

New onset, post-op atrial fibrillation ups mortality

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(HealthDay)—New onset postoperative atrial fibrillation (POAF) is associated with worse patient outcomes, including increased risk-adjusted mortality, according to a study published in the August issue of *The Annals of Thoracic Surgery*.

Damien J. LaPar, M.D., from the University of Virginia in Charlottesville, and colleagues examined the risk-adjusted impact of POAF. They extracted 49,264 patient records from a multi-institutional Society of Thoracic Surgeons (STS) certified database for cardiac operations, performed from 2001 to 2012, and characterized them according to the presence of POAF (19 percent) versus non-POAF (81 percent).

The researchers found that patients who developed POAF had higher



mean age and median STS-predicted mortality risk (2 versus 1 percent; P aortic valve replacement plus <u>coronary artery bypass</u> grafting, aortic valve, and mitral valve replacement operations had the highest rate of POAF. POAF correlated with increased odds of mortality (adjusted odds ratio, 2.04; P intensive care unit hours, three extra hospital days, and increased intensive care unit and total hospital-related costs (\$3,000 and \$9,000, respectively; all P

"Protocols to reduce the incidence of POAF have the potential to significantly impact <u>patient outcomes</u> and the delivery of high-quality, cost-effective patient care," the authors write.

One author disclosed financial ties to the medical device industry.

More information: Abstract

Full Text

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