

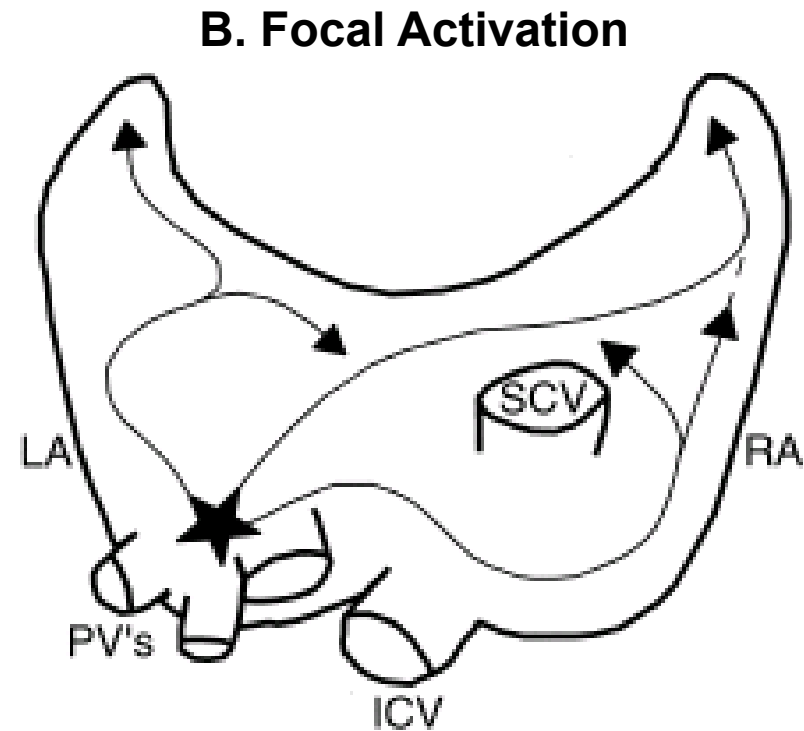
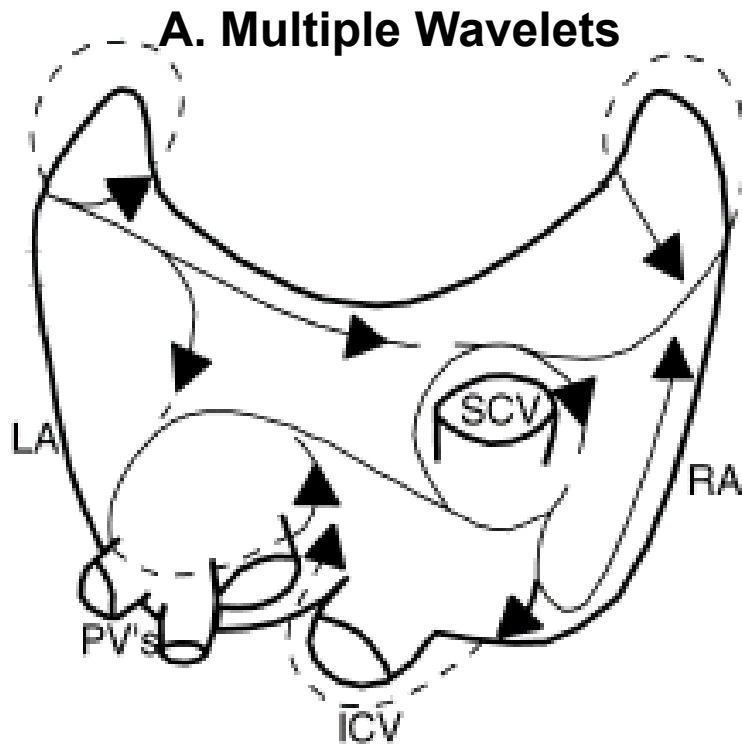
Mechanism of atrial fibrillation

연세대학교
정보영

Mechanism of atrial fibrillation

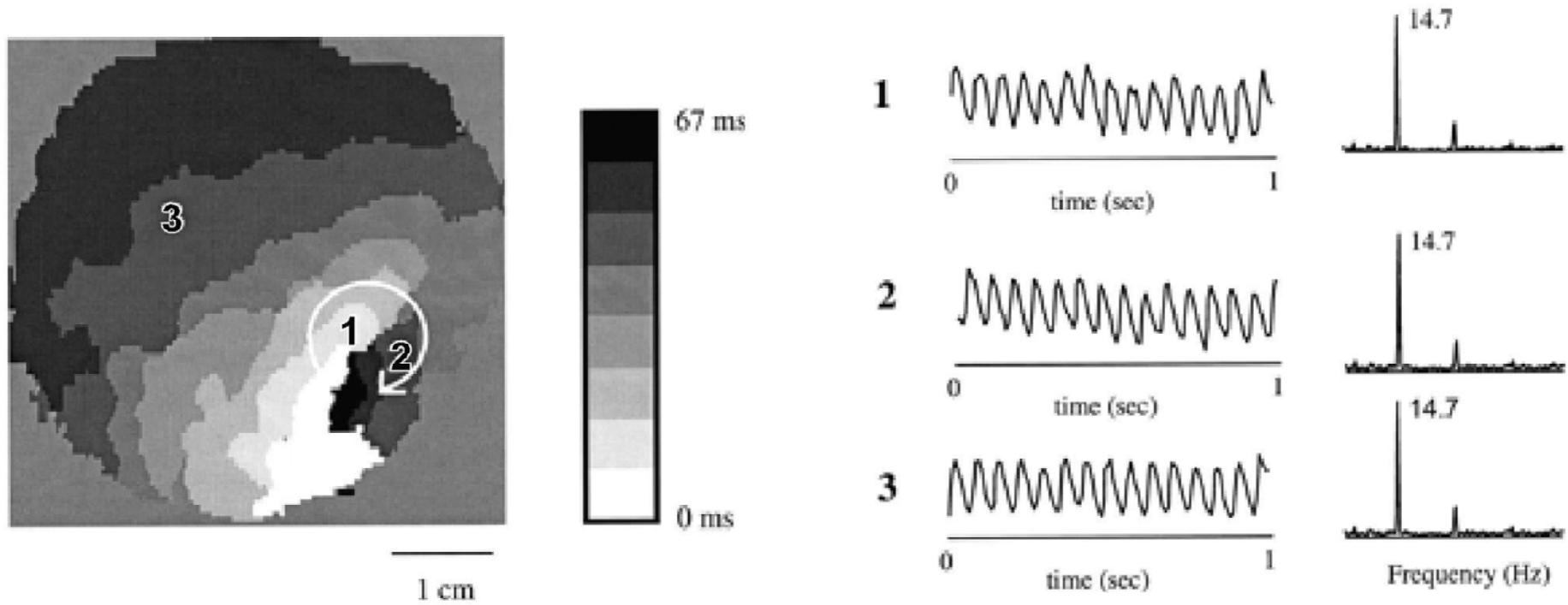
- **1. Rotors and wavelets**
- **2. Electrical, contractile and structural remodeling**
- **3. 세포내 칼슘 대사 변화**
- **4. Modulating factors**

Principal electrophysiological mechanisms of AF

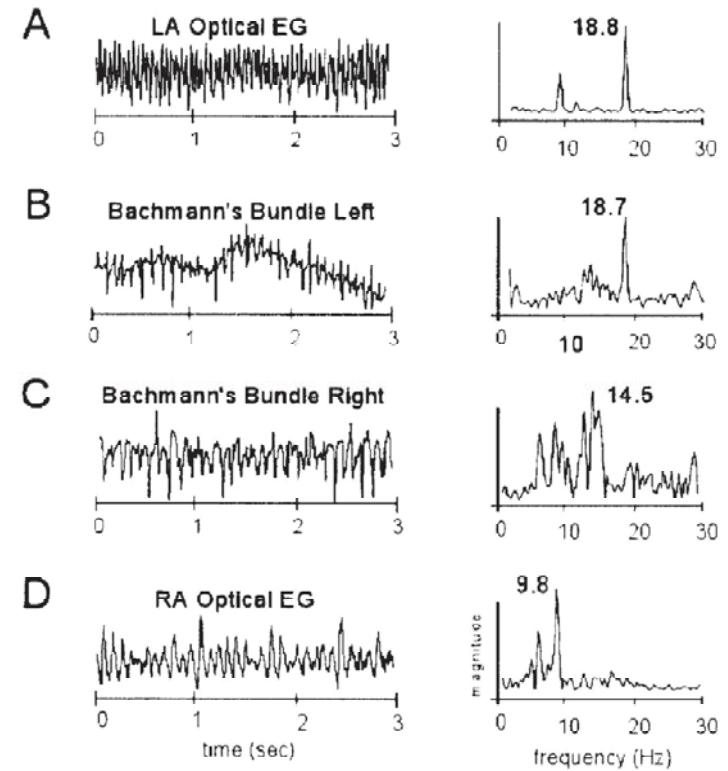
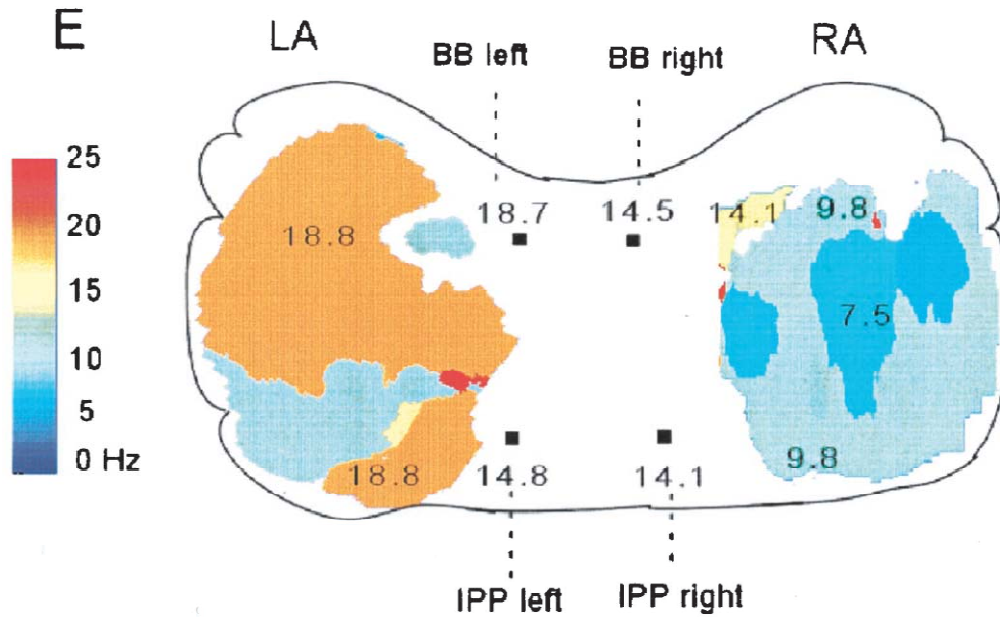


A. Moe GK. Arch Int Pharmacodyn Ther 1962;140:183
B. Konings KTS, et al. Mapping of electrically induced AF in humans. 1999

