



OUTCOME CLINICO E SOPRAVVIVENZA A 30 GIORNI ED A 1 ANNO DI PAZIENTI CHE ACCEDONO IN PRONTO SOCCORSO PER FIBRILLAZIONE ATRIALE PAROSSISTICA

Scannapieco A, Turco F



x congresso nazionale

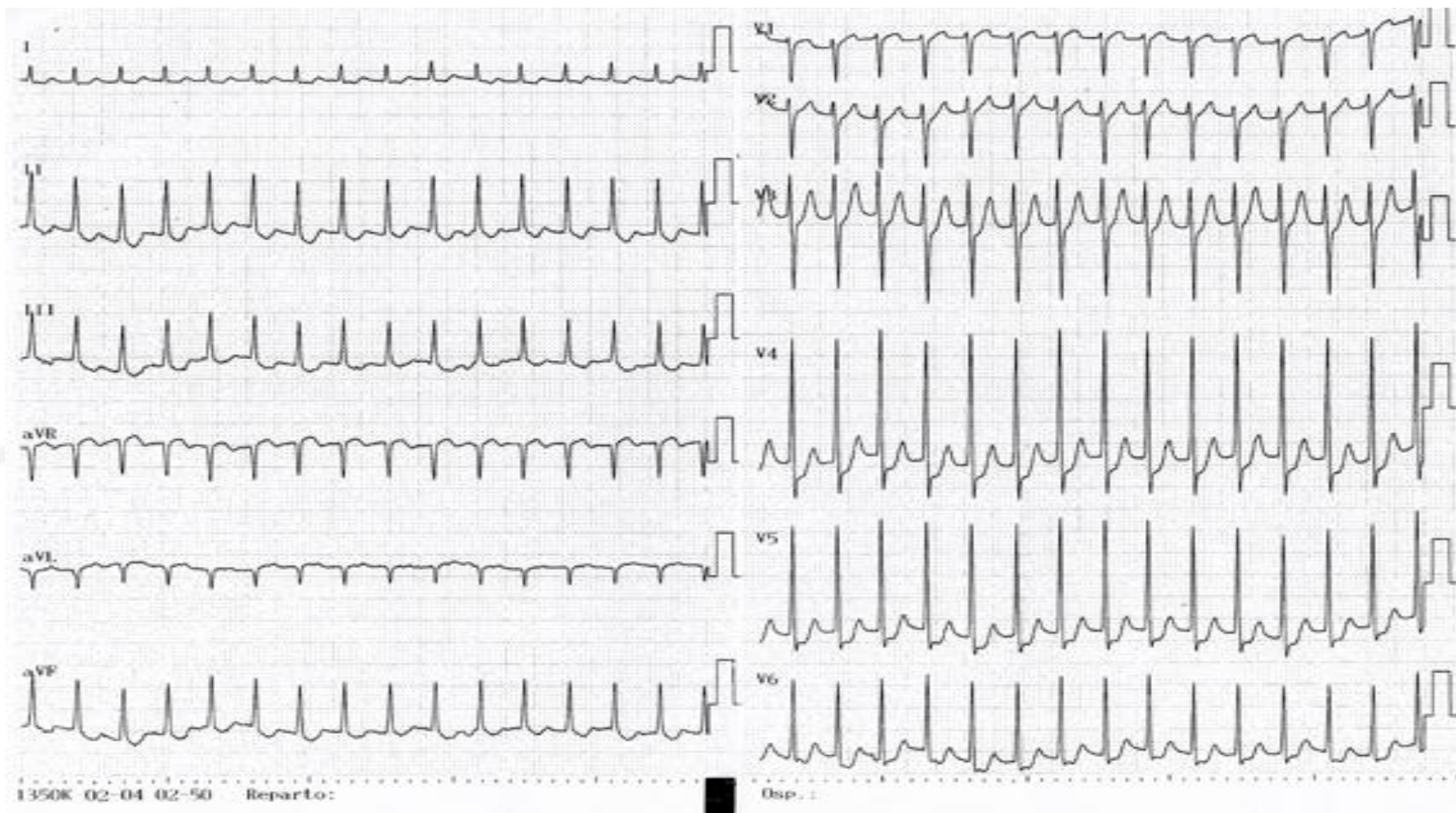
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NAPOLI 18-20 NOVEMBRE 2016

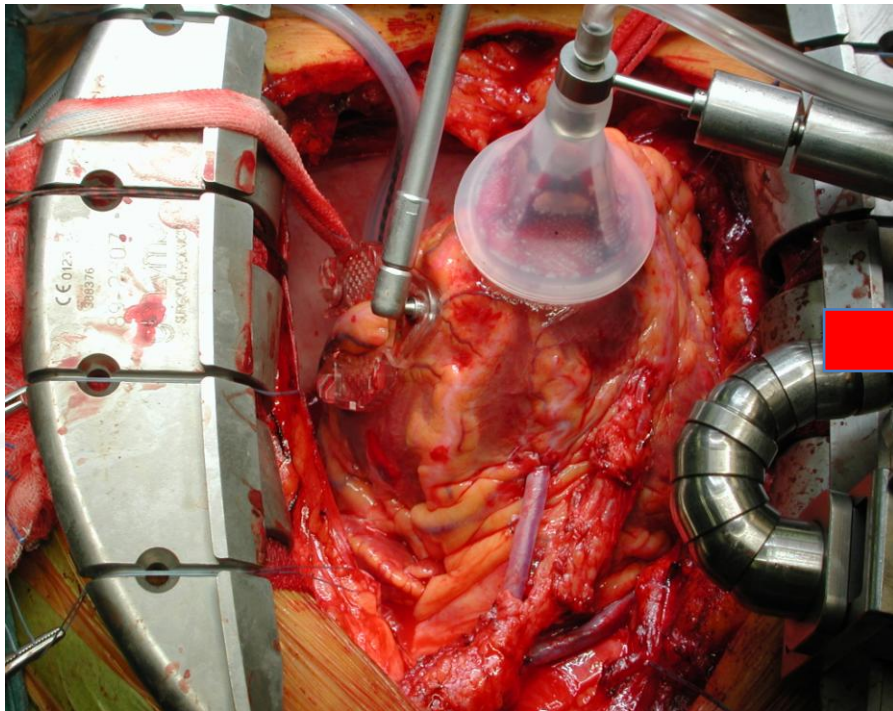
Ospedale Civile “M Giannuzzi” Manduria



Perché l'FA???



