The International Task Force for diagnosis of arrhythmogenic right ventricular dysplasia / cardiomyopathy (ARVD) has modified the diagnostic criteria formerly established in 1994 (TFC 1994) by a new ones (TFC 2010), aimed to obtain a better sensitivity in the diagnosis, especially in incipient phases of the disease and in first-degree relatives.

In the TFC 2010, diagnosis is divided in:
1) Definite (2 major or 1 major plus 2 minor criteria or 4 minor)
2) Borderline (1 major and 1 minor or 3 minor criteria)
3) Possible (1 major or 2 minor criteria).

With the TFC 1994, 47 % of the patients had major criteria and 47 % minor criteria.
With the TFC 2010, 60 % had major criteria and 97 % minor criteria (p < 0.05).

With the TFC 1994, 96 % of the patients had minor criteria
With the TFC 2010, 98 % of them had major criteria. (p=NS)

There were no differences between TFC (both of them consider it as a major criteria).
It was present in 15 % of them

The new TF 2010 confers a greater sensitivity in the diagnosis of ARVD, without lack of specificity, especially when ECG and ventricular arrhythmias criteria are considered.

There are no significant differences in imaging techniques and family history. Those new criteria will have a significant impact in the diagnosis of the disease, especially in minor or incipient forms of ARVD.

No conflict of interest