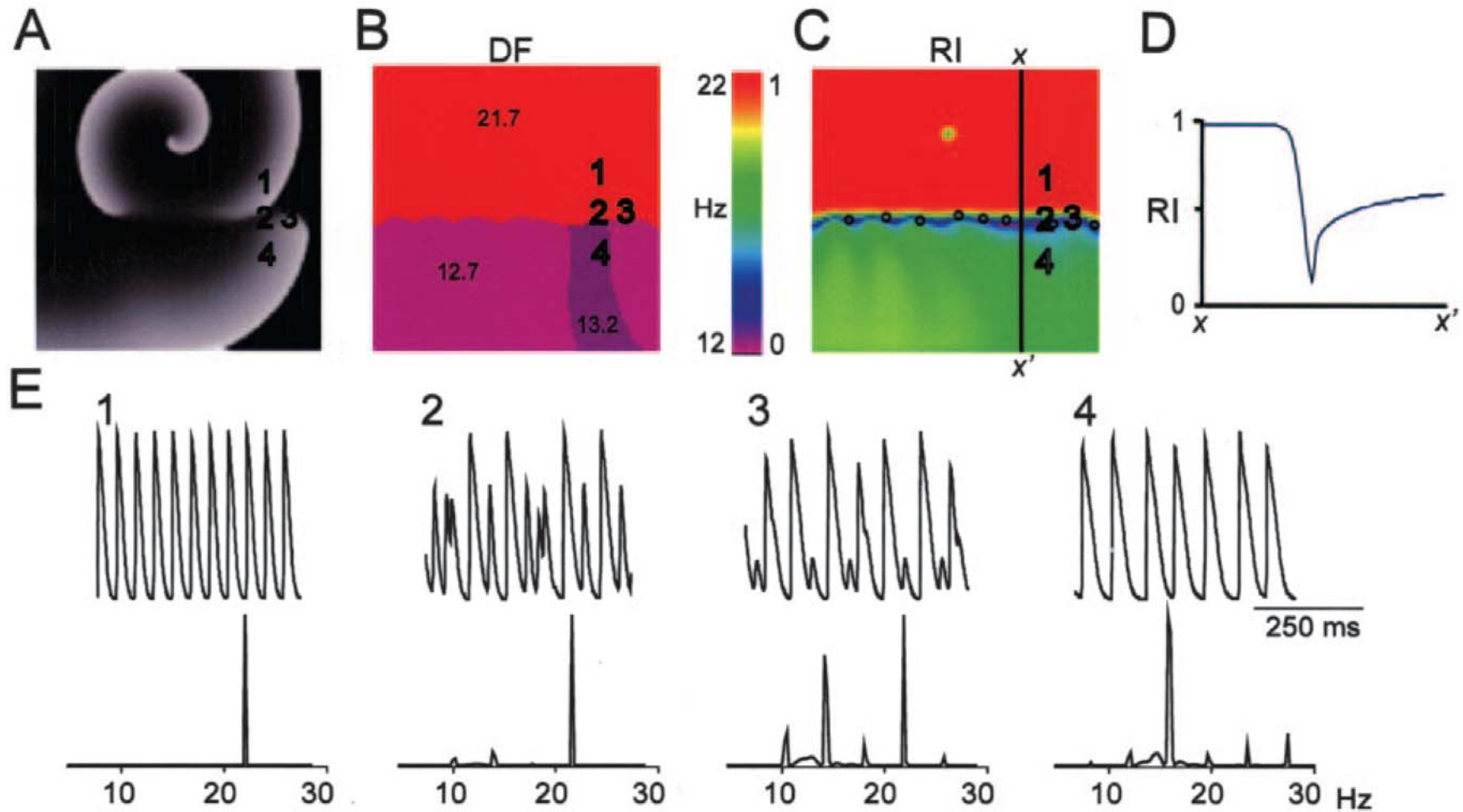
Microentrant source of AF



Left-to-right decrement of DFs

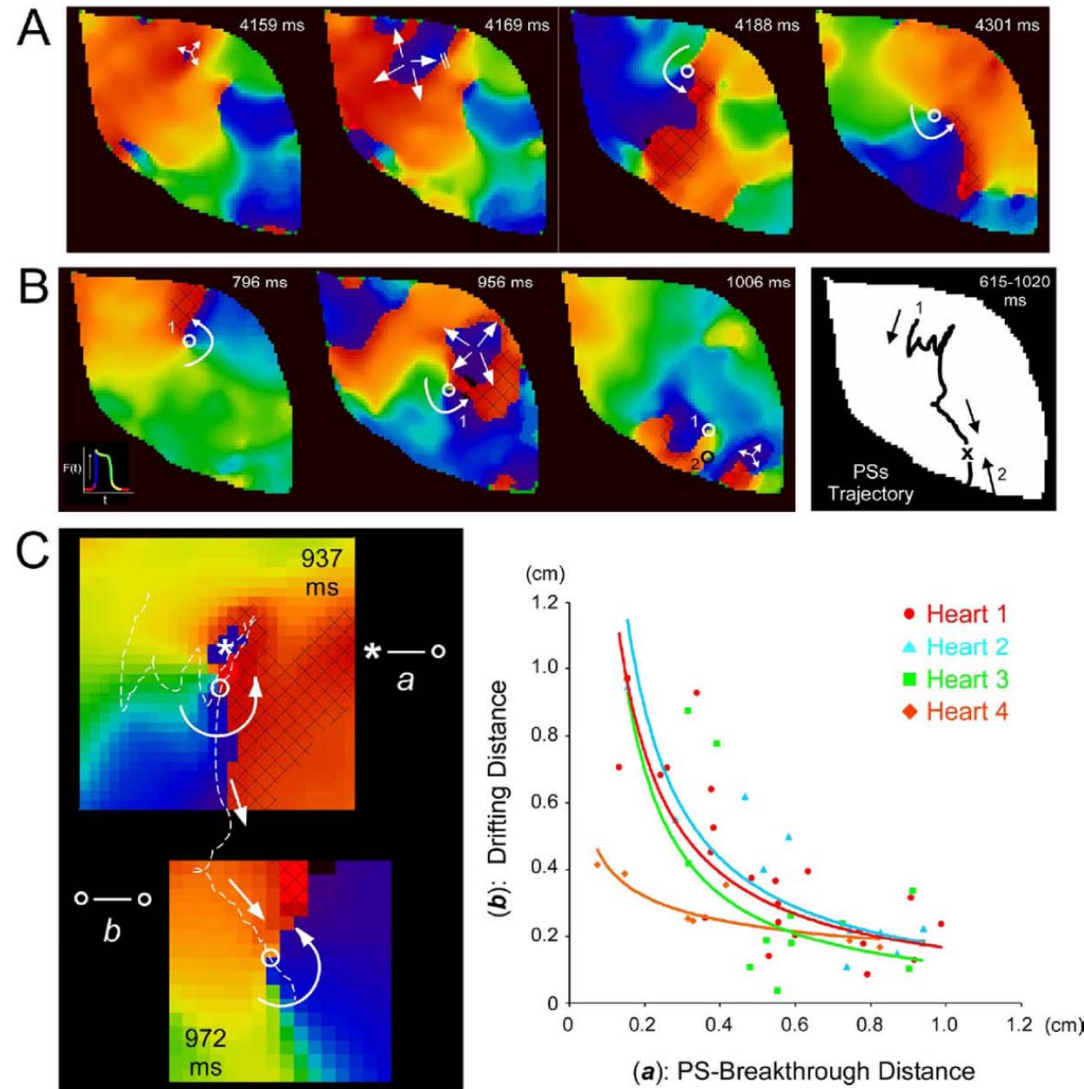


Wave Fractionation at Boundaries of High-Frequency Excitation



RI: regularity index

Breakthroughs induce wave break, rotor drifting, and termination

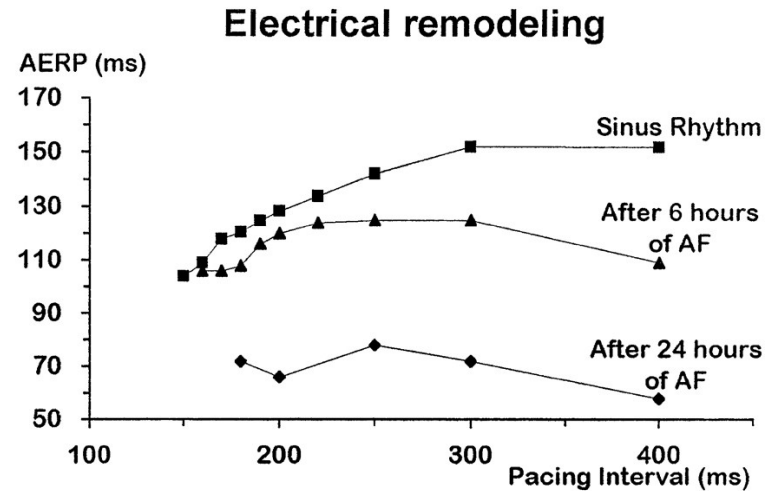
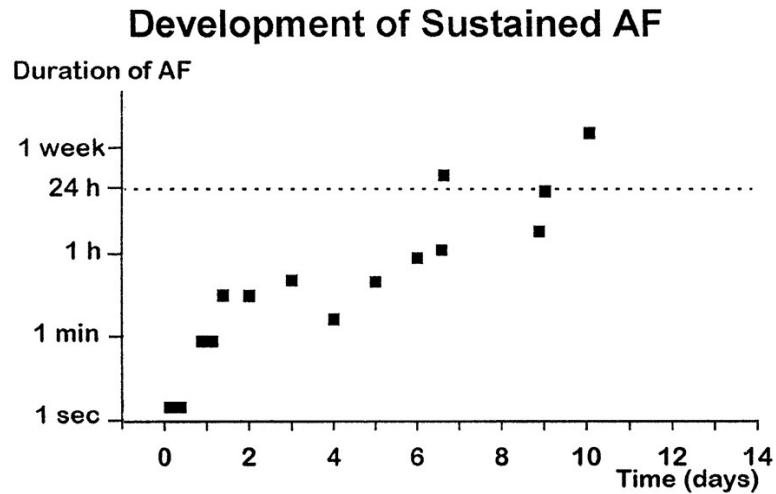
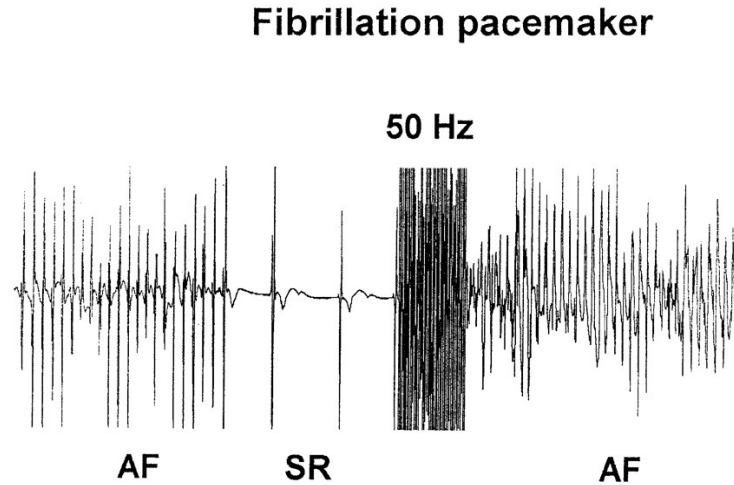
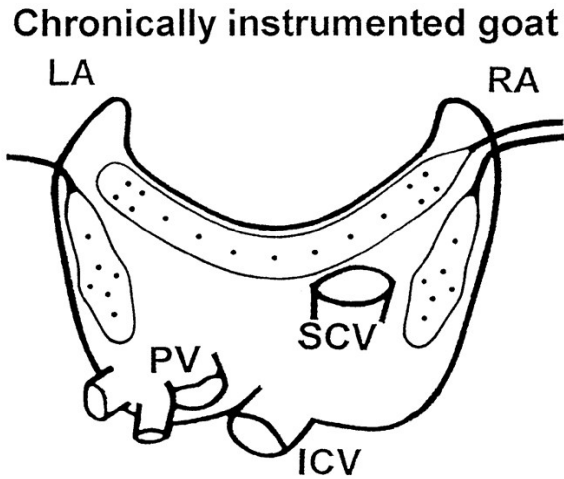


Mechanism of atrial fibrillation

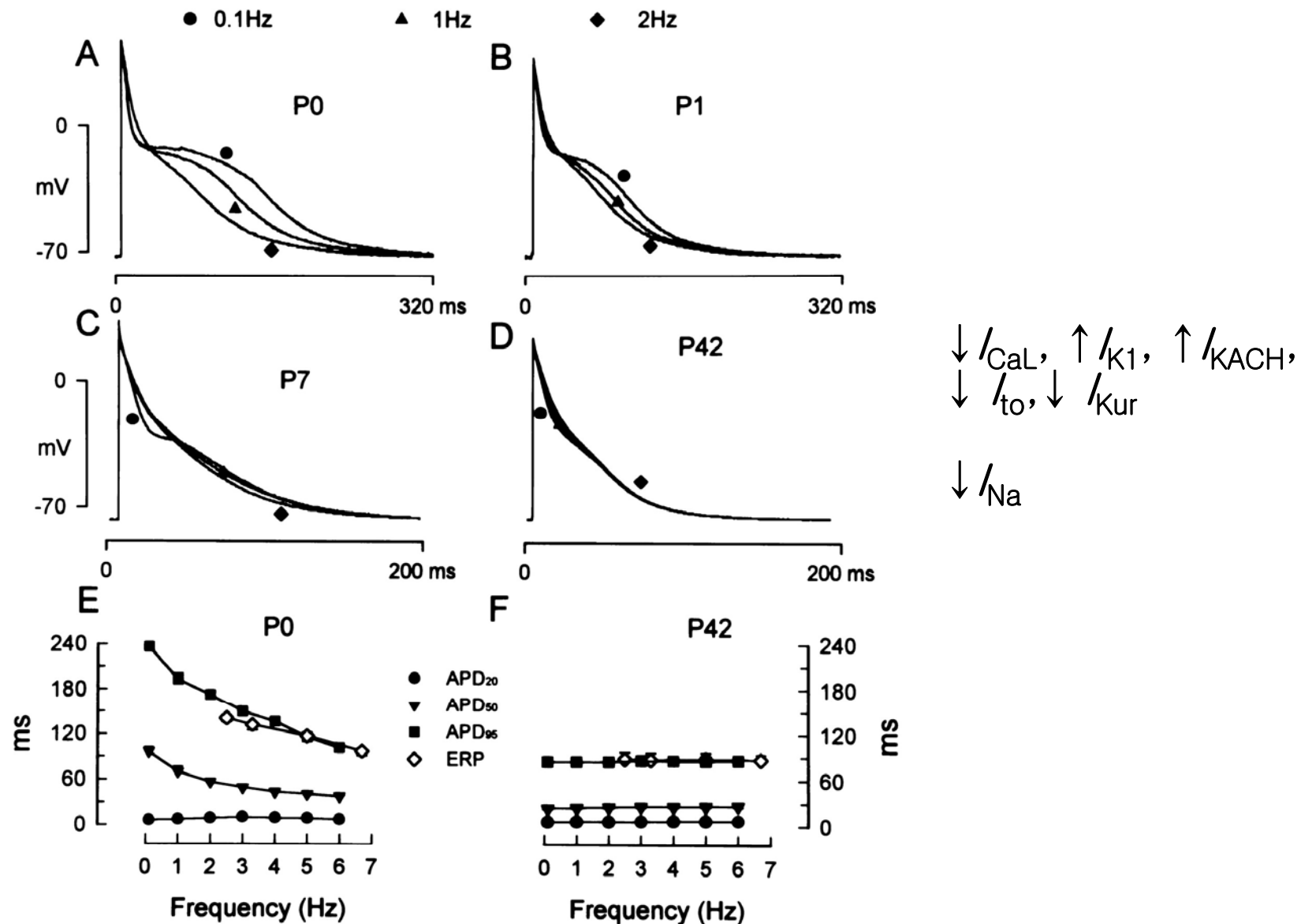
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Changes in tissue electrical properties

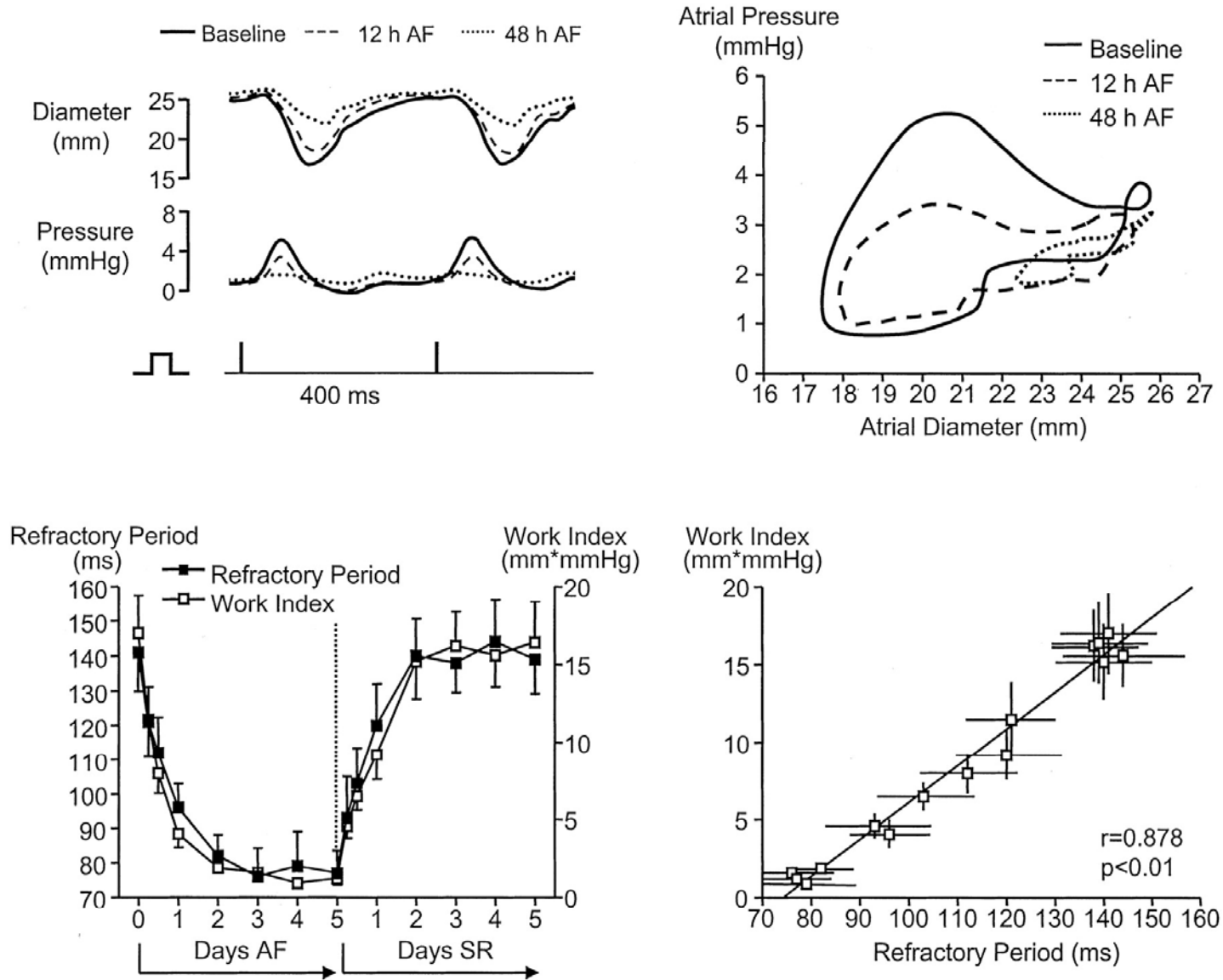
“Atrial Fibrillation Begets Atrial Fibrillation”