Perché l'FA???

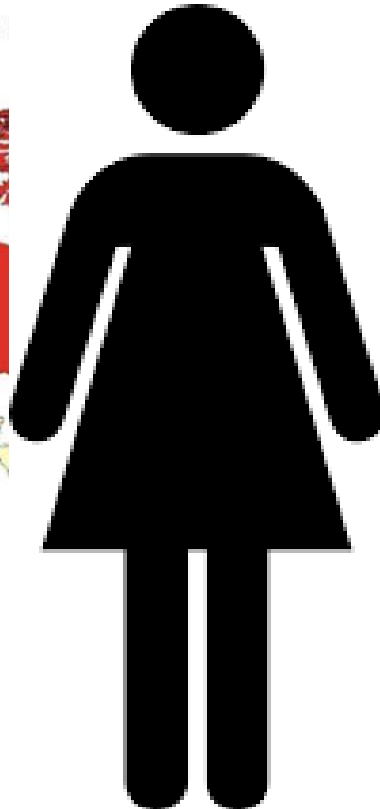


Epidemiologia

Prevalence



250 to 325
325 to 400
400 to 475
475 to 550
550 to 625
625 to 700
700 to 775

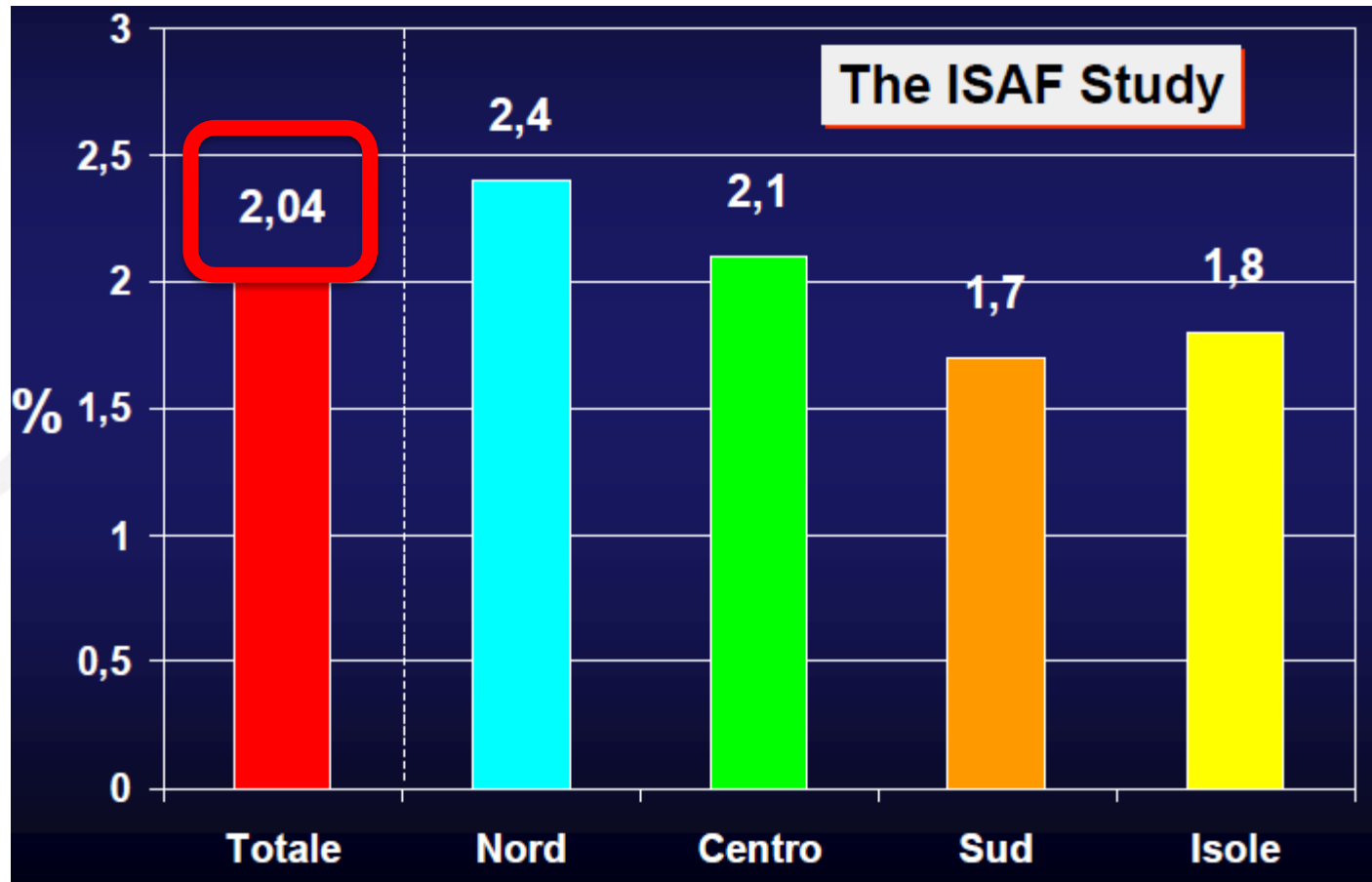


gion, 2010



Prevalenza globale circa 3%

