

Special Issue on Atrial Fibrillation Treatment in the Interventional Therapy Era

CALL FOR PAPERS

Atrial fibrillation (AF) is a major cardiovascular burden worldwide. Owing to its multifactorial pathogenesis and unpredictable progression, AF remains one of the toughest challenges for electrophysiologists. While in the era of percutaneous intervention, we are provided with various innovative and effective strategies against AF. Catheter ablation, whether driven by radiofrequency (RF) or cryo-energy, achieves promising AF control. Meanwhile left atrial appendage (LAA) closure performs comparable stroke prophylaxis to oral anticoagulants. Furthermore, innovative interventional equipment is brought forth clinically for optimizing procedural outcomes, such as diamond ablation catheter for better RF energy delivery and temperature control, RHYTHMIA high-definition mapping system with more precise conduction detection, intracardiac echocardiography guidance during procedures, and Lambre devices, besides WATCHMAN and Amplatzer, for stroke prevention.

We are fortunate to have plenty of advanced therapies; however, due to the less specified application of those intervention therapies, nonuniform periprocedural management, and diverse follow-up approaches and devices, we are left confused about the indication and optimization of the strategies and fail to reach satisfactory results under conditions like persistent AF or AF with severe comorbidities. Moreover, noninterventional approaches, like novel antiarrhythmic and anticoagulative drugs, emerge with better safety and efficacy, achieve similar results as interventional methods, and challenge the necessity of interventional strategies. Hence, it is our mission to concentrate on, comprehend, and proficiently master those strategies and related management techniques, to provide a better living quality for AF patients.

In this special issue, we mainly focus on innovation and recent progress of interventional therapy, epidemiological characteristics of AF, imaging and electrophysiological assessment of AF and optimizing procedural management. Research and review articles are both welcomed.

Potential topics include but are not limited to the following:

- ▶ Epidemiological characteristics and risk management of AF population
- ▶ Clinical evidence of indication and outcomes of catheter ablation, LAA closure, and other interventional strategies treating AF
- ▶ Optimizing periprocedural management, including procedural details, antiarrhythmic, and anticoagulative medication
- ▶ New spots on preprocedural anthropometric, radiological, or echocardiographic evaluation and estimation of procedural outcomes
- ▶ Optimizing postprocedural antiarrhythmic and anticoagulative application strategies
- ▶ The feasibility of novel follow-up electrocardiographic or other related biochemical monitoring equipment
- ▶ Noninterventional therapy, including but not limited to, antiarrhythmic and anticoagulative drugs, and their comorbidities and life-style management
- ▶ Innovative intervention-related equipment with novel ablative energy sources, mapping systems, or other auxiliary radiological and echocardiographic equipment

Authors can submit their manuscripts through the Manuscript Tracking System at <https://review.wiley.com/submit?specialIssue=211141>.

Papers are published upon acceptance, regardless of the Special Issue publication date.

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