Underlying cellular and ionic bases



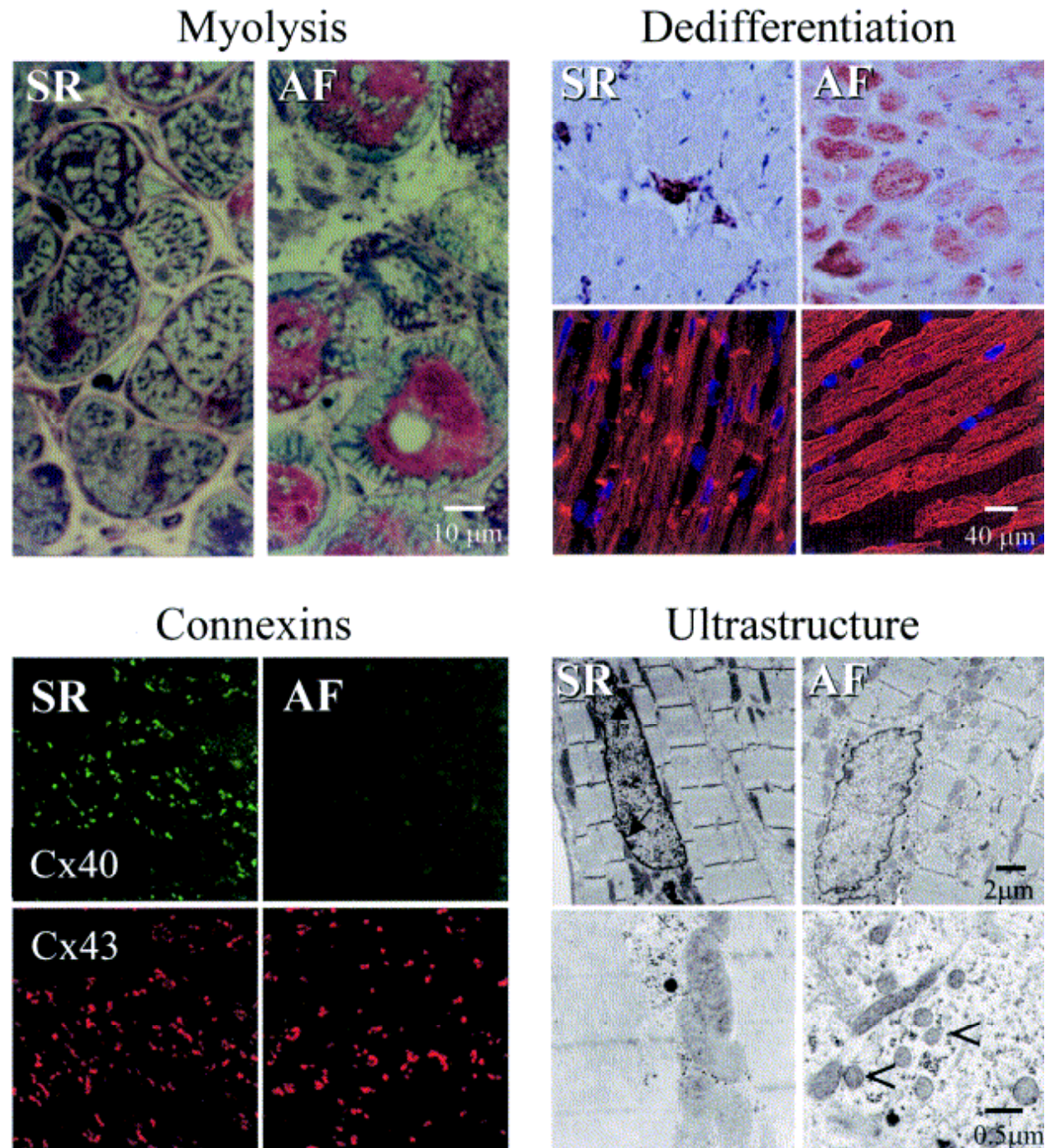
Time course of electrical and contractile remodeling during first days of AF



Structural remodeling of atrial myocytes after 4 months of AF in the goat

1. Loss of sarcomeres (blue) and accumulation of glycogen (red)
2. fetal α -smooth muscle actin (red) desmin (red) nuclei (blue DAPI).
3. Cx40 (green) and Cx43 (red)
4. Chromatin (arrow)
small donut shape mitochondria (arrow head)

Ausma et al. *Circulation* 1997;96:3157-3163
Van der Velden et al. *J Cardiovasc Electrophysiol* 2000;11:1262-1269



Changes in connexin expression in AF and atrial tachycardia remodeling

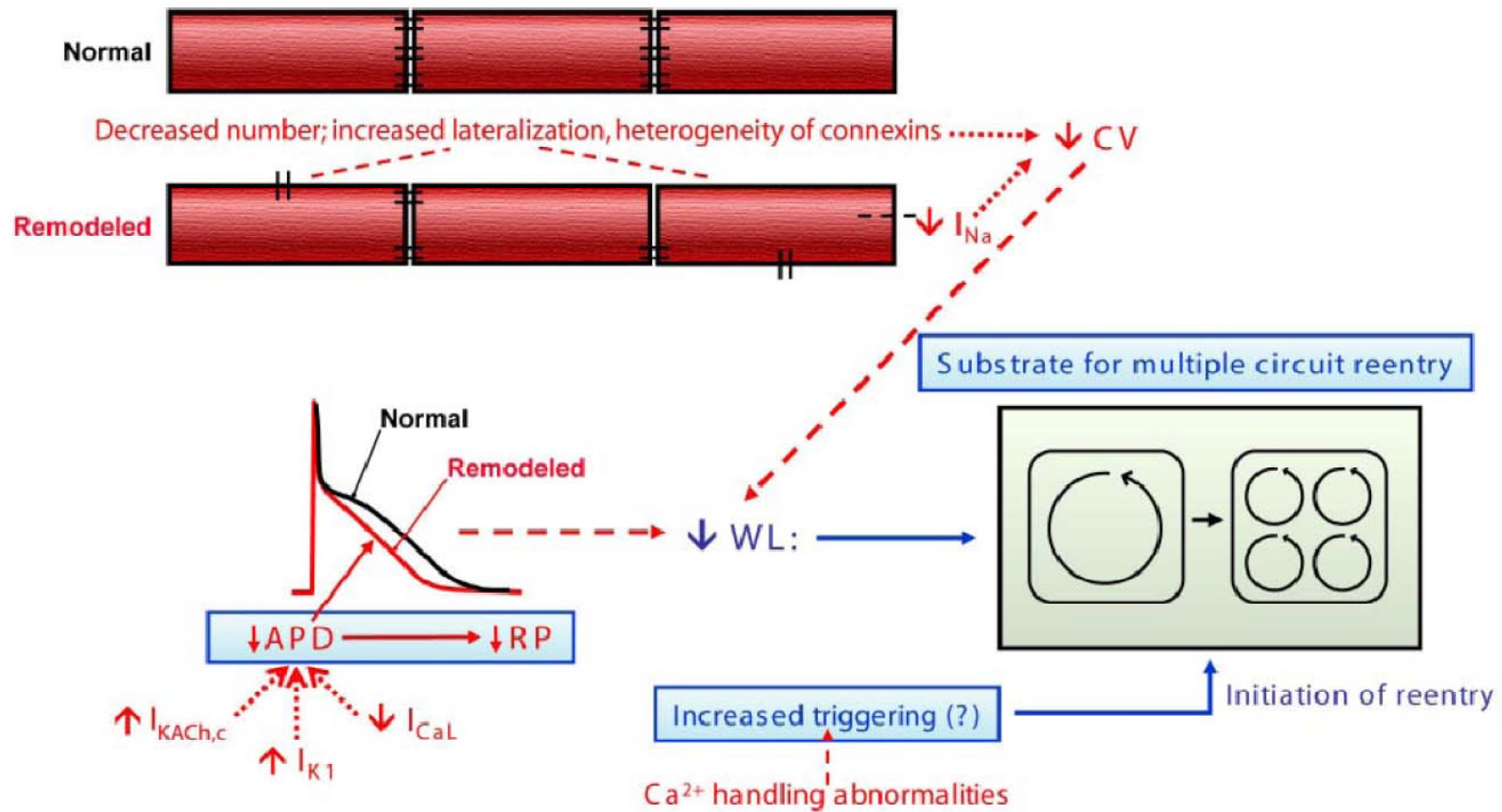
Reference	Cx40	Cx43	Population (n)*	Remarks
<i>Experimental studies</i>				
Elvan et al. (86)	ND	P ↑	ATR dogs (AV block for rate control)	
Van der Velden et al. (327)	M/P↔	M/P↔	AF-induced ATR goats	Heterogeneous Cx40 in AF
Van der Sakabe				Cx40/43 P staining
Polonte				Cx40 (rats)
Dupont				
Kostin et al.				
Nao et al.				
Kanagaratnam et al. (143)	P↔	P↔	CAF (13) vs. SR (27)	Increased Cx40 heterogeneity in AF
Wetzel et al. (341)	P ↑	P ↑	Lone AF (43); CAF-MVD (31); SR (15)	LA tissue
Wilhelm et al. (344)	P ↓	P↔	CAF (12); post-op AF (12); SR (20)	Cx40 ↓ in CAF only; ↓ Cx40/43 in CAF and post-op AF

The most consistent findings of connexin changes

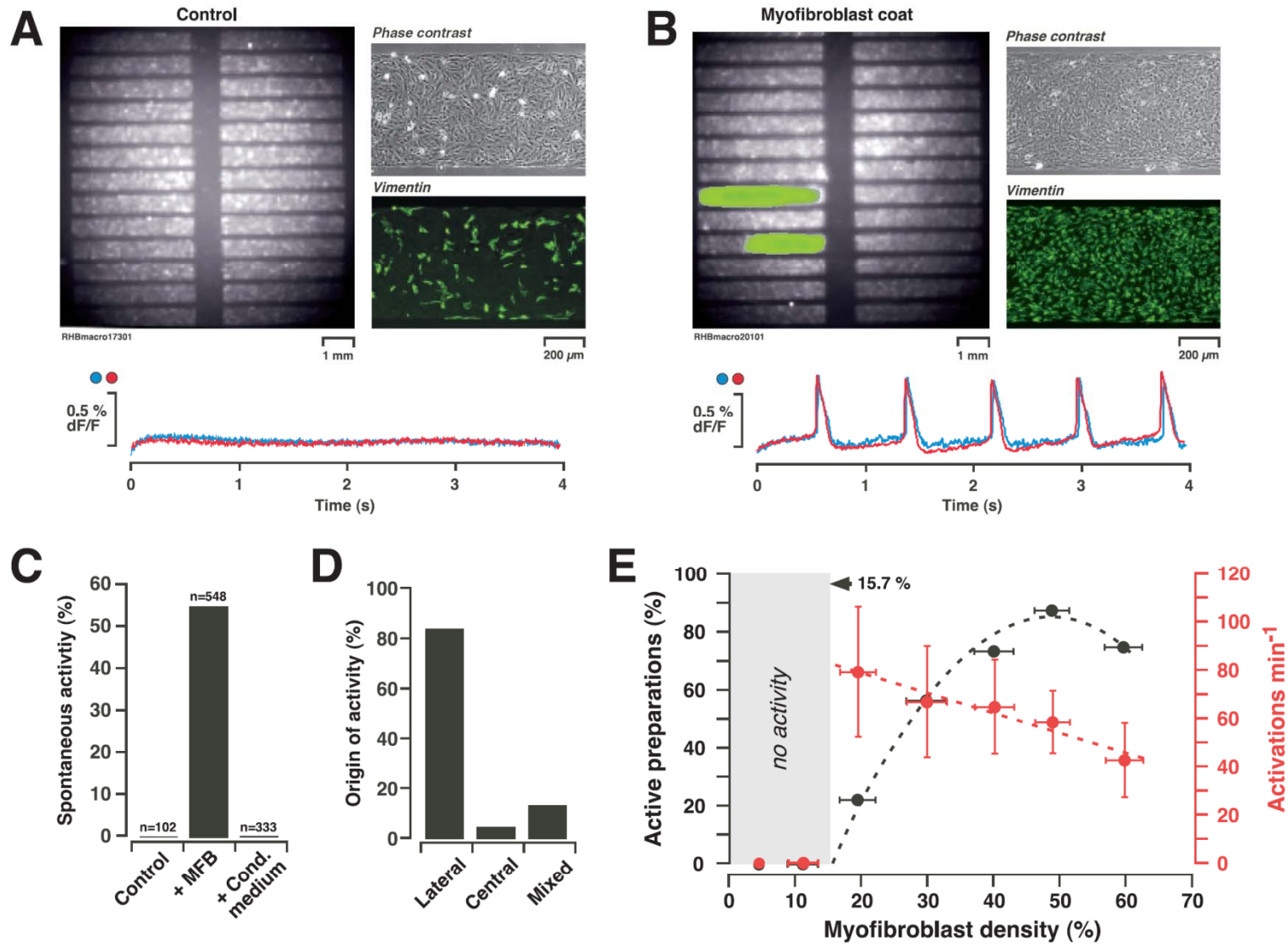
1. ↑ **Lateralization.**
2. ↑ **Dephosphorylation**
3. ↑ **Heterogeneity.**

P, protein; M, mRNA; ND, not done; CAF, persistent (chronic) atrial fibrillation; SR, sinus rhythm; MVD, mitral valve disease; ATR, atrial tachycardia remodeling; CHF, congestive heart failure; Cx, connexin; ↑, increase; ↓, decrease; ↔, no change. * For clinical studies, the number of patients in each group is indicated in parentheses.