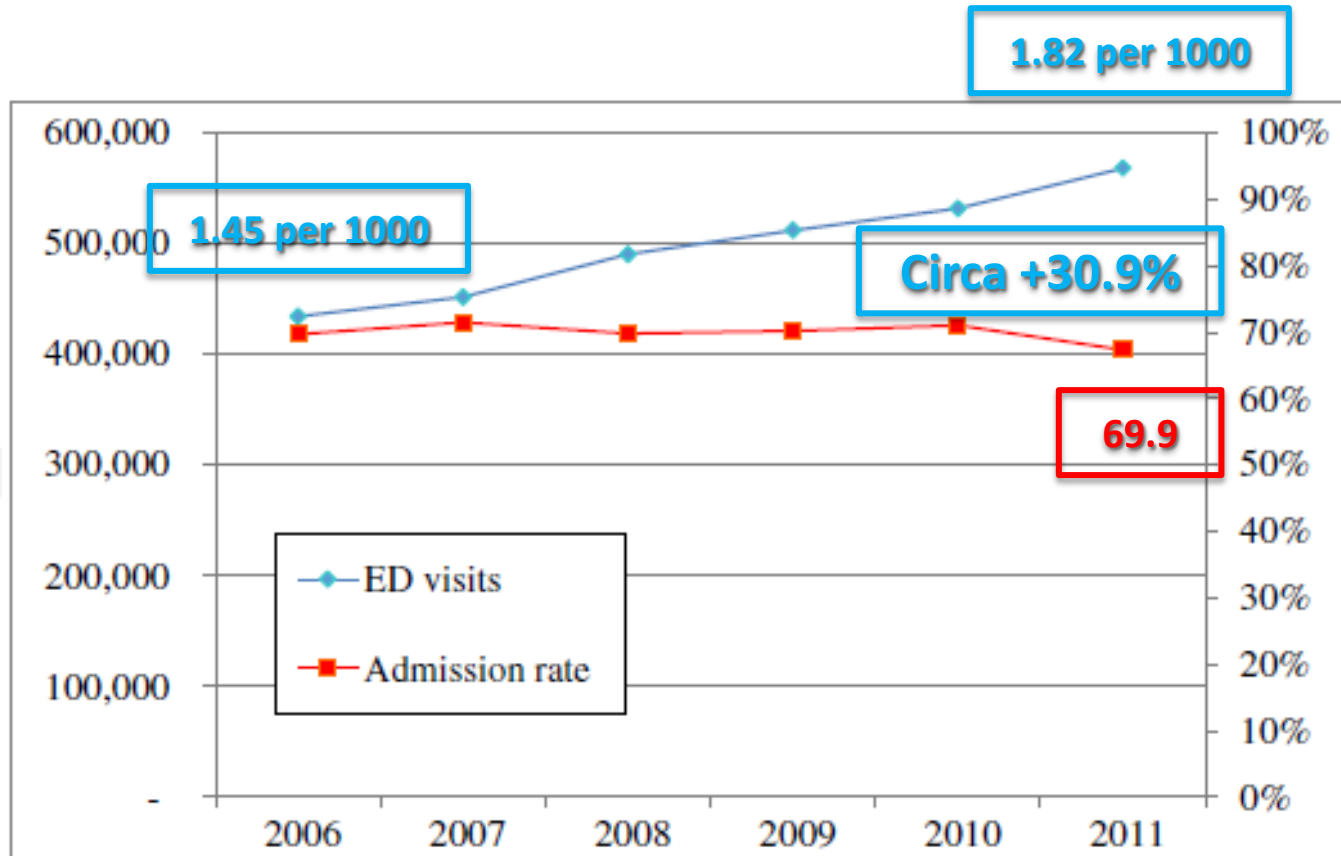
Epidemiologia



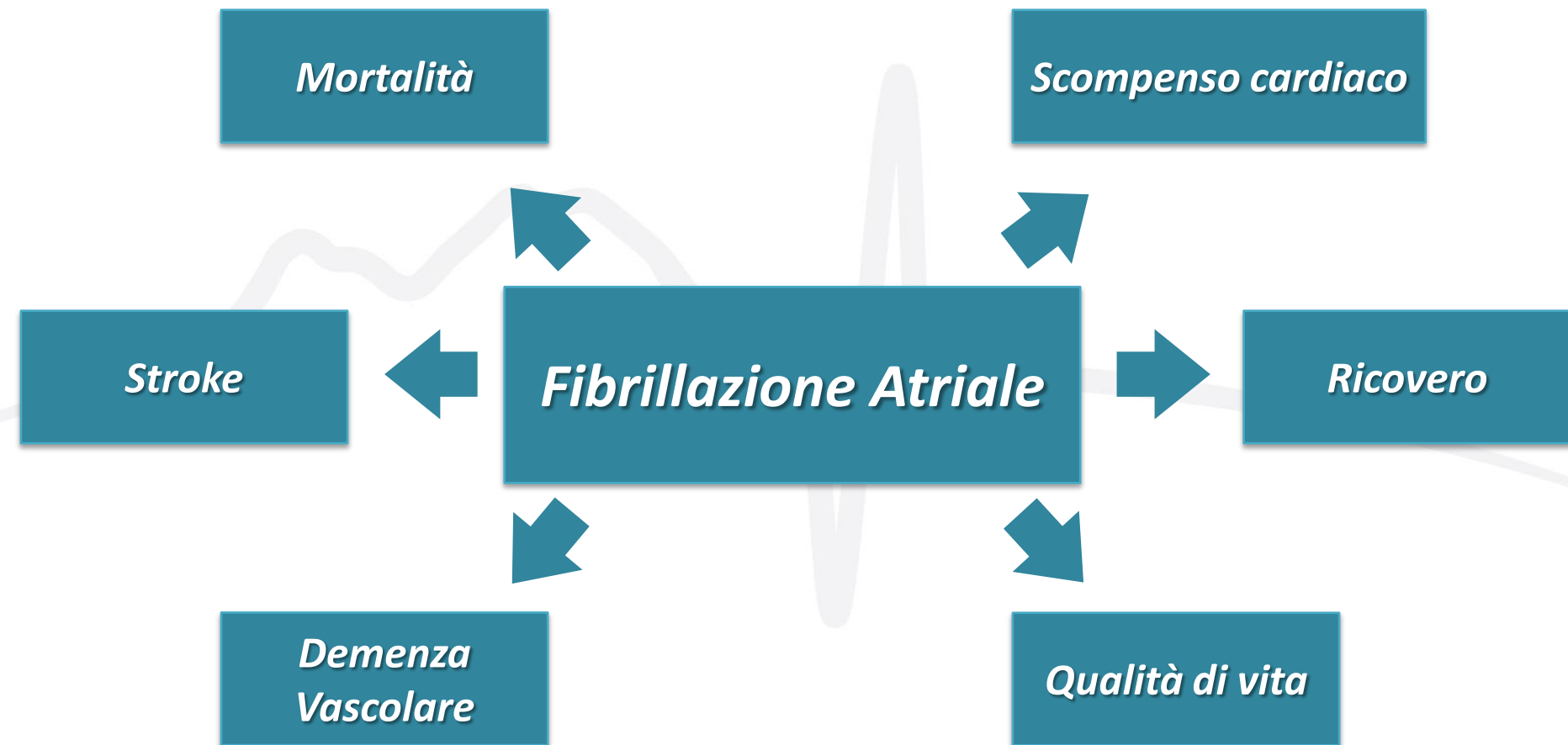
Frequency, Patient Characteristics, Treatment Strategies, and Resource Usage of Atrial Fibrillation (from the Italian Survey of Atrial Fibrillation Management [ISAF] Study)

