

CONFERENCIAS

ATRIAL FIBRILLATION: IS THERE ANYTHING NEW?

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Atrial fibrillation is rapidly becoming the disease of the century. Millions of people have it worldwide, and the number is steadily growing everyday. The reason for this increased prevalence of atrial fibrillation is multifactorial.

Aging of the population worldwide and more people survive myocardial infarction, coronary artery disease, and congestive heart failure. Also, more attention has been devoted to the epidemiology, and more doctors and health care professionals are aware of the implications of the diagnosis of atrial fibrillation and its therapy; mainly its most serious complication: embolic phenomenon. Also, increases general medical knowledge of the population has contributed to the increased diagnosis.

Indications and the most appropriate type of anticoagulation will be discussed. The controversies of aspirin vs. Warfarin or aspirin plus Warfarin vs. Warfarin alone will be discussed, and data will be presented.

New medications have been researched and approved which will be discussed. Also, the choice of maintaining sinus rhythm at any cost vs. the alternative of anticoagulation plus rate control will be discussed in detail. Its clinical and economical implications will also be highlighted.

New pharmacological therapies will then be presented. The international experience with the first generation atrial defibrillator will be presented. Discussion of the future clinical role of the atrial defibrillator and the new technological advances that have been made or will be needed to make it a clinical tool.

Past, present, and future of surgical therapy of atrial fibrillation will be discussed. Last but not least, ablative therapies for atrial fibrillation will be presented from the role of the linear lesions trying to mimic the surgical Maze procedure to the new approaches for the ablation of arrhythmogenic foci originating from the pulmonary veins.

The use of new mapping tools, the use of new forms of energy (such as ultrasound), and the use of new forms of delivering these energies for the usual radiofrequency ablation (such as circular ablation devices instead of the point devices that we use today) will be discussed, as well as its advantages and disadvantages pointed out. Additionally, the various complications of this form of therapy will be outlined.

The risk-benefit ratio of all of the non-pharmacological therapies for atrial fibrillation will be put into perspective.

CONSEQUENCES OF GENOMICS ON PHARMACEUTICAL RESEARCH

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Knowing that we are living in ageing societies and that the vast majority of all diseases is still not causally treatable one can easily imagine that there are major challenges for our future health care systems.

The dynamics within the pharmaceutical industry are driven by both the ever-increasing medical need for improved diagnostics and therapeutics and in particular preventive treatments in fields like oncology, cardiovascular and CNS diseases on the one side and the newest developments in molecular biosciences with the great hope to come up with proper solutions for the aforementioned

challenges on the other side. Hence, it is mandatory not only to intensify our search for novel drug targets, but also to turn our research activities into finding value adding drugs. Research in the field of molecular medicine – and here especially in gene technology, genomics and proteomics together with bioinformatics – is giving us already today but even more so in the future access to e.g. completely new targets, new methods in gene diagnosis as well as promising approaches towards gene therapy which will – if successful – further increase our ability to create new diagnostic and therapeutic principles.