354 adults with symptomatic atrial fibrillation screened for enrollment

Excluded (n = 214)

Not meeting inclusion / exclusion criteria (n = 126)

Patient refusal to participate (n = 88)

Recruited (n = 140)

Withdrawals prior to randomization (n = 14)

COVID-19 (n = 13)

Withdrew consent before randomisation (n = 1)

Randomised (n = 126)[1]

Allocated to ablation

(n =64)

Received allocated intervention (n = 61)

Did not receive allocated intervention (n = 3)

  - 1 no transeptal attempt due to cardiac rotation
  - 1 unable to advance flexcath due to venous anomaly
  - 1 transeptal puncture failed

Allocated to sham

(n =62)

Received allocated intervention (n = 62)

6 month follow up

Lost to follow up (n =2)

-1 uncontactable

-1 withdrawn due to incessant medical therapy resistant atrial tachycardia

6 month follow up

Lost to follow up (n =1)

-1 death due to intracranial haemorrhage

64 included in primary analysis

62 included in primary analysis

1 Randomization was stratified according to type of AF (paroxysmal or persistent)