Pathophysiology of AF promotion by atrial-tachycardia remodeling

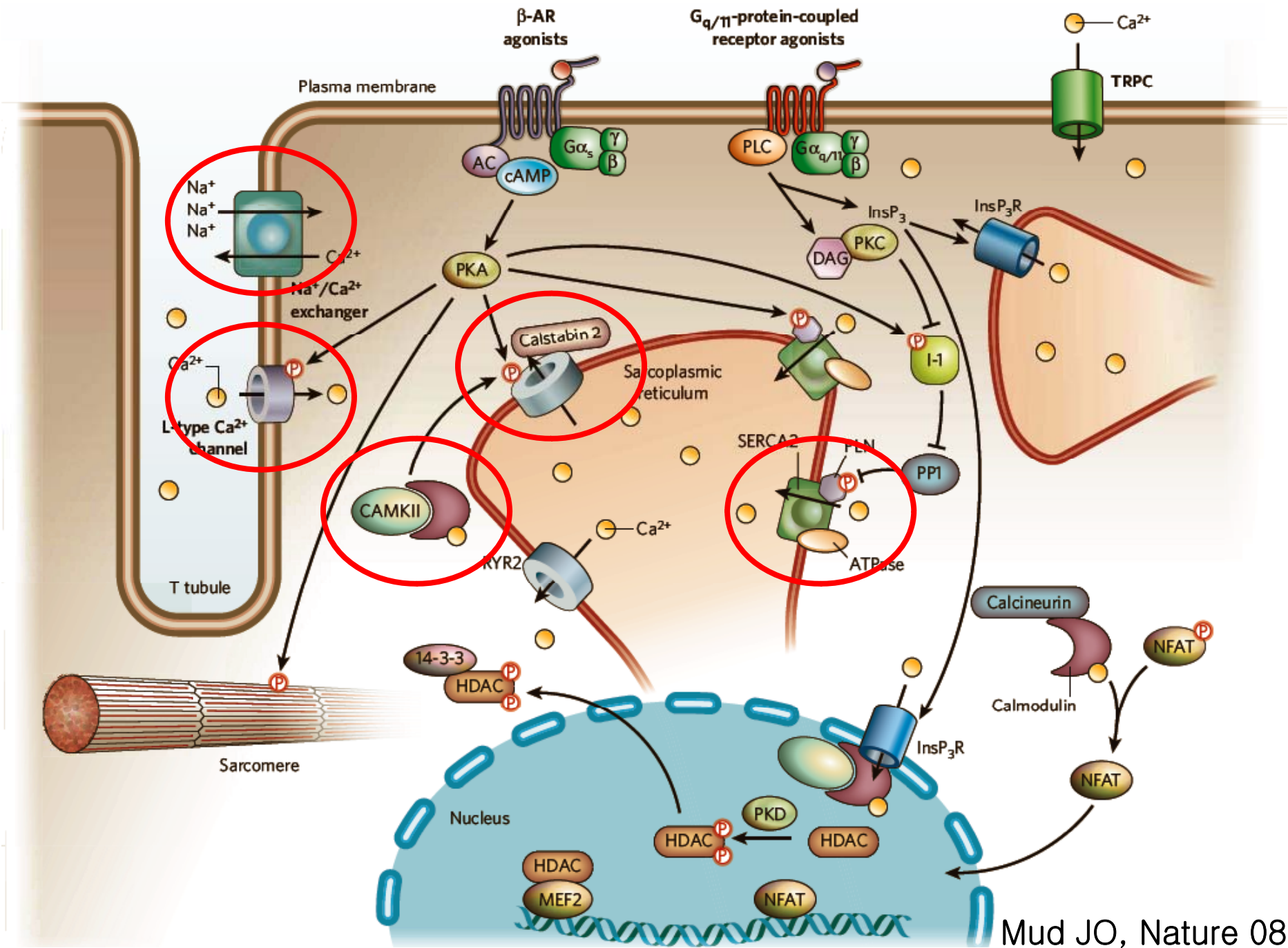


Induction of spontaneous activity in strands of cardiomyocytes by myofibroblasts

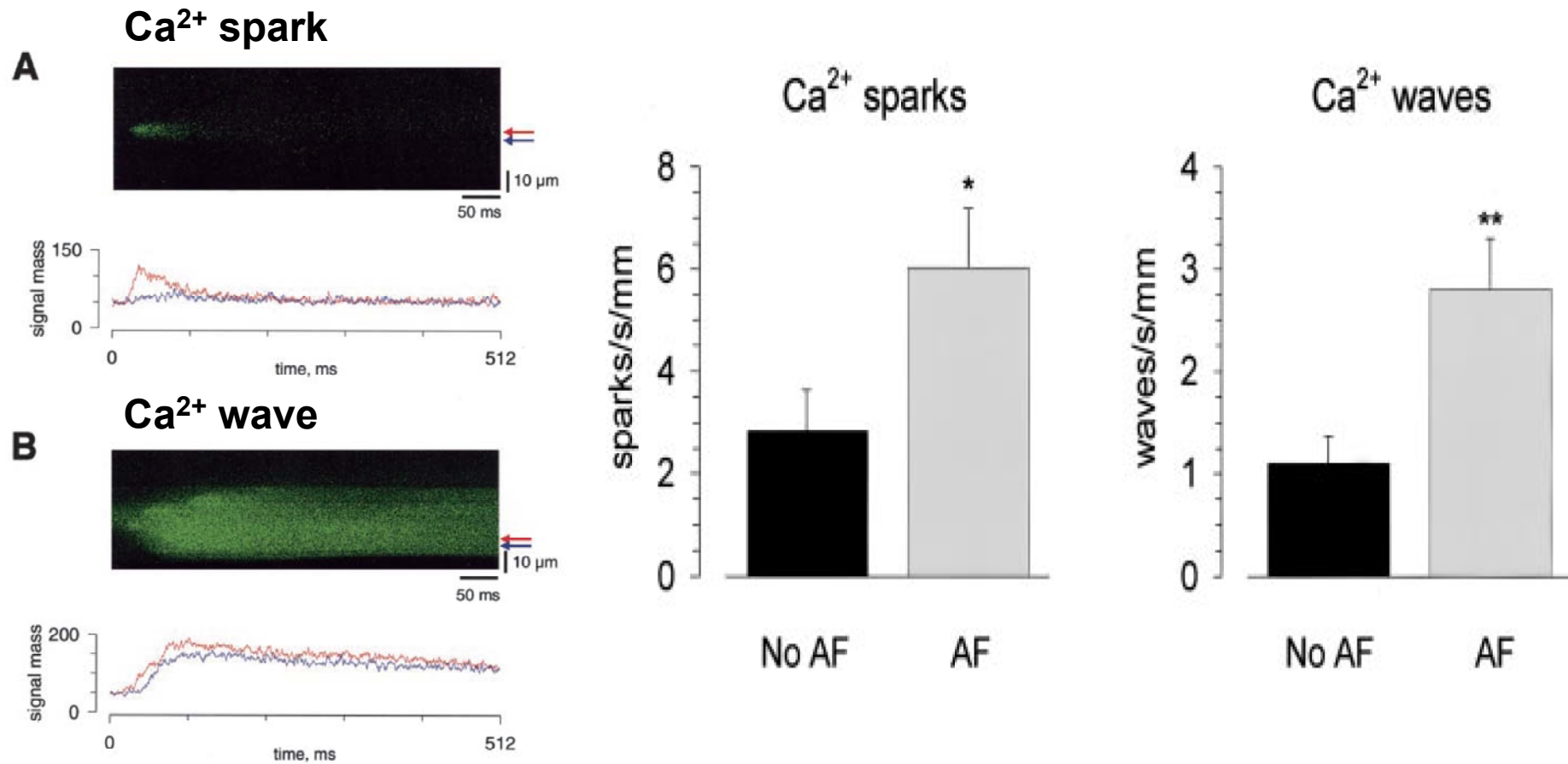


Mechanism of atrial fibrillation

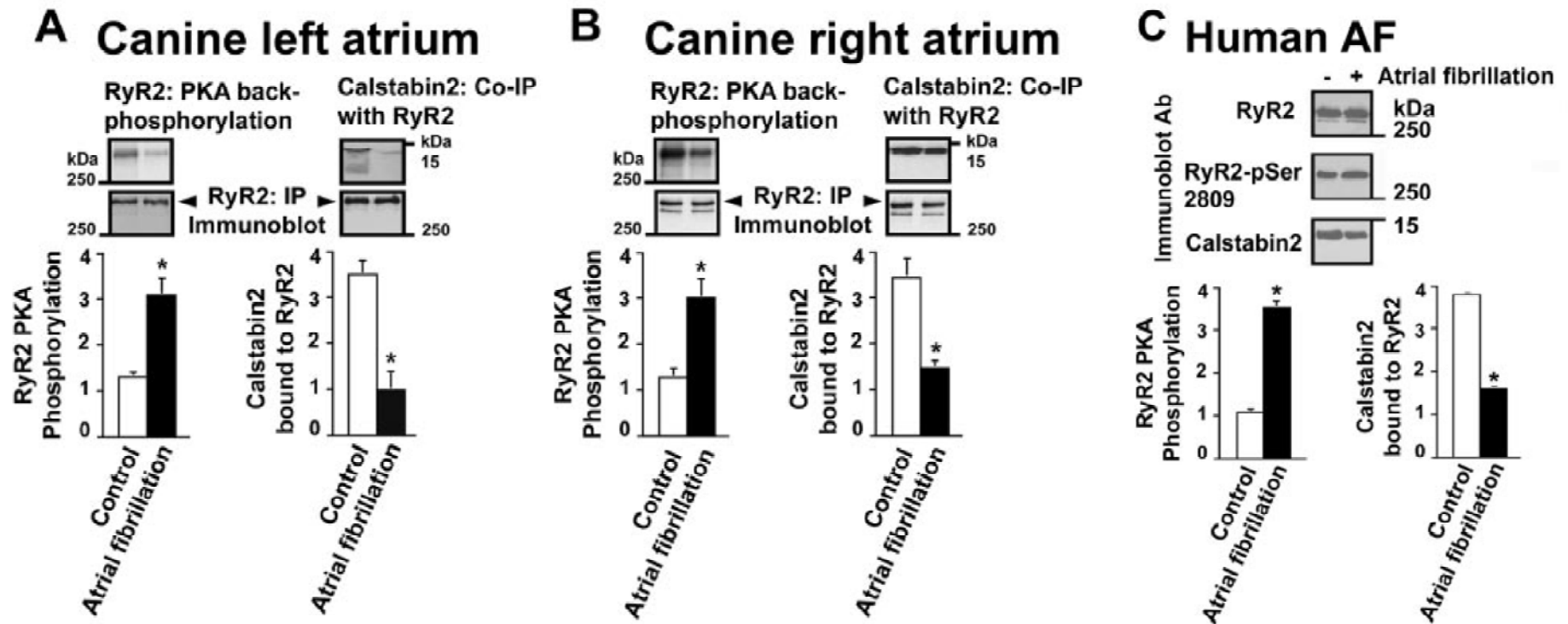
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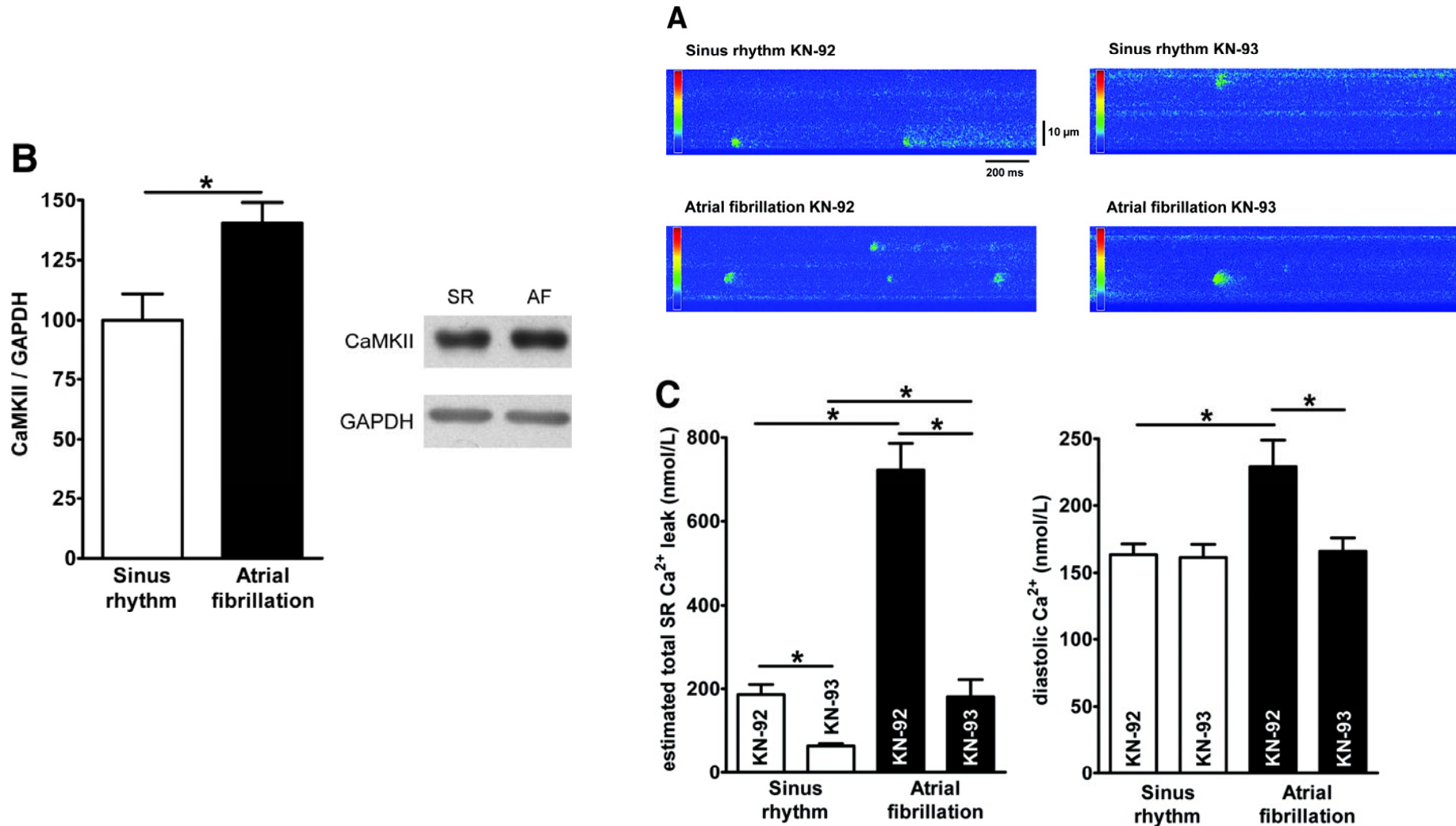
Increased SR Ca^{2+} release in Human AF