Zoni-Berisso M et Al, Am J Cardiol 2013; 111:705-711

Epidemiologia

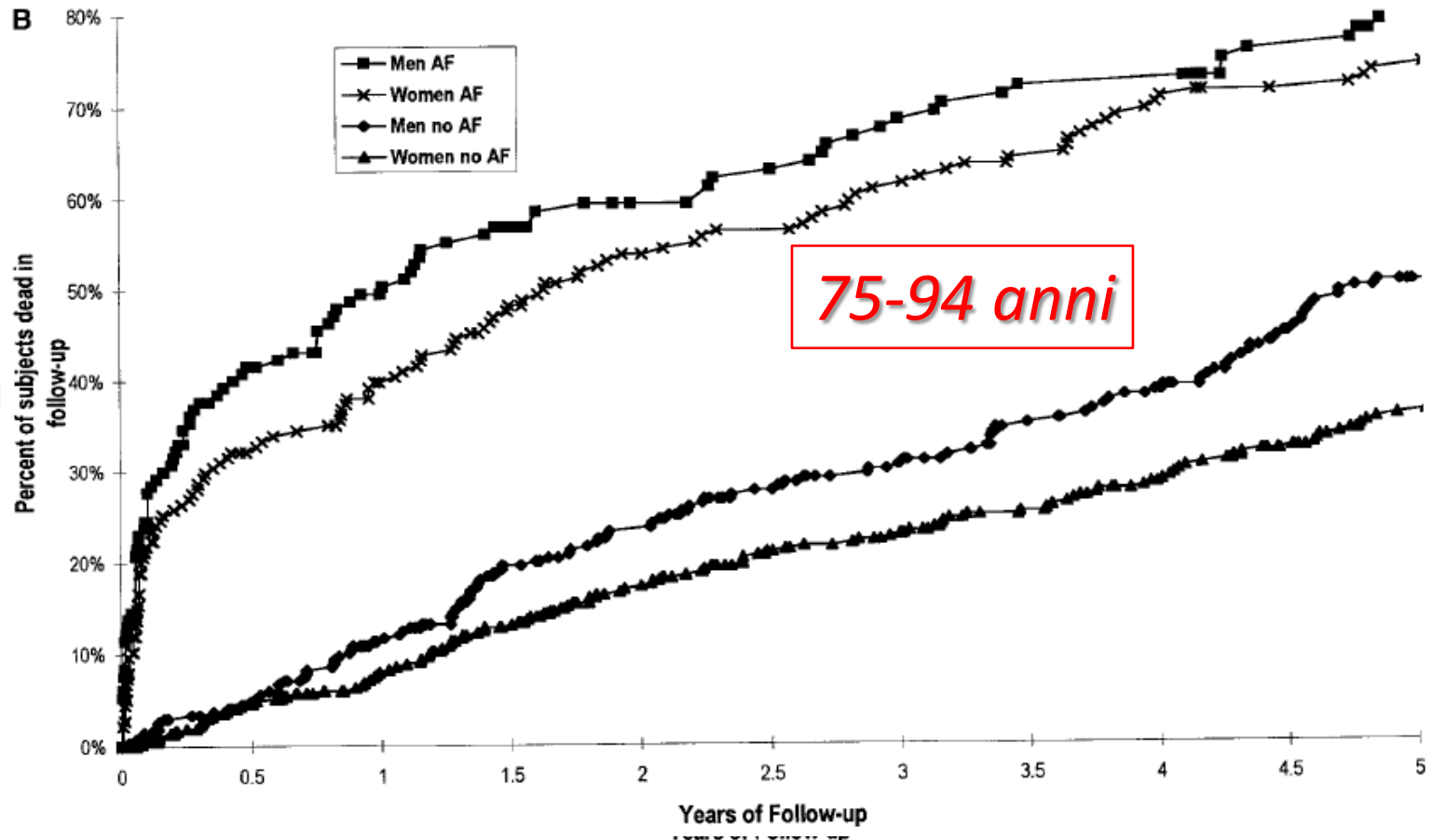


Quale Rischio??



