

Abstract 14345: Kaolin-containing Hemostatic Gauze Reduced The Re-bleeding Rate Following Catheter Ablation for Atrial Fibrillation

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Abstract

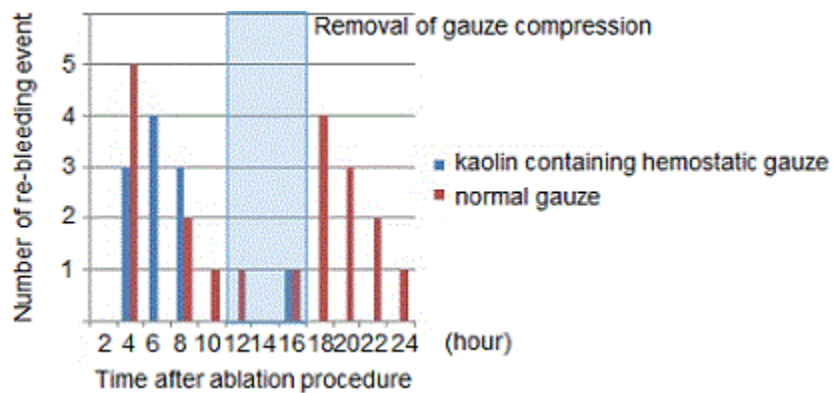
Introduction: Hemostatic gauze containing kaolin, which promotes clotting cascade, has been used for hemostasis during surgery. However, efficacy of kaolin-containing hemostatic gauze (KG) in patients undergoing atrial fibrillation (AF) ablation is unknown.

Hypothesis: Use of KG reduces the re-bleeding rate following catheter ablation for AF.

Methods: In this observational study, 425 patients who underwent catheter ablation for AF were included. After the femoral sheath was extracted, blood access site was manually compressed using KG (QuickClot™ Interventional, KG group) or normal gauze (normal gauze group) until hemostasis was achieved. Optimal oral anticoagulation therapy was continued throughout the periprocedural period. Re-bleeding events were defined as re-bleeding necessitating additional hemostatic procedure after leaving the electrophysiological laboratory.

Results: KG group comprised 235 patients (55.3%). There were no difference in age (68.1 ± 9.2 vs. 66.5 ± 9.0 years old, $P = 0.073$), gender (male; 66.3% vs. 67.2%, $P = 0.84$), CHADS2 score (1.3 ± 1.1 vs. 1.2 ± 0.9 , $P = 0.28$), antiplatelet agents usage (13.1% vs. 10.6%, $P = 0.42$) between the groups. Re-bleeding rate was significantly lower in KG group than in normal gauze group (6.0% vs. 11.5%, $P = 0.039$). Notably, the efficacy of KG was more prominent in the reduction of re-bleeding events after the removal of gauze compression (0.4% vs. 5.7%, $P < 0.001$). Independent negative predictors of re-bleeding were the use of KG (odds ratio (OR) = 0.49 [95% confidence interval (CI) 0.241-0.998], $P = 0.049$) and high body mass index (OR = 0.87 [95% CI 0.777-0.972], $P = 0.014$).

Conclusions: Kaolin-containing hemostatic gauze was effective for the reduction of re-bleeding events following catheter ablation for AF via the femoral access.



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