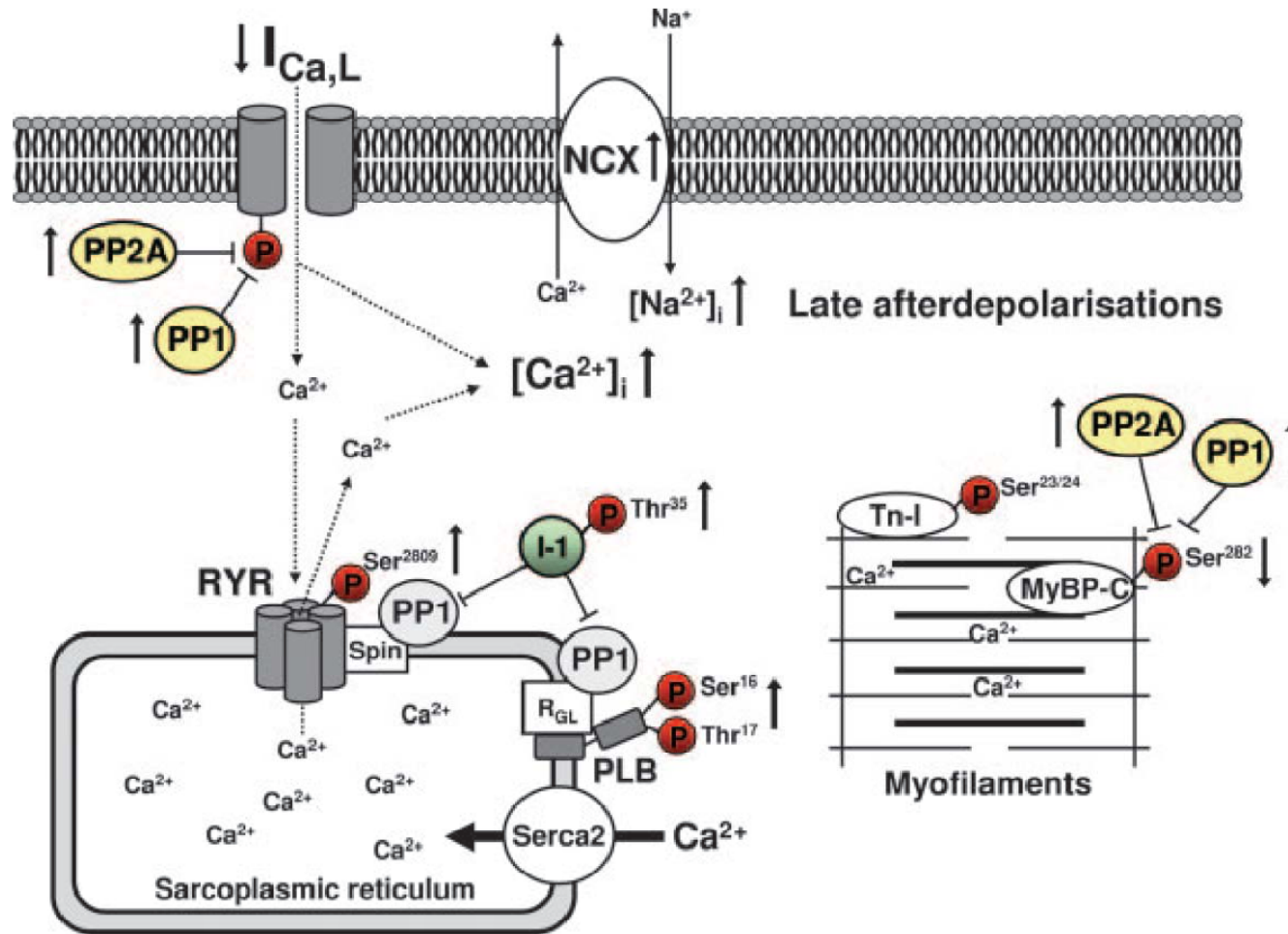
PKA hyperphosphorylation of RyR2 in canine and human AF



CaMKII-Dependent Diastolic SR Ca²⁺ Leak and Elevated Diastolic Ca²⁺ Levels in RA Myocardium of Patients With AF



Model of impaired phosphorylation dependent regulation of Ca²⁺ handling and contractility in human cAF



- PP1: serine/threonine protein phosphatase type 1, PP2A: type 2A,
- I-1: phosphatase inhibitor-1
- Ser16 of PLB : PKA, Thr 17 of PLB : CaMKII.

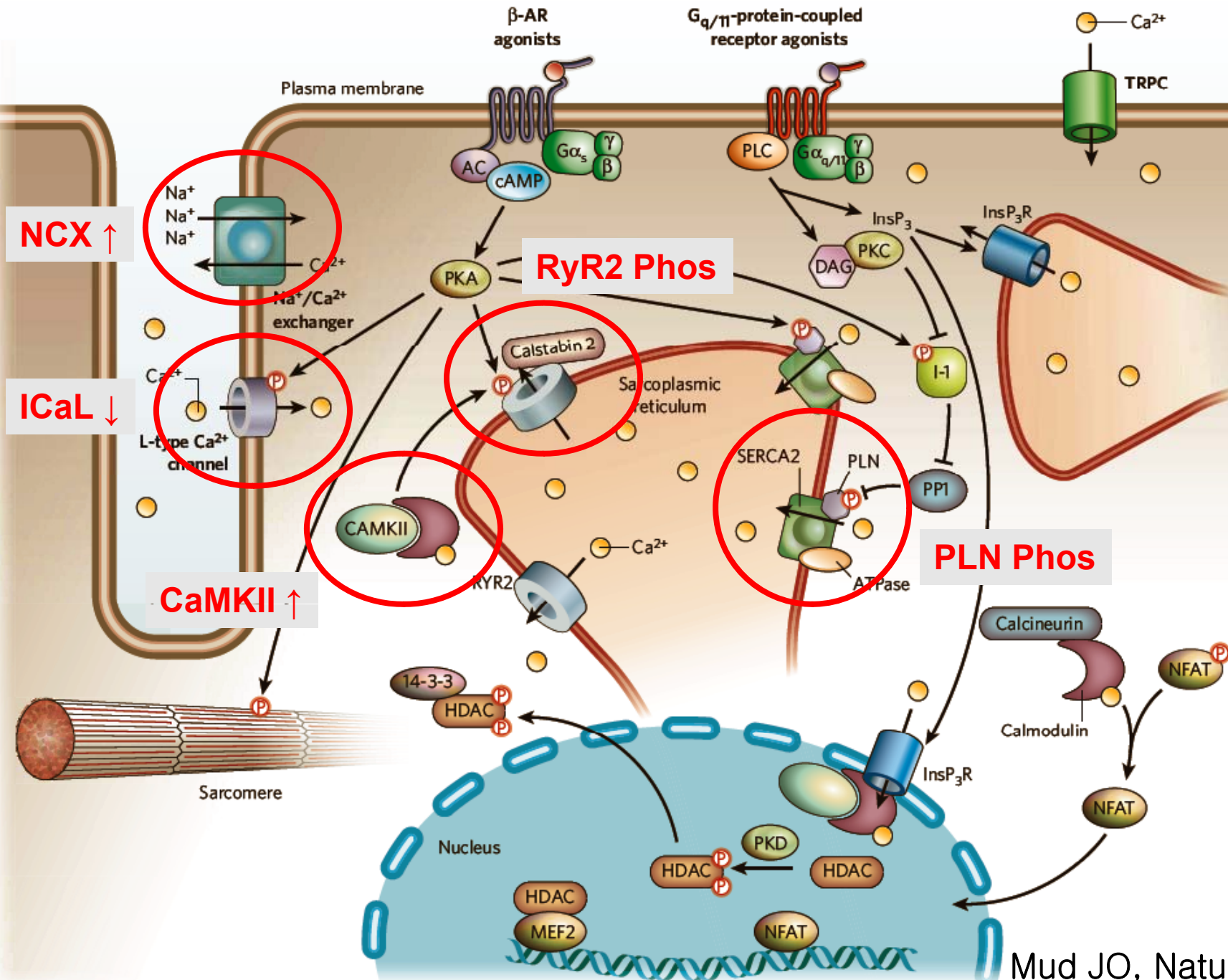


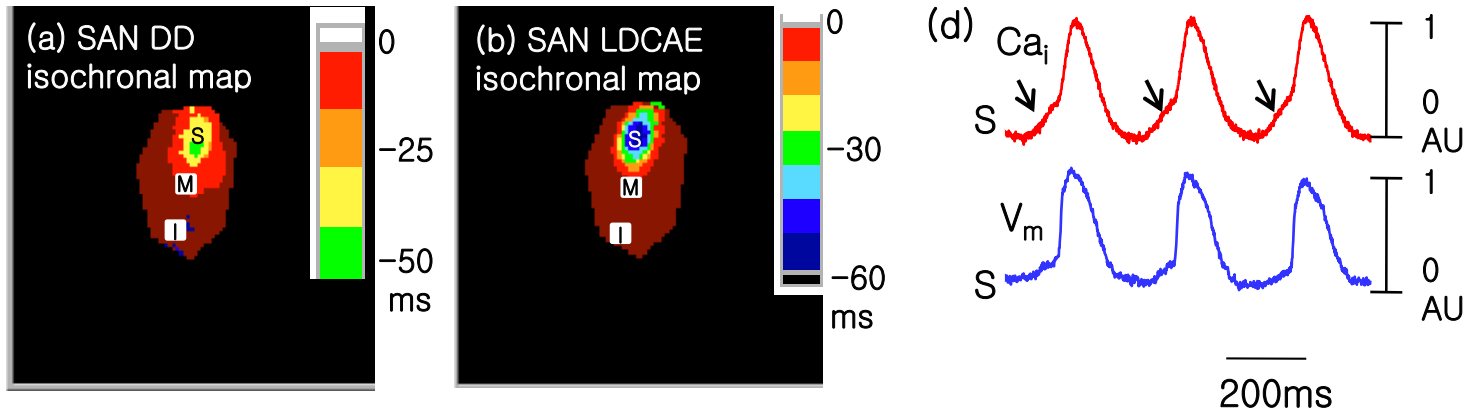
Table 4. Comparison of Characteristics of Arrhythmogenic Foci Between Paroxysmal and Persistent AF

	Paroxysmal (n=170)	Persistent (n=44)	<i>P</i> Value
PV foci, %	89	93	0.40
Non-PV foci, %	45	61	0.041
Total No. of foci, counts	2.28±0.12	3.03±0.14	<0.001
No. of non-PV foci, counts	0.98±0.14	2.23±0.16	<0.001
Foci in the left atrium, %	90	96	0.26
Foci in the right atrium, %	28	56	<0.001
Multiple foci (>2)	65%	88%	0.002

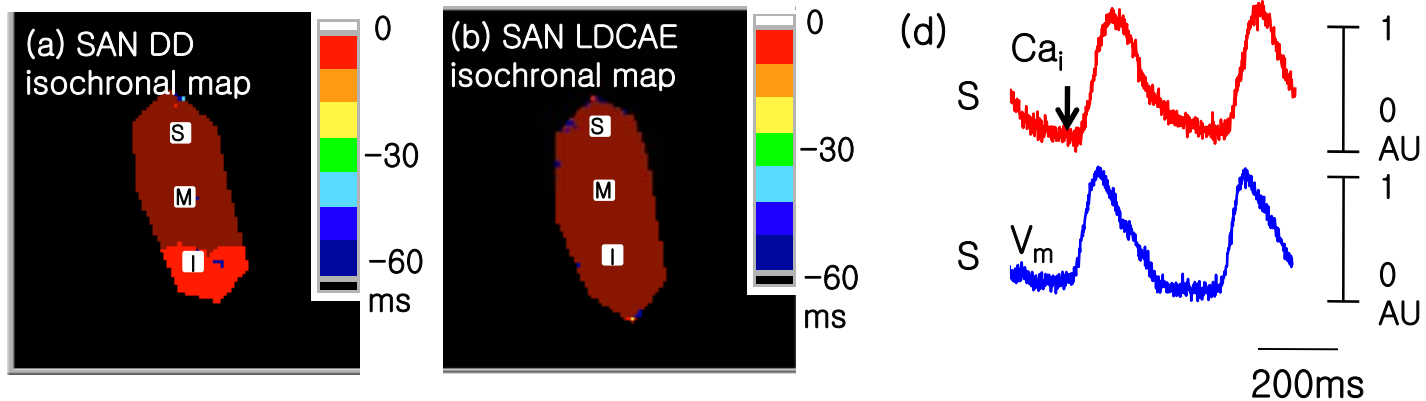
No. of foci are expressed as mean±SEM.

Mechanism of SAN dysfunction in AF

Control



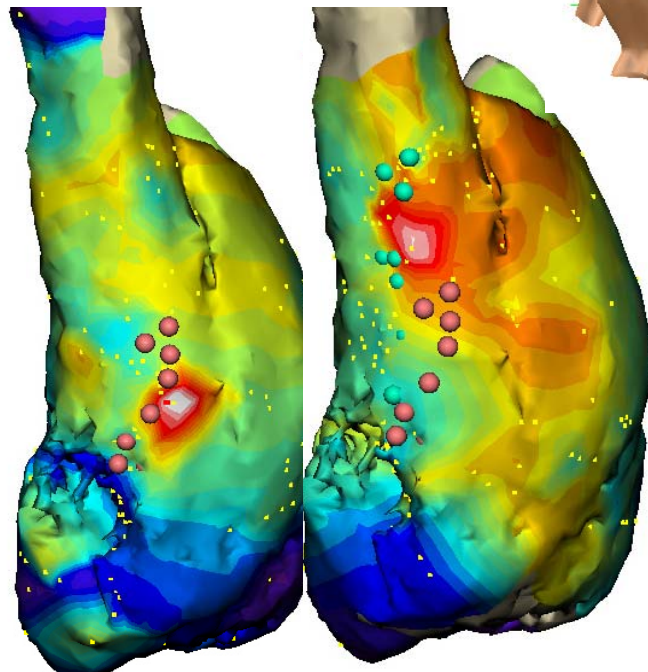
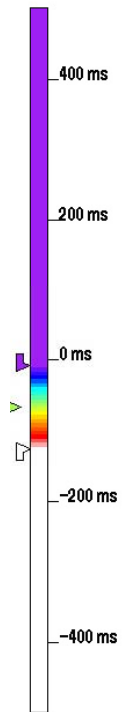
AF Dog



Impaired Response of SAN in Human AF with SSS

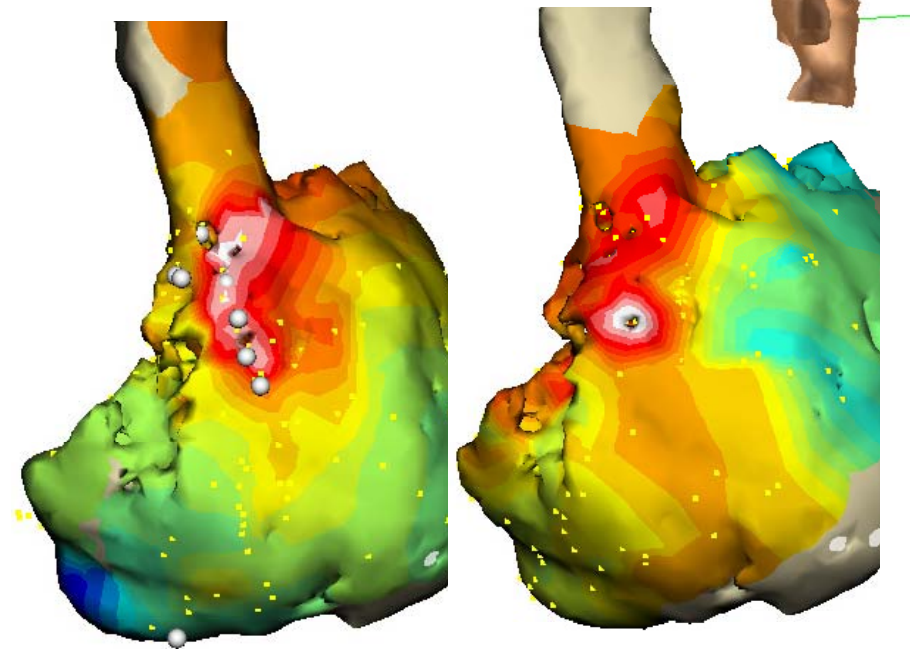
M/67, PAF, No SSS (-)

F/65, PAF, SSS (+)



Baseline
HR 80 bpm

ISO
HR 130 bpm



Baseline
HR 80 bpm

ISO
HR 110 bpm

Mechanism of atrial fibrillation

- 1. Rotors and wavelets
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Modulating factors