Mortalità

Impact of Atrial Fibrillation on the Risk of Death The Framingham Heart Study



Mortalità

Impact of Atrial Fibrillation on the Risk of Death The Framingham Heart Study

Covariates	Subjects at Risk	Men				Women			
		Deaths/Person-Years	OR	P	95% CI	Deaths/Person-Years	OR	P	95% CI
Age	All eligible	1465 19 616	2.4	0.0001	2.1–2.9	1442 28 439	3.5	0.0001	3.0–4.1
Clinical RF	All eligible	1449 19 397	1.5	0.0001	1.2–1.8	1438 28 216	1.9	0.0001	1.6–2.3

Stroke

		Overall			
		AF (n=590)	No AF (n=1554)	P Value, χ^2	
	Participants with age ≥ 75 y, n (%)	<u>337 (57)</u>	<u>425 (27)</u>	<0.0001	an e, y
Isch	Women, ≥ 75 y, n (%)	191 (32)	222 (14)	<0.0001	0
stroke	Cardiac rhythm monitoring, ≥ 24 h after stroke, n (%)	370 (63)	1049 (68)	0.0362	
Isch	Lacunar infarct visualized on CT/MRI, n (%)*	<u>33 (6)</u>	<u>306 (20)</u>	<0.0001	7
stroke	Ipsilateral cervical carotid stenosis >50% or occlusion, n (%)	55 (9)	238 (15)	0.0003	7
AF*	Death within 30 d, n (%)	<u>58 (10)</u>	<u>66 (4)</u>	<0.0001	

Global Survey of the Frequency of Atrial Fibrillation–Associated Stroke

Perera KS et Al., Stroke. 2016;47:00-00

Embolic Stroke of Undetermined Source Global Registry

Scompenso Cardiaco

Characteristic	Cardiovascular Event		Stroke		Heart Failure		All-Cause Mortality	
	Men	Women	Men	Women	Men	Women	Men	Women
Multivariate-Adjusted Rate Ratio (95% Confidence Interval)								
<u>Atrial fibrillation</u>	1.8 (1.3–2.5)	3.0 (2.1–4.2)	2.5 (1.3–4.8)	3.2 (1.0–5.0)	3.4 (1.7–6.8)	3.4 (1.9–6.2)	1.5 (1.2–2.2)	2.2 (1.5–3.2)
Age*	2.2 (2.0–2.4)	2.2 (2.0–2.5)	4.0 (3.1–5.1)	3.2 (2.3–4.3)	3.2 (2.2–4.5)	5.0 (3.9–6.4)	3.6 (3.2–4.0)	3.4 (3.0–4.0)
History of chest pain	1.4 (1.3–1.5)	1.4 (1.3–1.6)	—	1.4 (1.1–1.7)	1.6 (1.3–2.1)	1.2 (1.0–1.4)	1.3 (1.2–1.4)	1.2 (1.1–1.3)
History of smoking	1.5 (1.3–1.6)	1.5 (1.4–1.6)	1.3 (1.0–1.6)	1.4 (1.1–1.9)	1.4 (1.1–1.8)	1.7 (1.5–2.0)	1.6 (1.4–1.8)	1.5 (1.4–1.7)
History of stroke	1.6 (1.2–2.0)	2.0 (1.6–2.7)	2.2 (1.3–3.7)	2.3 (1.2–4.1)	2.6 (1.4–4.8)	3.1 (2.0–4.7)	1.5 (1.2–2.0)	1.8 (1.4–2.4)
Q waves on ECG	1.4 (1.1–1.6)	1.3 (1.0–1.7)	—	—	—	—	1.2 (1.0–1.5)	1.4 (1.1–1.8)
ST-segment changes (ECG)	1.3 (1.1–1.6)	1.2 (1.0–1.5)	2.0 (1.5–2.7)	—	1.6 (1.1–2.5)	1.7 (1.3–2.1)	—	1.3 (1.1–1.6)
Left bundle branch block	1.5 (1.2–1.7)	1.4 (1.2–1.6)	—	2.1 (1.6–2.9)	1.6 (1.0–2.4)	—	1.5 (1.3–1.7)	—
Systolic blood pressure [†]	1.5 (1.4–1.8)	1.5 (1.3–1.7)	2.1 (1.5–2.9)	1.8 (1.3–2.5)	1.7 (1.2–2.6)	1.8 (1.4–2.4)	1.3 (1.1–1.5)	1.4 (1.1–1.6)
Diastolic blood pressure [‡]	1.2 (1.0–1.3)	1.2 (1.1–1.4)	—	—	—	1.5 (1.2–2.0)	1.3 (1.1–1.4)	1.3 (1.1–1.6)
Adjusted FEV ₁ (%) [§]	2.2 (1.9–2.6)	2.3 (2.0–2.6)	2.6 (2.0–3.5)	1.9 (1.2–3.0)	1.1 (1.0–1.1)	2.1 (2.3–2.9)	1.2 (1.1–1.3)	1.2 (1.1–1.4)
Cardiothoracic ratio ≥0.55	1.2 (1.0–1.4)	1.4 (1.2–1.5)	—	1.9 (1.3–2.7)	1.8 (1.4–2.4)	—	1.2 (1.1–1.3)	—
Blood glucose ≥7.0 mmol/L [¶]	—	1.6 (1.3–1.9)	—	—	2.6 (1.7–3.9)	1.8 (1.3–2.5)	—	1.7 (1.4–2.1)

