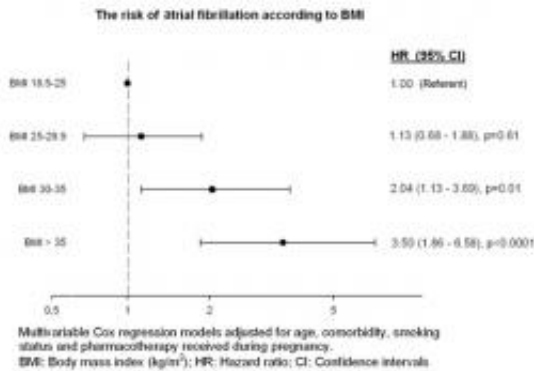


Obesity triggers AF in fertile women

August 27 2012



Obesity triggers atrial fibrillation in fertile women, according to research presented today at the ESC Congress 2012 by Dr Deniz Karasoy from Denmark.

Atrial fibrillation and obesity are among the largest public health related challenges in the western world today. Atrial fibrillation is the commonest [heart rhythm disorder](#) and is associated with increased mortality and morbidity. Previous studies have demonstrated that obesity increases the risk of new-onset atrial fibrillation in individuals with known risk factors for developing atrial fibrillation such as advanced age or cardiovascular comorbidity.

Atrial fibrillation is rare in young, healthy individuals and precipitating factors remain controversial. A growing body of evidence suggests that

[genetic predisposition](#), inflammation, obstructive sleep apnea, [excessive alcohol consumption](#), and excessive physical exercise may cause atrial fibrillation in these individuals. However, it is unknown whether obesity increases the risk of atrial fibrillation in young people without other risk factors. The aim of this study was to use the unique opportunity provided by the consistency of nationwide registers of childbirth and hospitalization in Denmark to examine the risk of atrial fibrillation related hospitalizations with respect to [body mass index](#) (BMI) among [fertile women](#).

The present study was a register-based nationwide cohort study, comprising a population of approximately 271,000 seemingly healthy Danish women aged 20-50 years who had given birth during 2004-2009. They were followed for an average of 4.6 years.

The researchers adjusted the results for age, comorbidities, smoking status and pharmacotherapy received during pregnancy. They found that compared to healthy weight women with a body mass index (BMI) of 18.5-25 kg/m², the risk of developing atrial fibrillation was 2-fold higher in obese (BMI: 30-35 kg/m²) and more than 3-fold higher in very obese (BMI > 35 kg/m²) women.

The hazard ratio for [obese women](#) was 2.04 (CI=1.13-3.69; p=0.01) and for very obese women was 3.50 (CI=1.86-6.58; p

Citation: Obesity triggers AF in fertile women (2012, August 27) retrieved 2 May 2024 from <https://medicalxpress.com/news/2012-08-obesity-triggers-af-fertile-women.html>

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