Non-correctable

- Genetic factors
- Age/Senescence

Correctable

Endothelial dysfunction

- Atherosclerosis

Coagulation factors

Inflammation

- Pericarditis
- Cardiac surgery
- Interleukin 6
- C-reactive protein

Atrial & PV stretch

- Hypertension
- LV dysfunction
- Mitral stenosis
- Aortic stenosis

Autonomics

- Vagal
- Adrenergic

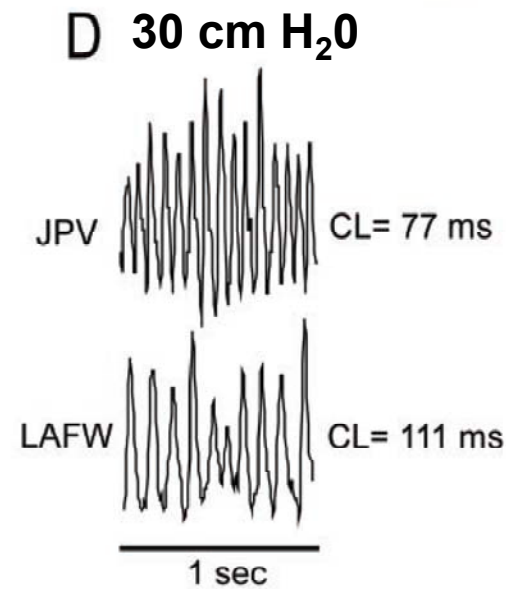
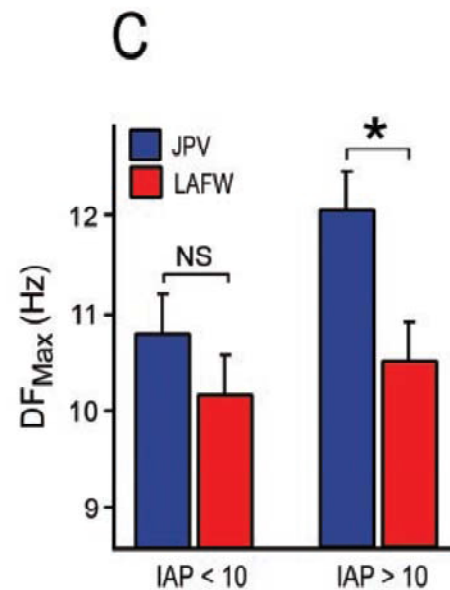
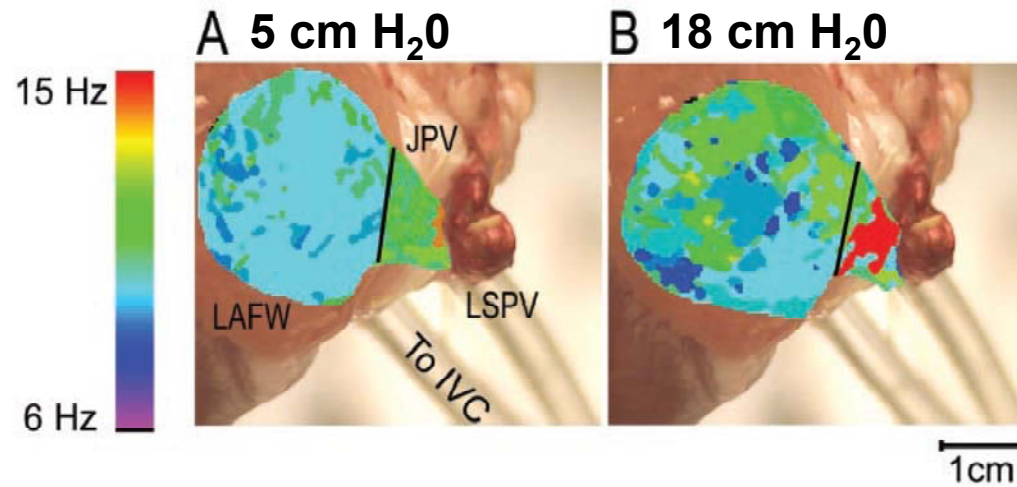
Hormonal

- Thyroid
- Diabetes

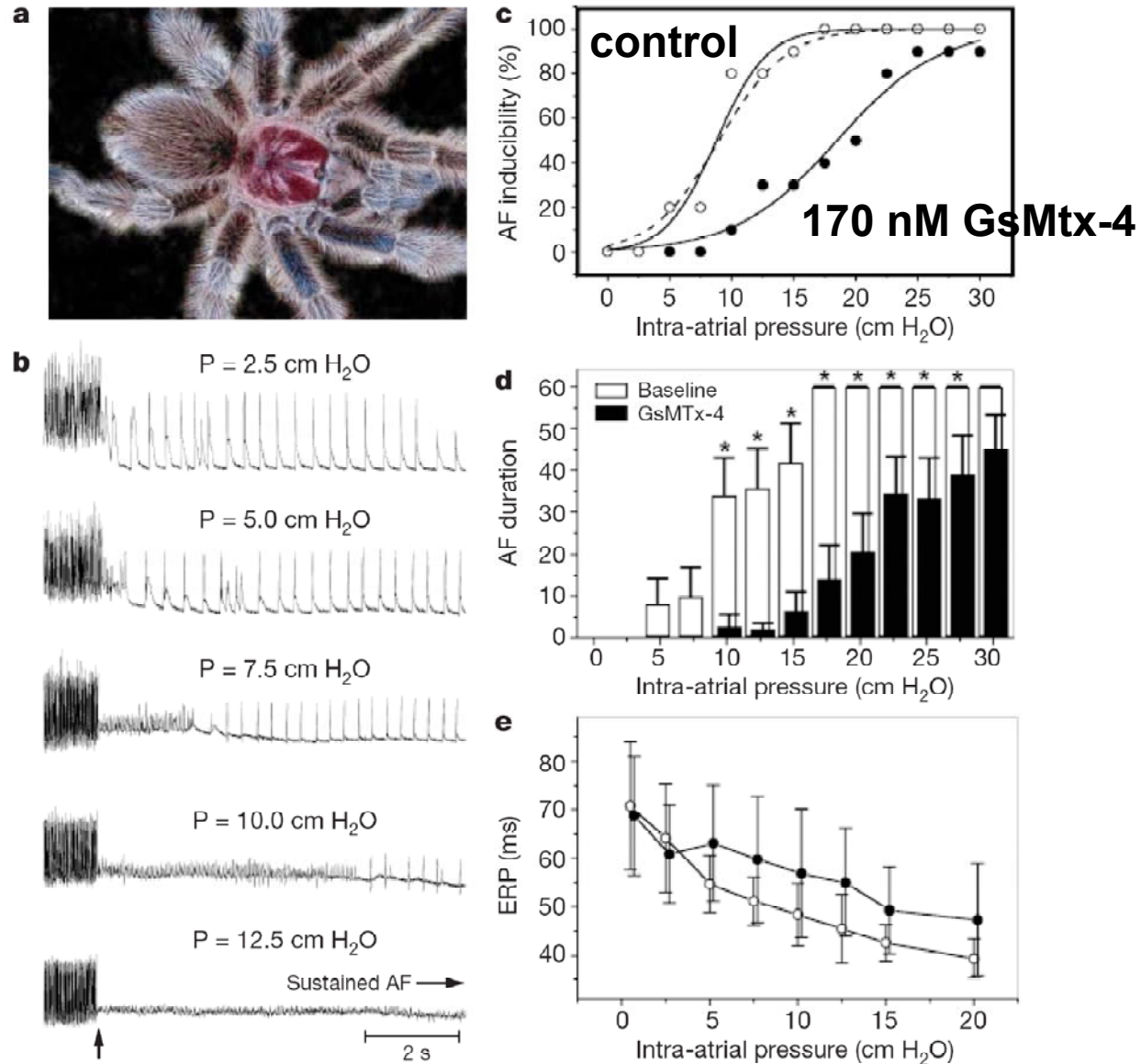
Miscellaneous

- Obesity
- Sleep apnea

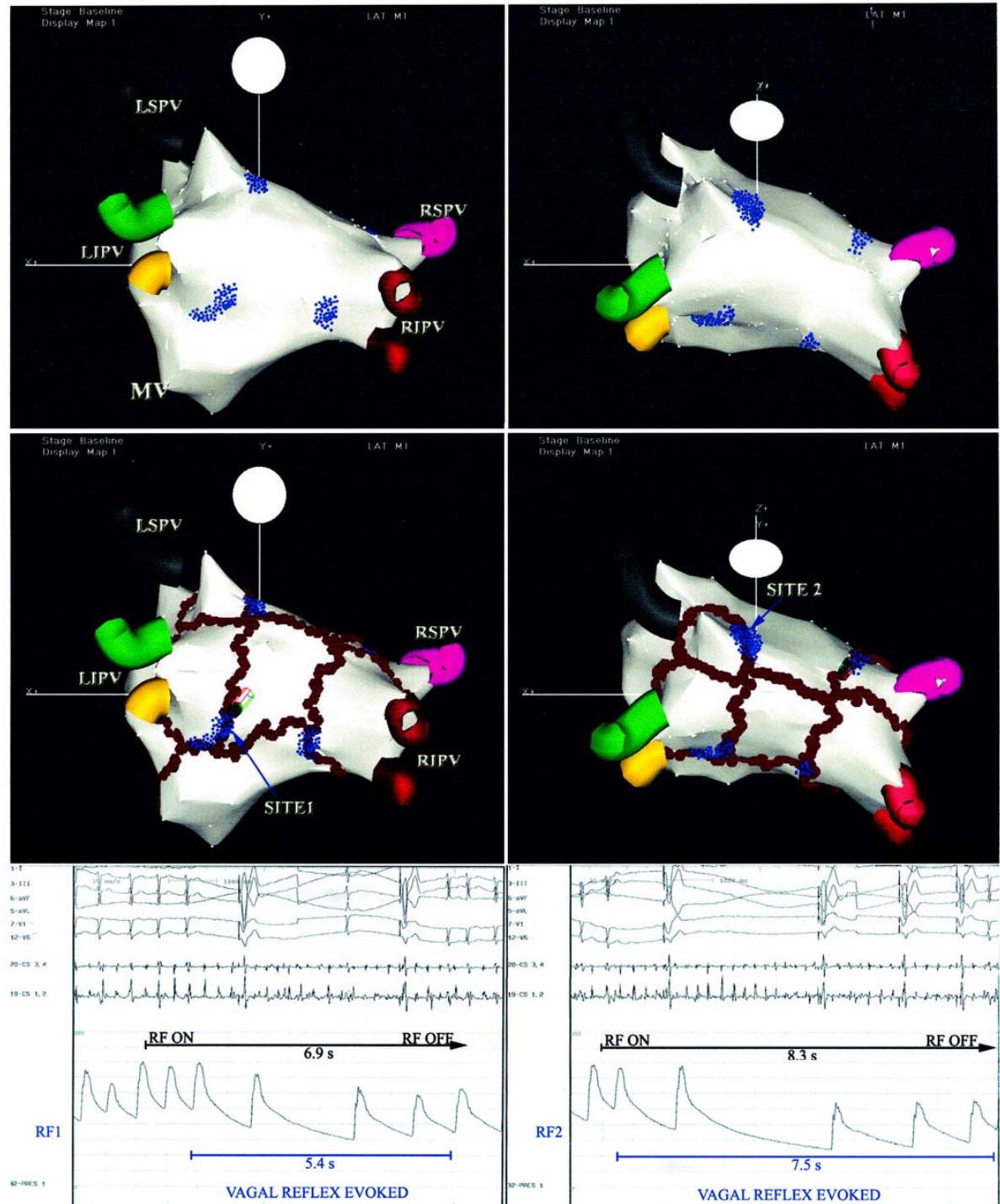
Pulmonary veins and atrial function



Tarantula peptide inhibits atrial fibrillation

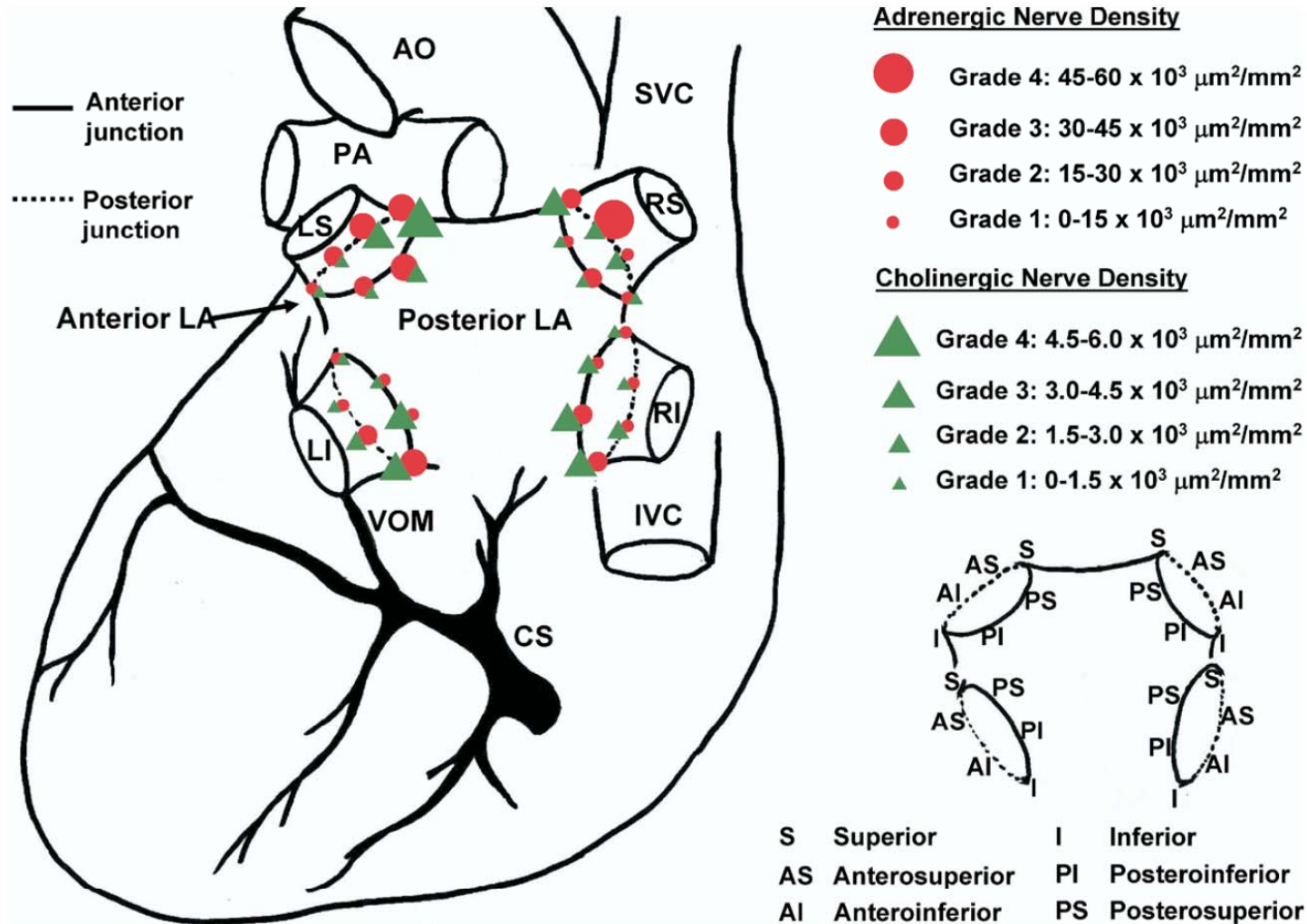


PV Denervation Enhances Long-Term Benefit After Circumferential Ablation for Paroxysmal Atrial Fibrillation

