

# Atrial fibrillation linked to increased hospitalization in heart failure patients

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Patients with atrial fibrillation, common in those with advanced chronic heart failure, have an increased risk of hospitalization due to heart failure, according to new research from researchers at the University of Alabama at Birmingham (UAB). The findings, published in June in the *European Heart Journal*, also suggest that atrial fibrillation is not associated with an increased risk of death in heart failure patients, contradicting previous assumptions.

"Our findings show that the presence of [atrial fibrillation](#) in heart failure patients did not increase their risk of death, as has been previously suggested, but did increase the risk of hospitalization due to worsening heart failure," said Mustafa Ahmed, M.D., a physician-scientist at the UAB American Board of Internal Medicine Research Pathway Program and the study's lead investigator.

Atrial fibrillation is a condition with irregular heart rhythm and is often accompanied by increased [heart rate](#).

"Importantly, atrial fibrillation significantly increased hospitalization due to heart failure only in patients not receiving a beta-blocker or drugs that block the beta-receptors in the heart but not in those receiving a beta-blocker," said Ali Ahmed, M.D., MPH, associate professor in the division of gerontology, geriatrics and palliative care medicine, director of UAB's Geriatric Heart Failure Clinic and the study's senior investigator. "In patients with heart failure and atrial fibrillation, beta-blockers, which help reduce heart rate, may be useful in reducing the

risk of hospitalization due to worsening heart failure."

Ahmed and colleagues matched 487 pairs of heart failure patients with and without atrial fibrillation from the Beta-Blocker Evaluation of Survival Trial. All-cause mortality occurred in 38 percent of the patients with atrial fibrillation against 37 percent of patients without. However, 44 percent patients with atrial fibrillation were hospitalized for worsening [heart failure](#) over the course of the trial, against only 38 percent without.

Source: University of Alabama at Birmingham ([news](#) : [web](#))

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