

1. What did this study explore? We sought to identify clinical and anatomic predictors of need for repeat ablation after initial atrial fibrillation ablation
2. How did the authors perform all experiments? We performed a retrospective analysis of 331 patients undergoing initial AF ablation, of whom 142 required repeat procedures.
3. How did the authors process all experimental data? We performed univariate and multivariate analysis of clinical and anatomic (determined by pre-procedure cardiac MRI) variables associated with need for repeat ablation.
4. How did the authors deal with the pre-study hypothesis? We took an unbiased approach to analysis and looked at all available clinical and anatomic variables as predictors of repeat ablation.
5. What are the novel findings of this study? Increased pulmonary vein (PV) size predicts the need for repeat AF ablation, with each millimeter increase in PV diameter associated with an approximately 5-10% increased risk of requiring repeat procedures.

