

Treatment of Pathophysiologic Propagation Outside of the Pulmonary Veins in the Retreatment of AF: RECOVER AF

Betts T et al. Treatment of pathophysiologic propagation outside of the pulmonary veins in retreatment of AF. *EP Europace*.

Objective

The study evaluated the performance of AcQMap to guide ablation of non-PV targets in persistent AF patients following a first or second failed procedure.

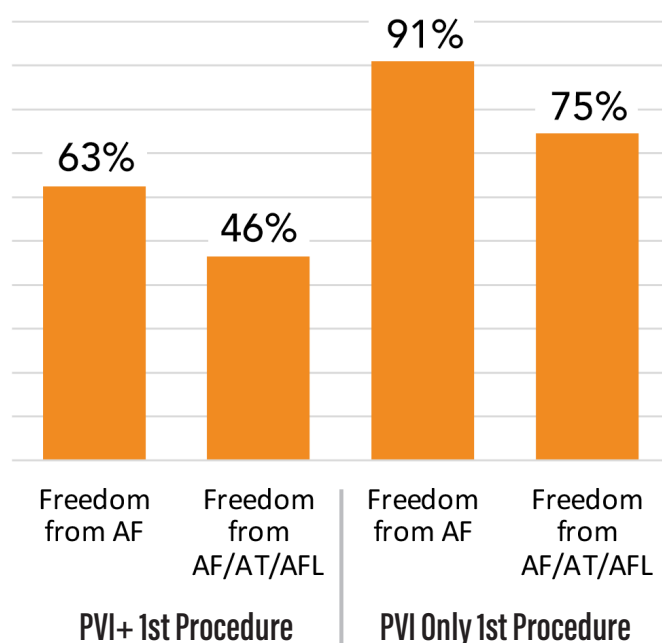
Methods

- Prospective, nonrandomized trial with 103 recurrent AF patients
- AF maps were used to guide the ablation of non-PV targets through elimination of pathologic conduction patterns (PCPs)
- Primary endpoint was freedom from AF at 12-months

Key Findings

- **76%** of all patients in the study were free from AF at one year
- Freedom from AF was **91.5%** for patients with only a PVI prior to enrollment
- Patient **outcomes improve the earlier individualized strategies are employed**
- Non-PV **anatomical ablations may be detrimental** to treatment plans

Patient Outcomes at 1 Year

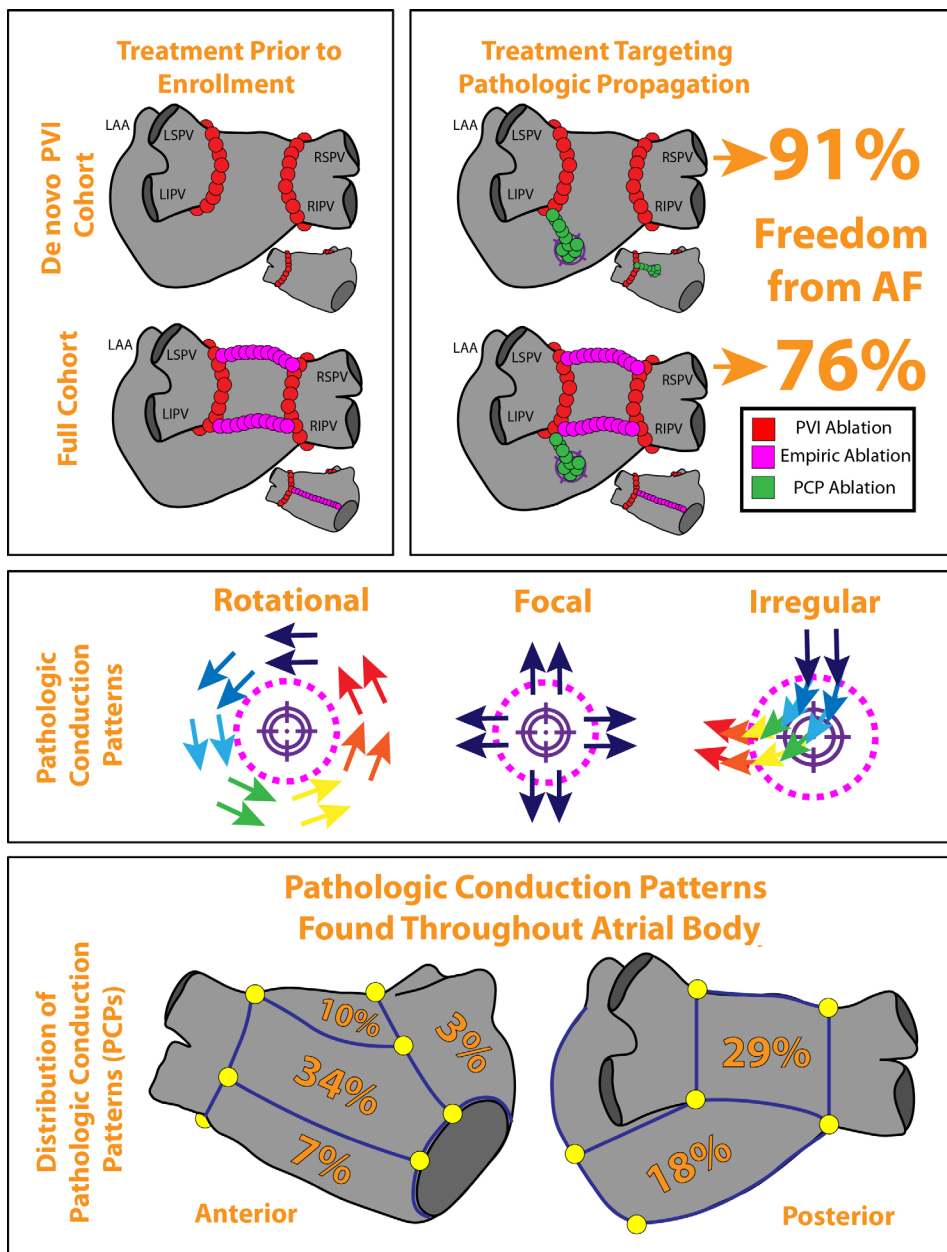


“These results are encouraging and add to the growing evidence that mapping AF to guide an individualized treatment plan may be advantageous at the earliest opportunity in patients with persistent AF.”

— Timothy R. Betts, MD, MBChB, FRCP

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Findings Worthy of Further Investigation

- Non-PV anatomical ablations may be detrimental
- Evidence suggests patients have better outcomes when guided ablation is used earlier in a patient's treatment pathway
- Ablation of local irregular activity led to significantly better patient outcomes

ACUTUS MEDICAL, INC.

2210 Faraday Ave, Suite 100
 Carlsbad, CA 92008 USA
 Phone: +1-442-232-6080
 acutus.com

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