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Aortic stenosis and mitral regurgitation as predictors of atrial fibrillation

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Abstract

There is limited information about any association between the onset of atrial fibrillation and the presence of valvular disease. We retrospectively examined 940 patients in sinus rhythm, examined by echocardiography in 1996. During 11 years of follow-up, we assessed the incidence of atrial fibrillation and outcome defined as valvular surgery or death, in relation to baseline valvular function. In univariate analysis, the risk of developing AF was related to aortic stenosis and mitral regurgitation. Also the risk of valvular surgery or death was related to aortic stenosis and mitral regurgitation. In multivariate analyses, adjusting for sex, age, other valvular abnormalities, left ventricular ejection fraction and left atrial size – aortic stenosis was independently related to both endpoints, whereas mitral regurgitation was not independently related to either endpoint. In conclusion, aortic stenosis, but not mitral regurgitation, was independently predictive of development of atrial fibrillation and combined valvular surgery or death. In patients with combined aortic stenosis and mitral regurgitation, the grade of aortic stenosis, more than the grade of mitral regurgitation, determined the risk of atrial fibrillation and combination of valvular surgery or death. Further studies using contemporary echocardiographic quantification of aortic stenosis are warranted to confirm these retrospective data.

Biography

Veronica Widgren graduated from the Lund University, Sweden and has attained her M.D. degree in august 2010. She is currently working as a resident physician at the medicine clinic in the Varnamo hospital, Sweden. Her specializations are Internal medicine and Cardiology. She is a Member of Swedish Society of Cardiology. The area of her research is atrial fibrillation and its predictors. She has published her first research article “Aortic stenosis and mitral regurgitation as predictors of atrial fibrillation during 11 years of follow-up” at BMC Cardiovascular Disorders in October 2012.