N=15300

FU di 20 anni

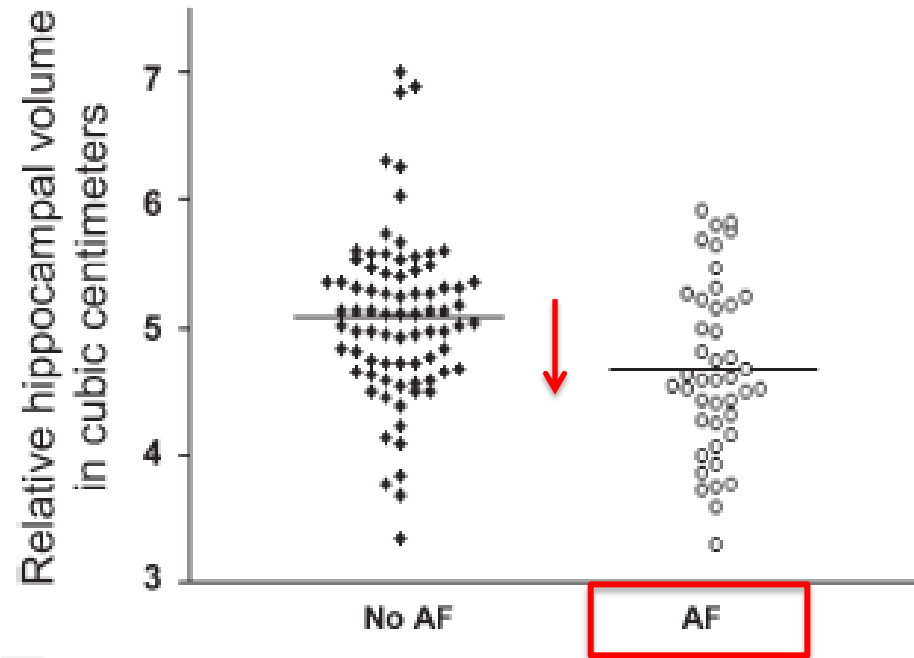
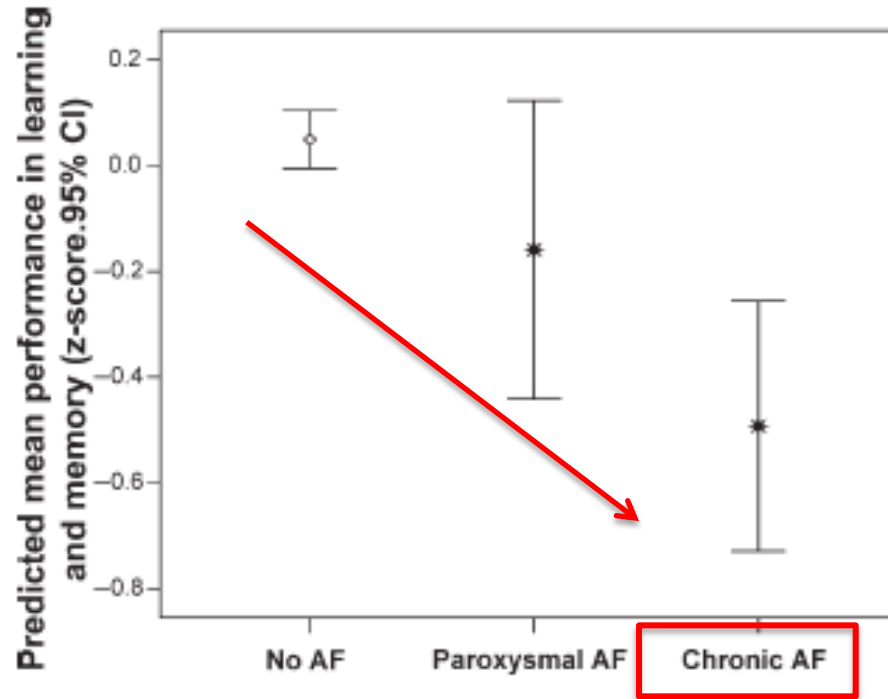
Stewart S et Al., Am J Med. 2002;113:359-364

Ricovero e Risorse

2004-2006

	Per-Patient Cost in AF Patients (US\$) (n=89 066)	Per-Patient Cost in Medically Matched Control Subjects (US\$) (n=89 066)	Incremental Per-Patient Cost in AF Patients (US\$)
Total costs	20 670	11 965	8705*
AF‡	1945	...	1945*
Other CV§	5824	2613	3211*
Non-CV	12 901	9352	3550*
Inpatient costs	7841	2622	5218*
AF‡	780	...	780*
Other CV§	3155	835	2321*
Non-CV	3905	1787	2118*
Outpatient medical¶	9225	5629	3596*
AF‡	972	...	972*
Other CV§	1576	678	898*
Non-CV	6677	4951	1726*
Outpatient pharmacy	3605	3714	-109*
AF‡	193	...	193*
Other CV§	1093	1101	-8†
Non-CV	2319	2613	-294*

Demenza Vascolare



Atrial fibrillation in stroke-free patients is associated with memory impairment and hippocampal atrophy

...Controversie



Rate VS Rhythm Control Strategy



Stroke/TIA Prevention



Hospitalization during an acute event

From “Babel Syndrome”

Treatment	Patients (N=1,068)	Interhospital Range (%)*
IV rate control drugs in ED (%)	54.9	37–65
If yes, drug used (N=586)		
Metoprolol	66.7	21–89
Diltiazem	30.9	11–77
Verapamil	1.4	0–6
Other	1.0	0–3
IV adenosine administered (%)	1.9	0–5
Cardioversion attempted in ED (%)	59.4	42–85
If yes, first approach used (N=634)		
Drug first	55.8	31–93
Electrical first	44.2	7–69
Rhythm control drugs in ED (%)	33.2	19–51
If yes, drug used (N=354)		
Procainamide	62.1	15–89
Amiodarone	15.0	7–32
Propafenone PO	8.8	0–22
Digoxin	1.4	0–6
Ibutilide	2.0	0–13
Magnesium	3.4	0–15
Successful conversion	38.4	33–54

