



## Interatrial Block and Supraventricular Arrhythmias. Clinical Implications of Bayés' Syndrome

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It was only at the beginning of the 20th century that fibers anatomically connecting both atria were first described, but it was not supposed that they could alter interatrial electrical connections. In the early days of electrocardiography, intra- and interatrial conduction disturbances started to be noticed but were described as occasional findings, without taking into account interpretation or classification criteria. Scientific papers considered them occasional findings independent of other different entities.

By the end of 1979, Dr. Antonio Bayés de Luna proposed the first classification of ECG atrial conduction abnormalities, and outlined the difference between intra- and interatrial blocks. For almost a decade, together with his collaborators, he analyzed more than 80,000 ECGs and set the foundations of these entities, identifying their pathophysiological mechanisms and consequences. A short time later, during the follow-up of this condition, it was observed that most patients suffered from extrasystoles, supraventricular tachycardias, and atrial fibrillation.

The scientific world's response was not long in coming, and several cardiology schools reported the common association of these blocks with atrial fibrillation, the increased risk of thrombus in the left atrium, and strokes due to thromboembolism. The improved knowledge of this condition was accompanied by several pathophysiological concepts and definitions, as a result of which Dr. Bayés de Luna called for and coordinated an international consensus to define all the varieties and associations with supraventricular arrhythmias.

Adrián Baranchuk has been the promoter of what happened next. He was able to connect intra-atrial conduction disturbances with atrial fibrillation, to the extent of having greater predictive value than the typical scores published in the guidelines. In 2013, he published it as Bayés' syndrome. Since then, there has been a huge increase in the number of publications in

high-impact journals, most of them generated by Dr. Baranchuk et al.

Advances in technology have allowed for more accurate observations, higher therapeutic possibilities, and a wide scope of opportunities, opening up new horizons for the better understanding of these abnormalities, with better diagnostic accuracy and conspicuous use of new drugs and therapeutic resources that offer multiple options and possibilities and are the source of new research fields.

Cardiologists are well aware of atrioventricular and bundle branch blocks, and even of blocks in Purkinje fibers, but they are not familiar with intra- and interatrial blocks or their associations with supraventricular arrhythmias. Dr. Baranchuk, aware of the importance of these facts, has called prestigious cardiologists and researchers on the topic to write this book, filling a gap in cardiac arrhythmology and opening new horizons for more accurate diagnoses and proper treatment of these syndromes. The book is written with a clarity that expresses deep knowledge of the topic, and offers a profusion of analytical figures and live examples that facilitate understanding and trigger further research. Dr. Baranchuk combines his ability as arrhythmologist with his vast experience as clinical cardiologist, and has been able to correlate these syndromes with various cardiovascular diseases, allowing us to appreciate their vastness and simplify their understanding. On top of that, the prologue has been written by Dr. Eugene Braunwald and Dr. Wojciech Zareba, legends of cardiology who understood the importance and significance of the topic.

We welcome this book, which should have a prominent place on the library shelves not only of specialists in the subject but also of clinical cardiologists; a book we are very proud of, since it was written by a worldwide outstanding fellow citizen.

Ricardo J. Esper