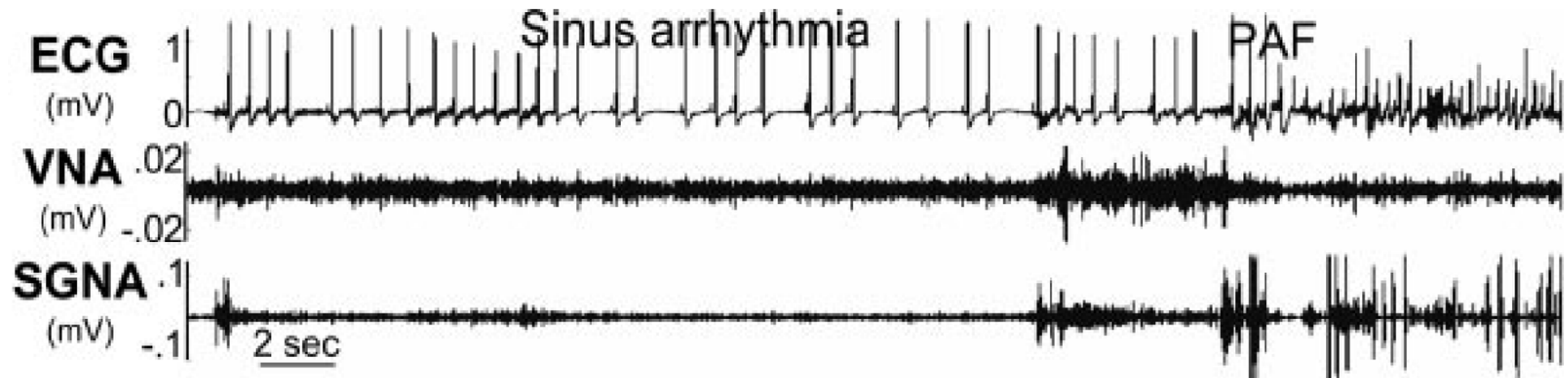


Pappone et al.
Circulation 2004;109:327-334

Circumferential distribution of autonomic nerves at the PV-LA junction



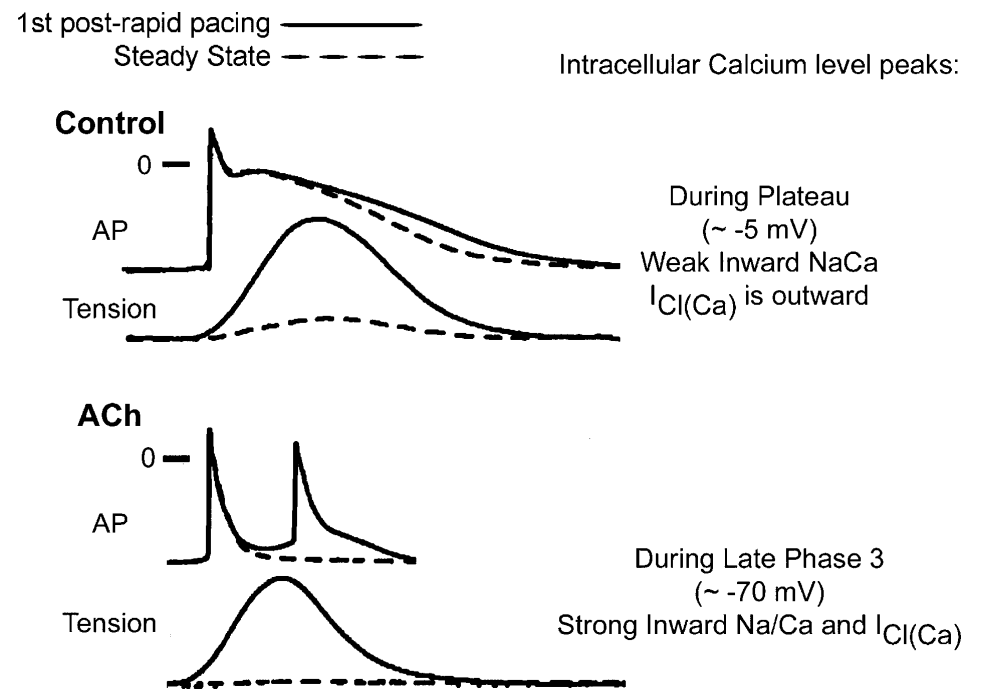
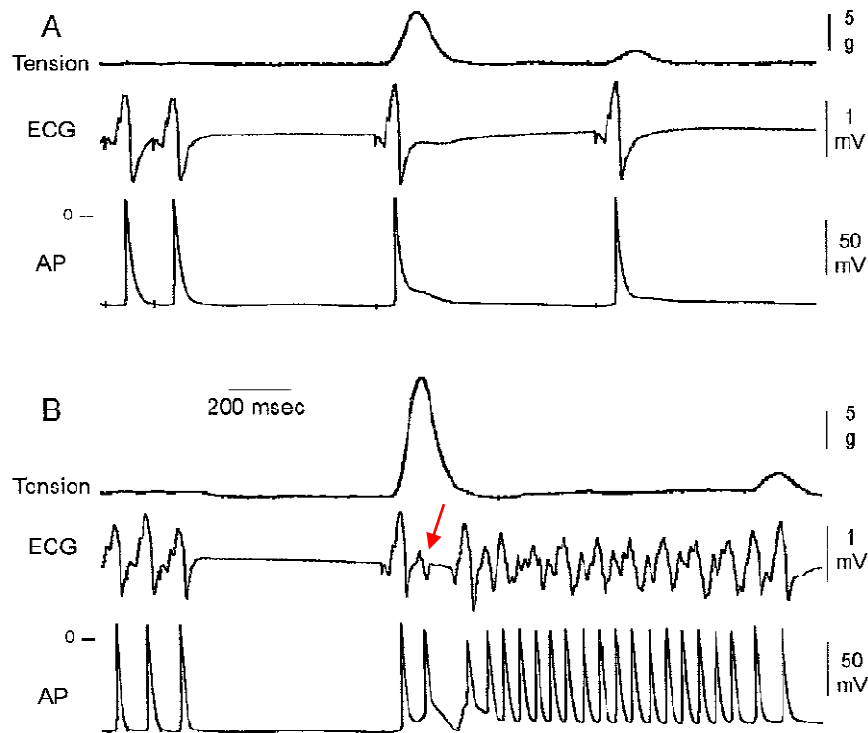
Neural Mechanisms of Paroxysmal AF



*** Cryoablation of extrinsic sympathovagal nerves eliminated paroxysmal atrial fibrillation and paroxysmal atrial tachycardia**

Late-phase 3 EADs.

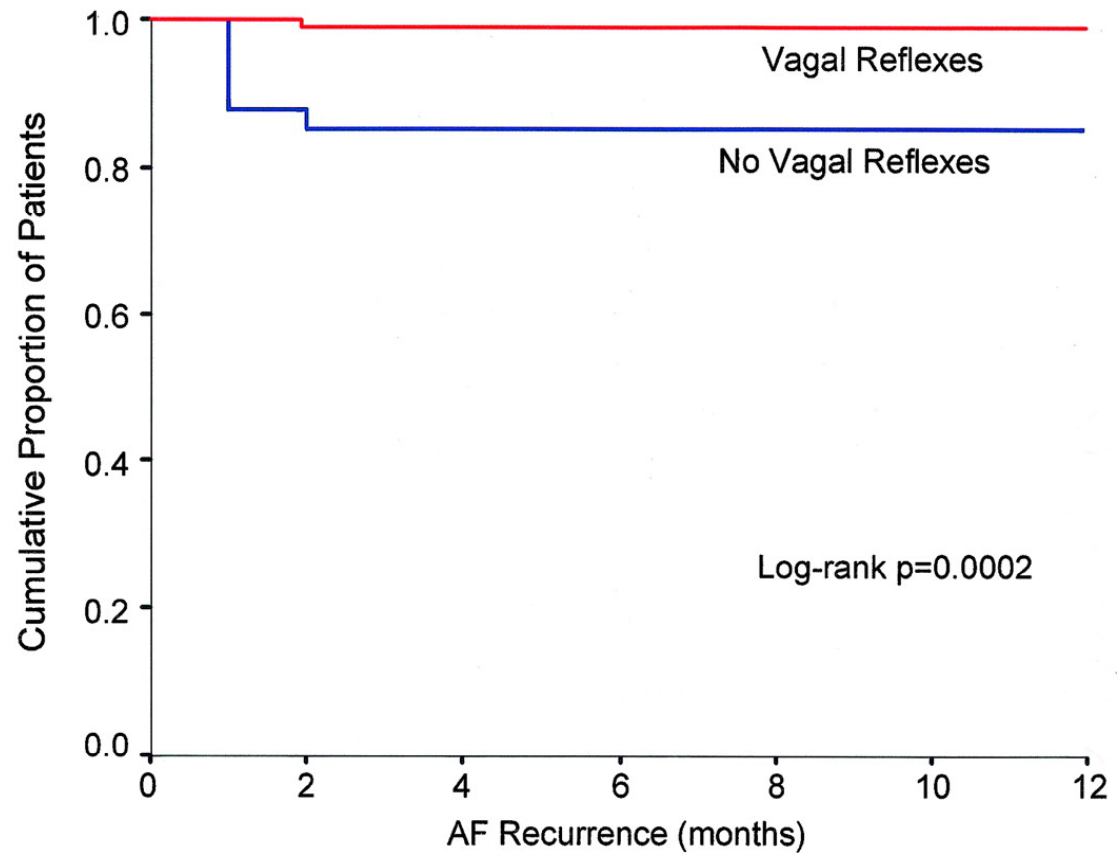
responsible for the extrasystolic activity that reinitiates fibrillation in canine atrial tissues.



Burashnikov A, Antzelevitch C. Circulation 2003; 107:2355–2360.

경청하여 주셔서 감사합니다.

PV Denervation Enhances Long-Term Benefit After Circumferential Ablation for Paroxysmal AF



Number at risk		0	2	4	6	8	10	12
Vagal Reflexes:	102	101	101	101	101	101	101	101
No Vagal Reflexes:	195	166	166	166	166	166	166	166

Reentry within PV

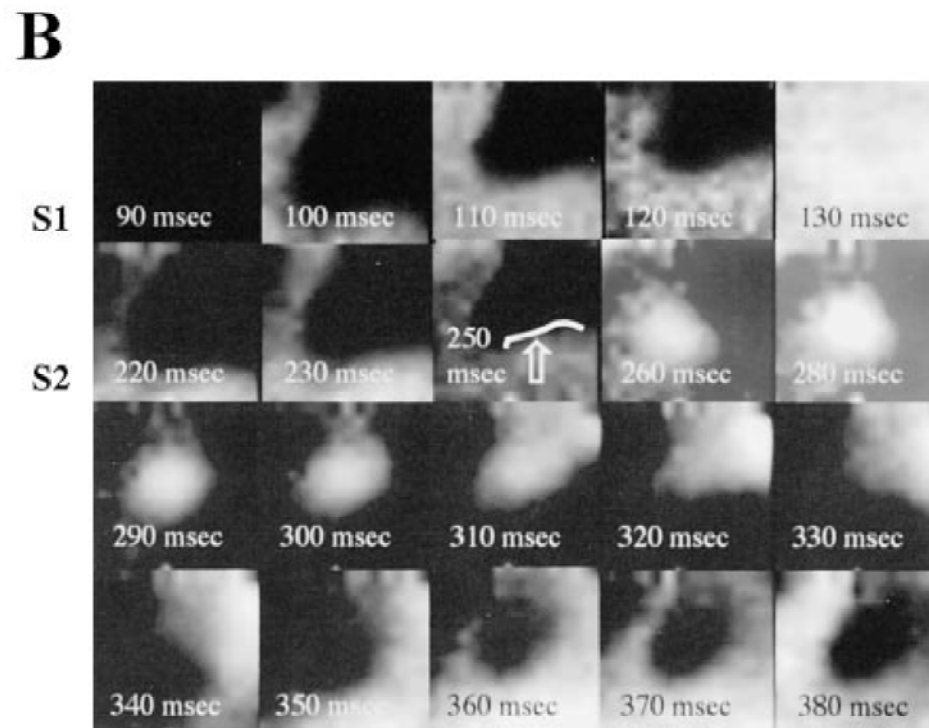
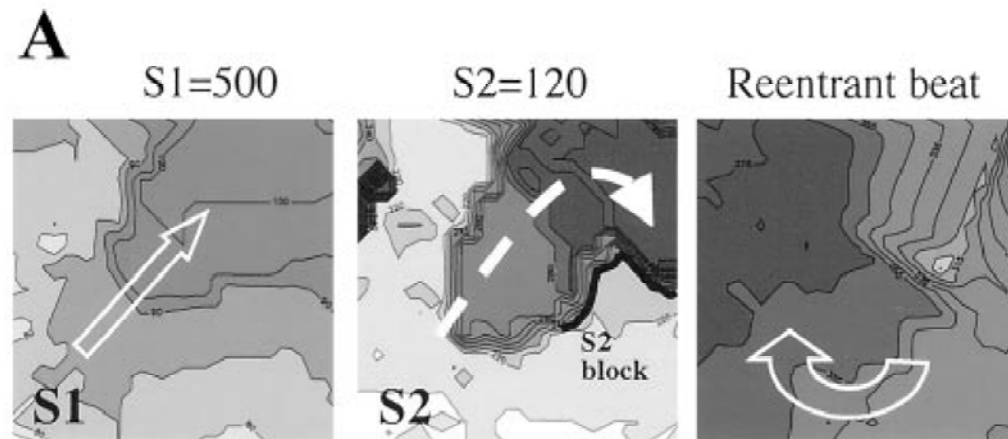
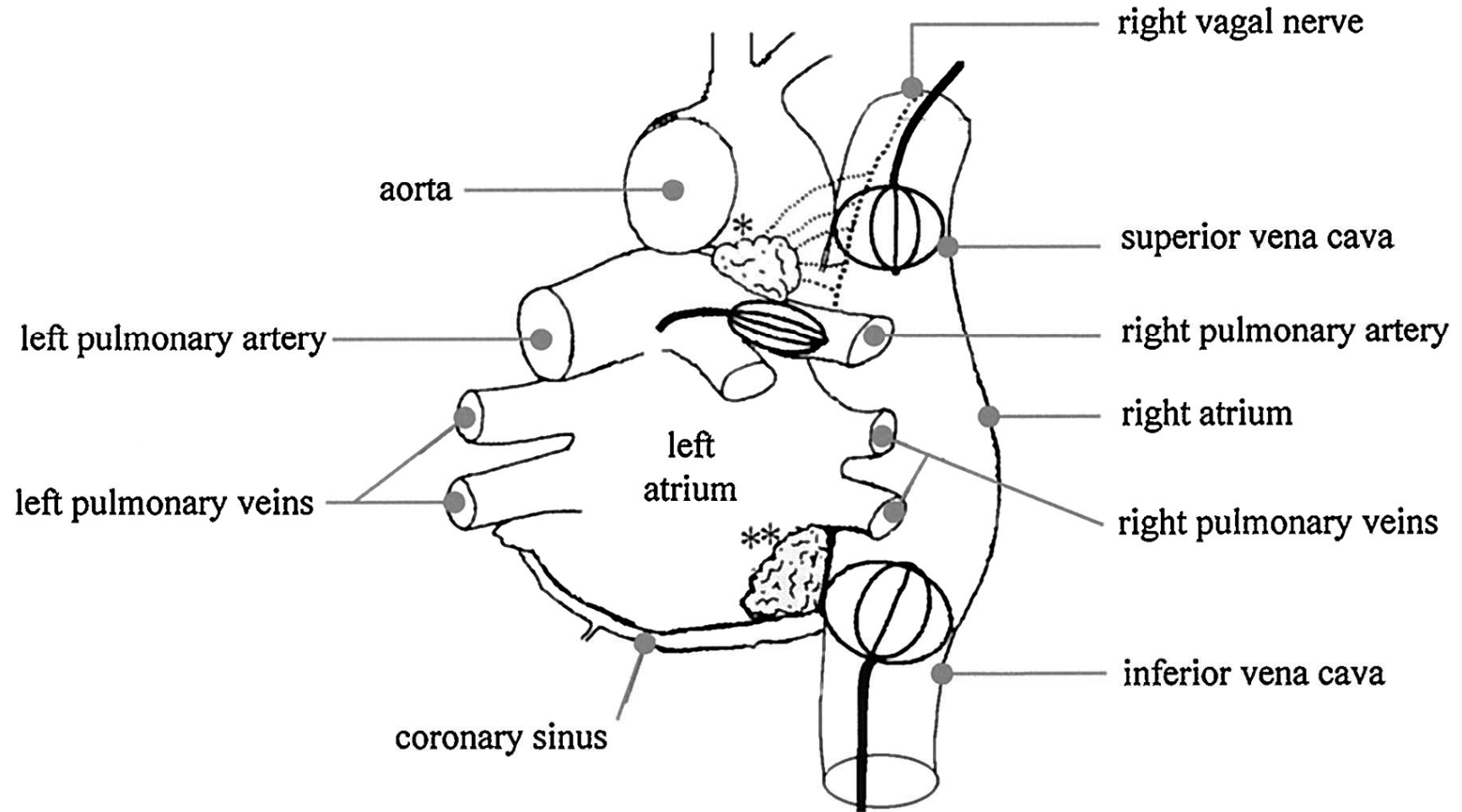