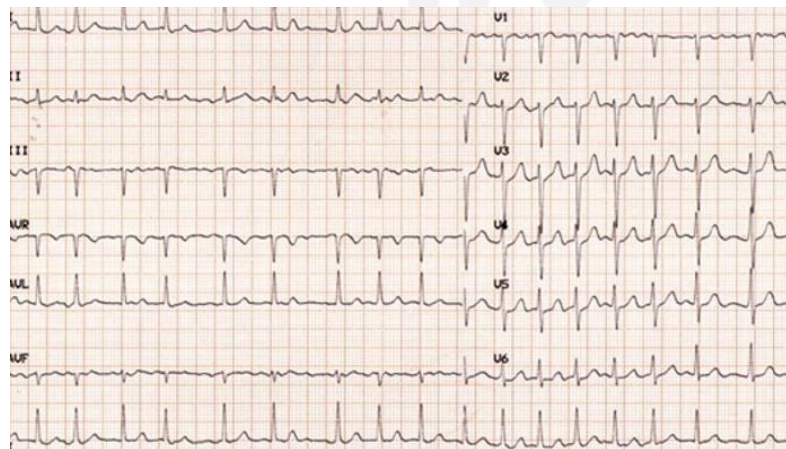


Studio

Obiettivo primario

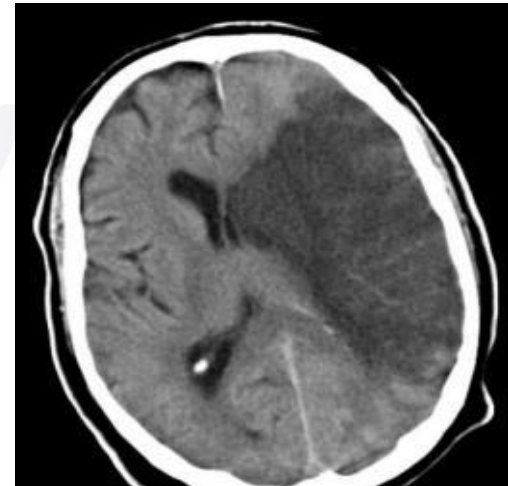


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Obiettivo Secondario

Fattori Predittivi a 1 anno dalla dimissione



Metodi

- Studio retrospettivo Monocentrico
- Gennaio 2013 a Dicembre 2014
- **449** Pazienti con diagnosi di Fibrillazione Atriale parossistica in dimissione
- Stratificazione in 3 Gruppi: CVF (Cardioversione farmacologica), CVS (Cardioversione Spontanea), SRC (Strategia Rate-Control)
- Identificazione eventi avversi a 30 giorni ed a 1 anno
- Identificazione fattori di rischio associati ed eventi avversi a 30 giorni ed a 1 anno

Criteri di Esclusione

- Flutter Atriale, TPSV, Fibrillazione atriale permanente, ecc.
- Fibrillazione atriale concomitante a patologia medica acuta
- Report Incompleti

Popolazione

<i>Clinica</i>	<i>CVF</i>	<i>CVS</i>	<i>SRC</i>	<i>Totale</i>	<i>P value</i>
Pazienti	215 (47.9%)	95 (21.1%)	139 (30.9%)	449	NS
<u>Età (aa)</u>	67.8 ± 10.9	69.2 ± 11.1	72.1 ± 9.5	70.5 ± 12.9	< 0.001
Sesso M (%)	125 (27.8%)	53 (11.8%)	83 (18.5%)	261 (58.1%)	NS
<u>Arr in PS mezzi prop (%)</u>	199 (44.3%)	87 (19.4%)	130 (28.9%)	416 (92.6%)	< 0.001
<u>PAS (mmHg)</u>	135 (114-149)	129 (110-136)	146 (137-152)	136 (116-151)	< 0.001
Freq Card (bpm)	110 (90-134)	115 (91-143)	116 (94-147)	114 (89-141)	NS
Freq Resp (atti/min)	20 (16-26)	17 (15-20)	18 (16-23)	19 (15-24)	NS
SpO2 (%)	98 (95-99)	97 (95-98)	97 (95-99)	97 (95-100)	NS
Temp Corp (° C)	36 (35-38)	36 (35-37)	36 (35-37)	36 (35-37)	NS
<u>Cardiopalmò (%)</u>	113 (25.2%)	51 (11.3%)	77 (17.1%)	241 (53.7%)	< 0.001
<u>Dol toracico (%)</u>	45 (10.0%)	17 (3.8%)	31 (6.9%)	93 (20.7%)	< 0.001
Dispnea (%)	52 (11.6%)	20 (4.4%)	34 (7.6%)	106 (23.6%)	NS
Astenia (%)	54 (12.0%)	25 (5.6%)	31 (6.9%)	110 (24.5%)	NS
Deficit neuro acuti (%)	9 (2.0%)	5 (1.1%)	6 (1.3%)	20 (4.4%)	NS
Sincope (%)	4 (0.9%)	2 (0.4%)	2 (0.4%)	8 (1.8%)	NS

