Thoracic Surgery, in press*
   Khargi K, Hutten BA, Lemke B, Deneke Th

3. Considerations regarding energy sources, techniques and pitfalls in the treatment of atrial fibrillation as a concomitant surgical procedure
   Submitted
   Khargi K, Lemke B, Deneke Th

SECTION II; SALINE-IRRIGATED COOLED-TIP RADIOFREQUENCY ABLATION

4. Saline-irrigated, cooled-tip radiofrequency ablation is an effective technique to perform the Maze procedure; a prospective randomized study
   *Annals of Thoracic Surgery 2001; 72: S 1090-5*
   Khargi K, Deneke Th, Lemke B, Haardt H, Müller KM, Laczkovics A

5. Irrigated radiofrequency ablation is a safe and effective technique to treat atrial fibrillation; a cohort study comprising 124 consecutive patients
   *Interactive Cardiovascular and Thoracic Surgery 2003; 2: 241-5*
   Khargi K, Deneke Th, Lemke B, Laczkovics A

6. Left atrial versus bi-atrial Maze procedure using intraoperative cooled-tip radiofrequency ablation in patients undergoing open heart surgery; safety and efficacy
   *Journal of American College of Cardiology JACC 2002; 39: 1644-50*

SECTION III; PATIENTS' INDICATION AND SELECTION

7. Anti-arrhythmic procedures to treat permanent atrial fibrillation in CABG and AVR patients are as effective as in mitral valve patients
   Oral presentation at the annual meeting of the European Association of Cardio-Thoracic Surgery EACTS September 2004, Leipzig, Germany
   Submitted
   Khargi K, Lemke B, Deneke Th
8. Concomitant anti-arrhythmia surgery, using irrigated-cooled-tip radiofrequency ablation, to treat chronic permanent atrial fibrillation in CABG patients; expansion of the indication. 


9. Concomitant anti-arrhythmic procedure in combined valve(s) and CABG high risk patients. 

"Presentation at the 34th annual meeting of the German Society for Thoracic and Cardiovascular Surgery February 2005, Hamburg, Germany
Submitted
Khargi K, Lemke B, Mügge A, Laczkovics A, Deneke Th

SECTION IV; POSTOPERATIVE CARE AND COMPLICATIONS

10. Histopathology of intraoperatively induced linear radiofrequency ablation lesions in patients with chronic atrial fibrillation 

*Presented at the annual meeting of the North American Society of Pacing and Electrophysiology (NASPE), May 2004, San Francisco, USA
Submitted
Deneke Th, Khargi K, Grewe PH, Lemke B, Mügge A, Laczkovics A, Becker AE, Müller KM

11. Esophageal perforation during left atrial radiofrequency ablation 

*Journal of Thoracic and Cardiovascular Surgery* 2003; 126: 2119-20
Laczkovics A, Khargi K, Deneke Th

12. A possible surgical technique to avoid esophageal- and circumflex artery injuries using radiofrequency ablation to treat atrial fibrillation 

Khargi K, Laczkovics, Müller KM, Deneke Th

13. Anti-arrhythmic surgery to cure atrial fibrillation; subgroups and postoperative management 

*Cardiac Electrophysiology Review* 2003; 7: 259-63
Deneke Th, Khargi K, Mügge A, Laczkovics A, Lemke B

SECTION V; SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

14. Summary, conclusions and recommendations

15. Nederlandse samenvatting, conclusies en aanbevelingen

16. Acknowledgments

17. Curriculum Vitae
Abbreviations

SR= Sinus rhythm
AF= Atrial fibrillation
SICTRA= Saline- irrigated, cooled- tip radiofrequency ablation
AVR= Aortic valve replacement
CABG= Coronary artery bypass grafting
MVR= Mitral valve replacement