

Transseptal Puncture Guided by Intracardiac Echocardiography

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A patient of 33 years old with a history of symptomatic paroxysmal atrial fibrillation refractory to medication with amiodarone and atenolol. Atrial fibrillation ablation was indicated. We show a sequence of images that shows the centered interatrial septum (IAS), the position of the needle of the interatrial transseptal puncture guided by intracardiac echocardiography with the presence of tenting of the fossa ovalis and, finally, the passage of a dilator

through interatrial septum (Figures 1, 2 and 3).

Intracardiac echocardiography gives safety to the electrophysiologist at the moment of crossing the interatrial septum in order to visualize the adjacent structures, identify quickly potential complications of the procedure and guide their treatment. It also allows evaluating live during ablation, the correct location of loop catheters and ablation at the mouth of the pulmonary veins (Figure 4).