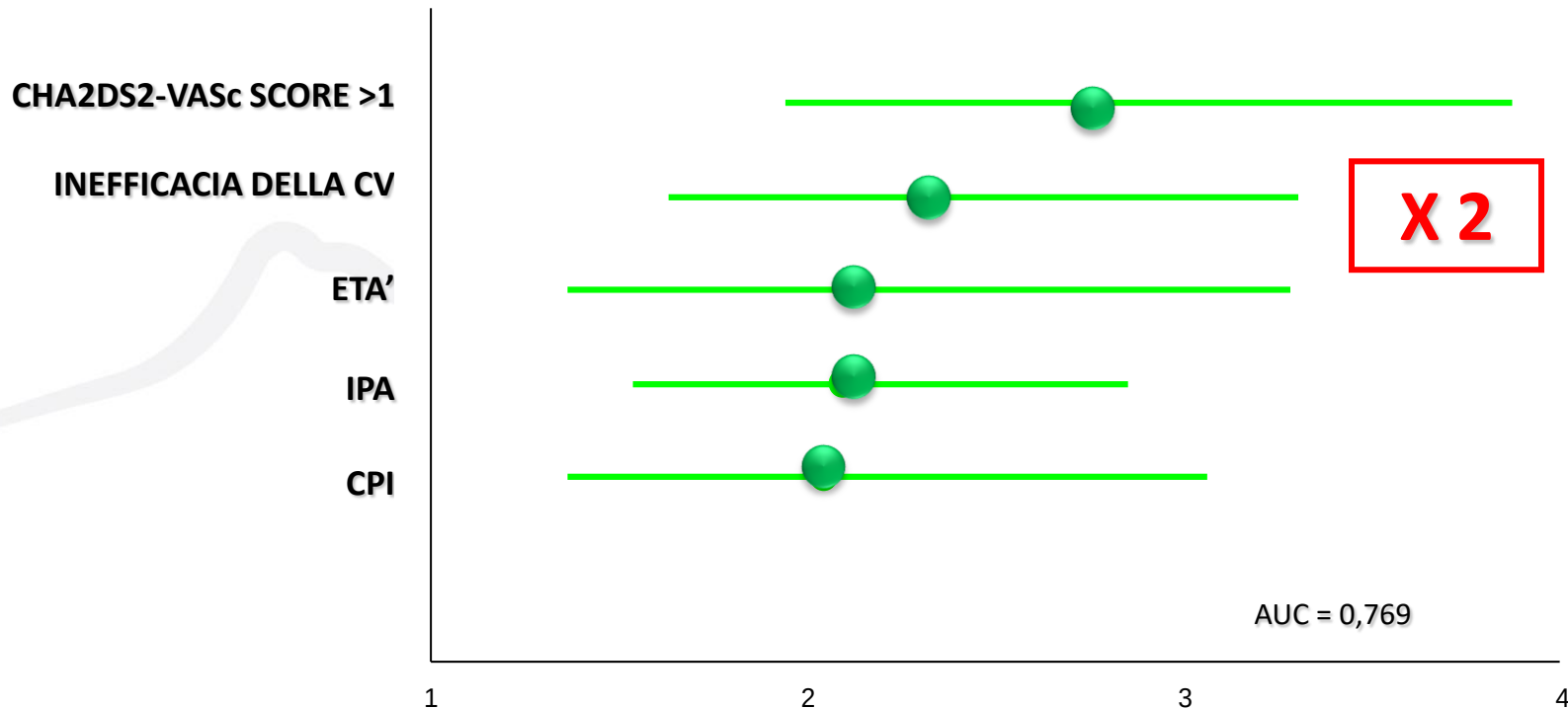
Popolazione

<i>Anamnesi</i>	<i>CVF</i>	<i>CVS</i>	<i>SRC</i>	<i>Totale</i>	<i>P value</i>
Pazienti	215 (47.9%)	95 (21.1%)	139 (30.9%)	449	NS
Iniz < 48 h (%)	85 (18.9%)	36 (8.0%)	55 (12.2%)	176 (39.1%)	NS
Iniz < 48 h anticoag (%)	19 (4.2%)	9 (2.0%)	12 (2.7%)	40 (8.9%)	NS
Iniz > 48 h (%)	56 (12.5%)	24 (5.3%)	35 (7.8%)	115 (25.6%)	NS
Iniz > 48 h anticoag (%)	55 (12.2%)	26 (5.8%)	37 (8.2%)	118 (26.3%)	NS
CHA2DS2-VASc 0	69 (15.4%)	6 (1.3%)	8 (1.8%)	83 (18.5%)	< 0.001
CHA2DS2-VASc 1	77 (17.1%)	35 (7.8%)	32 (7.1%)	144 (32.1%)	< 0.001
CHA2DS2-VASc ≥ 2	69 (15.4%)	54 (12.0%)	99 (22.0%)	222 (49.4%)	< 0.001
IPA (%)	74 (16.5%)	40 (8.9%)	129 (28.7%)	243 (54.1%)	< 0.001
CPI (%)	21 (4.7%)	8 (1.8%)	13 (2.9%)	42 (9.3%)	NS
FA Pregressa (%)	105 (23.4%)	46 (10.2%)	79 (17.6%)	230 (51.2%)	< 0.001
Scomp card (%)	11 (2.4%)	3 (0.7%)	16 (3.6%)	30 (6.7%)	NS
Malatt valv (%)	24 (5.3%)	10 (2.2%)	16 (3.6%)	50 (11.1%)	NS
Stroke/TIA (%)	17 (3.8%)	14 (3.1%)	6 (1.3%)	37 (8.2%)	NS
DM (%)	35 (7.8%)	16 (3.6%)	23 (5.1%)	74 (16.5%)	NS
Malat Tiroidea (%)	13 (2.9%)	6 (1.3%)	8 (1.8%)	27 (6.0%)	NS
BPCO (%)	34 (7.6%)	17 (3.8%)	33 (7.3%)	84 (18.7%)	NS
IRC (%)	6 (1.3%)	3 (0.7%)	6 (1.3%)	15 (3.3%)	NS

Outcome

	<i>CVF</i>	<i>CVS</i>	<i>SRC</i>	<i>Totale</i>	<i>P value</i>
Pazienti	215 (48%)	95 (21%)	139 (31%)	449 (100%)	
30-day Outcome (%)					
Stroke/TIA (%)	0 (0%)	0 (0%)	2 (0.4%)	2 (0.4%)	NS
Death (%)	1 (0.2%)	1 (0.2%)	3 (0.7%)	5 (1.1%)	NS
Stroke/TIA+Death (%)	1 (0.2%)	1 (0.2%)	5 (1.1%)	7 (1.5%)	NS
One-Year Outcome (%)					
Stroke/TIA (%)	1 (0.2%)	2 (0.4%)	7 (1.5%)	10 (2.2%)	NS
Death (%)	6 (1.3%)	2 (0.4%)	13 (2.9%)	19 (4.2%)	NS
Stroke/TIA+Death (%)	7 (1.5%)	4 (0.9%)	20 (4.4%)	29 (6.4%)	NS

Fattori predittivi



LA STRATEGIA TERAPEUTICA NON E' UN FATTORE PREDITTIVO

Punti Forti e Deboli

- Concordanza con la Letteratura Internazionale

La maggioranza dei pazienti (85%) sono stati dimessi a domicilio senza un aumentato rischio di eventi avversi seri a breve e lungo termine

- Studio retrospettivo

Bias di selezione

Numero del campione ancora poco adeguato

Take-Home Messages

- Il rischio di Stroke/Mortalità è **< 1% a 30 giorni** e **< 5% ad 1 anno** dalla dimissione
- La **strategia** di intervento adottata **non è** risultata un **fattore predittivo di Mortalità e Stroke** a lungo termine
- **Score predittivi** di rischio potrebbero essere utili nell'indirizzamento della **strategia di intervento**



Domande????

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