Illustration of parasympathetic innervation of atria

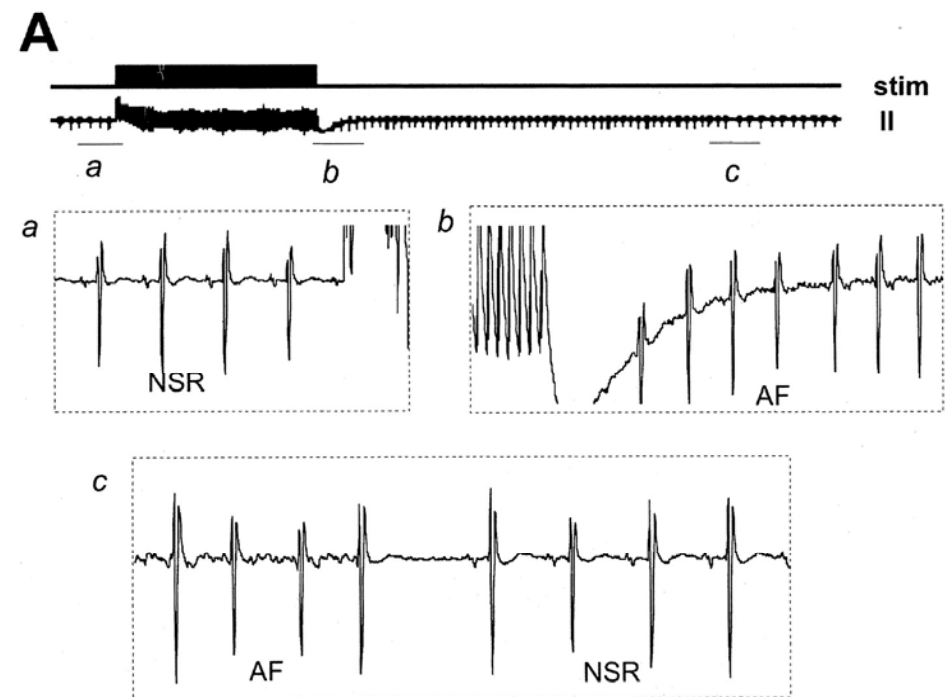
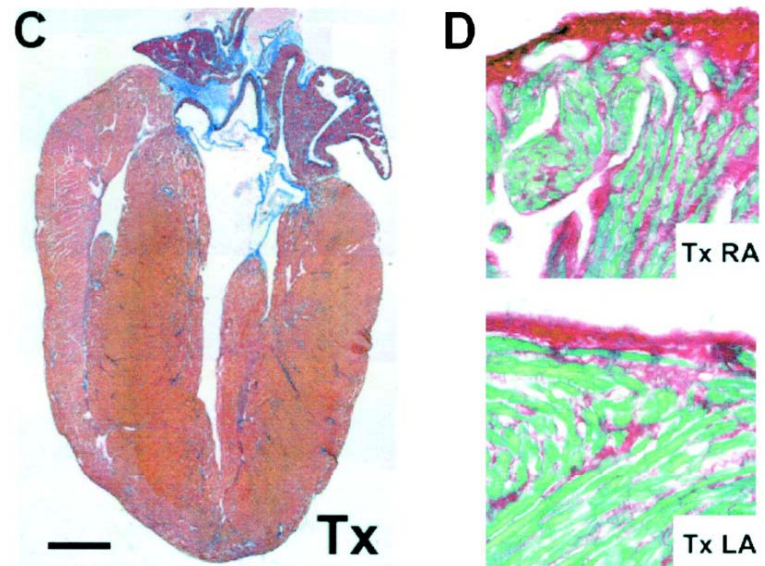
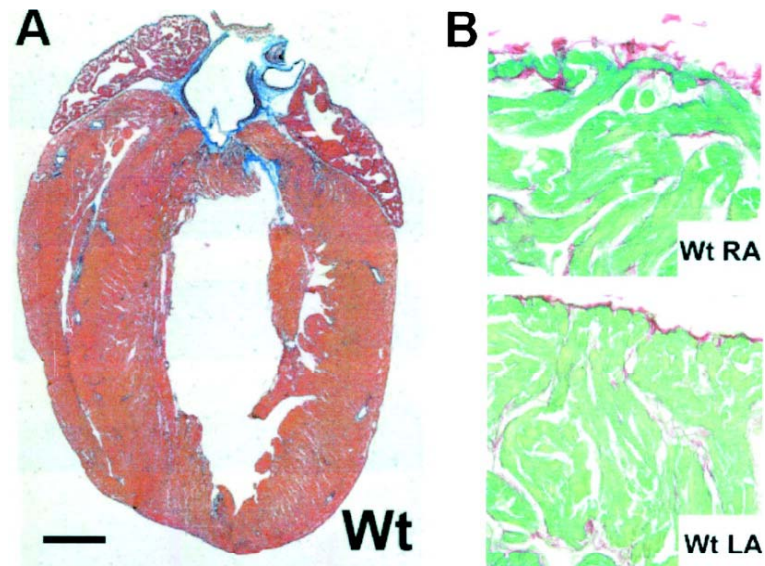


A comparison of ion current and transporter remodeling in CHF, healed MI and AF/ATR

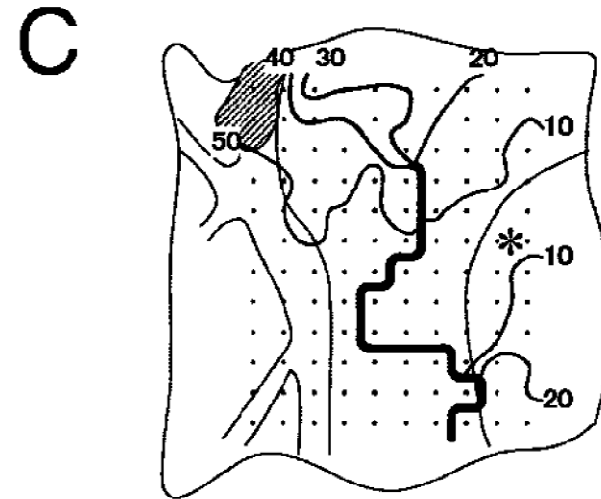
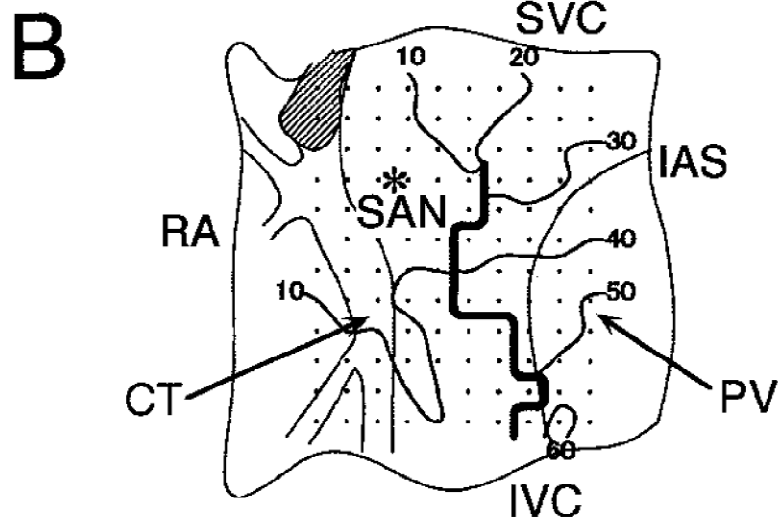
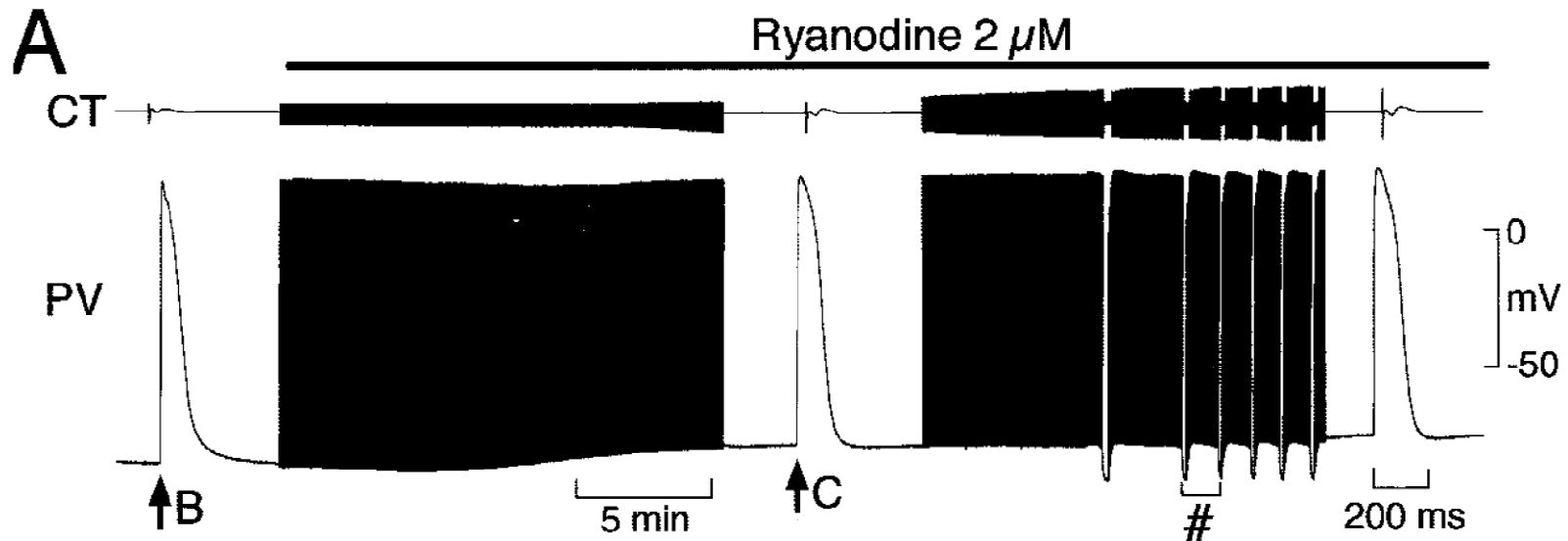
Property	CHF	MI	AF	Remarks
I_{to}	↓↓	↓↓	↓↓	
I_{K1}	↓	↓	↑	Constitutive I_{KACH} ↑ in AF
I_{Kr}	↔	↓	↔	
I_{Ks}	↓	↓	↔	
I_{CaL}	↔(↓)	↓	↓↓	
SERCA	↓	↓	??	
CaRc	Ph ↑	DS	Ph ↑	
NCX	↑	↔	↔(↑)	
I_{Na}	↓	↓	↔(↓)	
Connexins	↓	↓	??	Increased lateralization in MI and AF Increased heterogeneity in all
APD	↑	↑	↓	
CV	↓	↓	↓(↔)	
EADs	+	+	No	
DADs	+	+	?	
Reentry	+	+	+	

DS, dyssynchronous release

Increased vulnerability to AF in transgenic mice with selective atrial fibrosis caused by overexpression of TGF- β 1



Ryanodine-induced PV firing - pacemaker shift



TRPM7-Mediated Ca^{2+} Signals Confer Fibrogenesis in Human Atrial Fibrillation

Jiayang Du,* Jia Xie,* Zheng Zhang, Hiroto Tsujikawa, Daniel Fusco, David Silverman, Bruce Liang, Lixia Yue

Rationale: Cardiac fibrosis contributes to pathogenesis of atrial fibrillation (AF), which is the most commonly sustained arrhythmia and a major cause of morbidity and mortality. Although it has been suggested that Ca^{2+} signals are involved in fibrosis promotion, the molecular basis of Ca^{2+} signaling mechanisms and how Ca^{2+} signals contribute to fibrogenesis remain unknown.

Objective: To determine the molecular mechanisms of Ca^{2+} -permeable channel(s) in human atrial fibroblasts, and to investigate how Ca^{2+} signals contribute to fibrogenesis in human AF.

Methods and Results: We demonstrate that the transient receptor potential (TRP) melastatin related 7 (TRPM7) is the molecular basis of the major Ca^{2+} -permeable channel in human atrial fibroblasts. Endogenous TRPM7 currents in atrial fibroblasts resemble the biophysical and pharmacological properties of heterologously expressed TRPM7. Knocking down TRPM7 by small hairpin RNA largely eliminates TRPM7 current and Ca^{2+} influx in atrial fibroblasts. More importantly, atrial fibroblasts from AF patients show a striking upregulation of both TRPM7 currents and Ca^{2+} influx and are more prone to myofibroblast differentiation, presumably attributable to the enhanced expression of TRPM7. TRPM7 small hairpin RNA markedly reduced basal AF fibroblast differentiation. Transforming growth factor (TGF)- β 1, the major stimulator of atrial fibrosis, requires TRPM7-mediated Ca^{2+} signal for its effect on fibroblast proliferation and differentiation. Furthermore, TGF- β 1-induced differentiation of cultured human atrial fibroblasts is well correlated with an increase of TRPM7 expression induced by TGF- β 1.

Conclusions: Our results establish that TRPM7 is the major Ca^{2+} -permeable channel in human atrial fibroblasts and likely plays an essential role in TGF- β 1-elicited fibrogenesis in human AF. (*Circ Res.* 2010;106:992-1003.)

Key Words: atrial fibrillation ■ TRPM7 ■ Ca^{2+} signaling ■ TGF- β 1 ■ fibrogenesis

The potential interplay of electrical, contractile and structural feedback loops

