## SATURDAY 21. NOVEMBER 2009

## V. Catheter Ablation (II): VT in organic heart disease

## Lessons from VT Surgery

In CAD/Post MI

In DCM/ARVC

New end point: Abolition of Abnormal or Delayed Potentials (ADP):

VI. Catheter Ablation: New technologies and techniques

VT ablation with hemodynamic support

Contact sensing, new energy sources and novel catheter designs

VT ablation using: Magnetic Navigation

Epicardial ablation: indications and complications: survey from a multicenter European study

## VII. Catheter Ablation: New approaches and indications

Debate: Prophylactic VT/VF ablation in ICD patients after myocardial infarction

Para HIS / Tricuspid Annulus, Mitral Annulus

Catheter ablation of VPB in patients with heart failure

Catheter ablation of VF

Future of VT Ablation

# GENERAL INFORMATION

Meeting: Euro VT/VF Meeting 2009

Date: 20./21. November 2009

Scientific Committee: K.-H. Kuck, Hamburg (DE), P. Della Bella, Milano (IT) G. Hindricks, Leipzig (DE), P. Jais, Bordeaux (FR)

Venue: Hotel De Rome Behrenstraße 37 10117 Berlin Germany Tel: +49 30 460 60 90

www.hotelderome.com

Language: The official conference language is English.

Registration fee: By 31<sup>th</sup> July, 2009: € 485,–, From 1<sup>st</sup> August, 2009: € 600,–

Registration fee includes:

- Admission to the Scientific sessions
- Congress Material
- Coffee breaks & Lunch
- Certificate of attendance

## Online registration: www.euro-vtvf.eu

## Organizer:

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Berlin 20./21. November 2009 Hotel de Rome

## Scientific Committee:

K. Kuck, Hamburg P. Della Bella, Milano G. Hindricks, Leipzig P. Jais, Bordeaux







## Dear colleagues,

The first treatment of ventricular tachycardia by open heart surgery in the early 1980's and by percutaneous catheter procedures, using first DC Shock and later radiofrequency, current in the mid 1980's is almost more than 30 years ago.

The experience was limited to patients with life-threatening ventricular tachycardia refractory to medical treatment. These procedures were performed in a few centers around the world by only very experienced physicans.

The introduction of the implantable defibrillator by Michel Mirowski changed substantially the treatment of VT/VF and made catheter ablation a procedure, which in many countries was mostly performed in patients following multiple ICD interventions.

In most patients without structural heart disease new mechanistic insights based on catheter ablation procedures made catheter ablation a first line treatment.

Following the enthusiasm in catheter ablation of atrial fibrillation new interests of physicians and industry has initiated an upcoming revival of ventricular tachycardia / fibrillation treatment beyond the ICD.

This has led to new studies in the field of ICD and CRT but also of catheter ablation including preventive ablation procedures in ICD patients. Further interest has also been stimulated by the use of diagnostic tools such as MRI, allowing better understanding of the underlying substrate.

The first EURO VT/VF symposium in Berlin, Germany, will address the entire field of VT/VF from genetics, mechanisms, diagnostics to therapeutics by bringing international physicians together.

We hope very much that this meeting will find your interest. We look forward to seeing you in Berlin.

K.-H. Kuck

P. Della Bella

G. Hindricks

P. Jais

## Welcome and Introduction

#### I. Anatomical substrate

Cardiac development and ventricular arrhythmias

Anatomy of the RV/LV revisited

3-Dimensionality in scar-related VT

Substrate in DCM and HCM

ARVC

**II. Risk Stratification/Sudden Cardiac Death** 

Non-invasive risk stratification

Invasive risk stratification: Is there a role?

SCD early after AMI (< 4 weeks)

SCD in Brugada Syndrome

SCD in QT Syndrome

SCD in early repolarisation-Syndrome

## III. ICD/CRT

Debate: Current guidelines lead to ICD-overtreatment

Reverse re-modelling by CRT: Is there an antiarrhythmic effect?

Prognostic importance of ICD-therapies/ SCD despite ICD

## Leadless ICD

"Special lecture": How to set-up the arrhythmia Department to support a VT ablation program

## IV. Catheter Ablation of VT (I): Substrate analysis and imaging

2-D and 3-D Echocardiography, ICE

Pet CT

MRI

Body surface Mapping

Electroanatomically guided Endomyocardial Biopsy (EMB) to establish substrate etiology

"Special lecture": Policy Statement HRS/EHRA