in two patients in group Y before RFCA. The acute success rate was 11 out of 12 (92%) in group Y and 15 out of 15 (100%) in group O, and the recurrence rate was 4 out of 11 (36%), and 1 out of 15 (7%), in groups Y and O, respectively. A failed case involved an AP located on the posteroseptal tricuspid annulus after a Sternotomy operation which covered the tricuspid annulus by using the artificial patch. The number of applications was 7 in group Y and 6.5 in group O. The complications did not occur in this population.

Conclusions: AP related tachycardias in EA during infancy are refractory to AADs and can cause brain damage. The success rate was as high during infancy as in older patients and there were not any complications. RFCA may be indicated in spite of infancy when tachycardias are refractory. It is important to consider the timing and type of surgical correction in terms of the treatment of the arrhythmia.

P4974 | BEDSIDE
Single center experience of fluoroless AVNRT ablation guided by electroanatomic reconstruction in children and adolescents
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Purpose: Anatomical considerations and risks related to x-ray exposure make atrio-ventricular nodal reentrant tachycardia (AVNRT) ablation in pediatric patients a concerning procedure. We aimed to evaluate the feasibility, safety and efficacy of performing fluoroless slow pathway cryoablation guided by the electroanatomic (EA) mapping in children and adolescents.

Methods: Twenty-five consecutive patients (mean age 13.8±2.5 years) underwent fluoroless AVNRT ablation guided by preoperatively acquired cines in 6 patients. The recurrences were successfully treated with a second procedure. In 4 patients a fluoroless cryoablation with a 6-mm tip catheter was successfully performed, while in the remaining 2 patients a single pulse of 60 s of radiofrequency energy was applied under fluoroscopy monitoring. No complications occurred.

Conclusions: Combination of EA mapping systems and cryoablation may allow to perform fluoroless slow pathway ablation for AVNRT in children and adolescents in the majority of patients. Fluoroless slow pathway cryoablation showed a high efficacy and safety comparable to conventional fluoroscopy guided procedures.

P4975 | BENCH
Alterations in cardiac beta-catenin precede connexin gap junction remodeling in cardiomyocytes exposed to rapid electrical stimulation
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The intercalated Disc (ID) contains two complexes, Adhesion Junction (AJ) and Connexin (Cx) Gap Junction (GJ). GJs provide the pathway for intercellular current flow, enabling coordinated action potential propagation and contraction. AJ mediates normal mechanical coupling between cardiomyocytes and plays an important role in the stability of GJ.

Purpose: The purpose of this study was to study ID remodeling, especially Cx-linerin, which is one of the component proteins of AJ, and Cx43 alterations caused by Rapid Electrical Stimulation (RES) in cardiomyocytes. In addition, we...