Left Atrial Appendage Closure

Mechanical Approaches to Stroke Prevention in Atrial Fibrillation

Percutaneous left atrial appendage (LAA) closure is an emerging technology for thromboembolic prevention in patients with atrial fibrillation (AF). The first human implantation of an LAA device occurred in 2001, and since then four devices have received CE mark approval. These devices are being widely used in Europe for LAA closure in patients who are poor candidates for long-term oral anticoagulation. In the US, the WATCHMAN device (Boston Scientific) is anticipated to receive FDA approval imminently for AF patients who are warfarin-eligible. This approval is projected to significantly expand the indications for LAA closures worldwide. Thus, the volume of procedures is anticipated to escalate. This book discusses the epidemiology of AF as a cause of stroke; the use of LAA closure in the reduction of thromboembolism with AF; early surgical approaches and novel surgical devices for LAA closure; and current percutaneous approaches and devices available for LAA closure. The emphasis of this book is on percutaneous technical approaches and contemporary trial results on the leading devices (PLAATO, WATCHMAN, Amplatzer Cardiac Plug, and LARIAT). It also reviews unapproved devices in development, in both clinical and pre-clinical phases.

This book provides a comprehensive overview of state-of-the-art left atrial appendage (LAA) closure, covering epidemiology of atrial fibrillation and stroke, LAA anatomy, surgical approaches, imaging for LAA closure, LAA closure procedure, and post-procedural management. LAA closure is a rapidly emerging field in stroke prevention for patients with atrial fibrillation. Several percutaneous and surgical devices are now available in many countries, including WATCHMAN, Amplatzer Cardiac Plug and Amulet, and LARIAT devices, and many more are in clinical development and are being evaluated in research trials. As LAA closure is a technically challenging procedure, detailed knowledge of the rationale, anatomy, and technical approach of this modality guides clinicians in patient selection and facilitates procedural success. Left Atrial Appendage Closure is a valuable resource for interventional cardiologists, electrophysiologists, echocardiographers, radiographers, fellows, and residents in guiding the management of patients prior to, during, and following LAA closure.



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