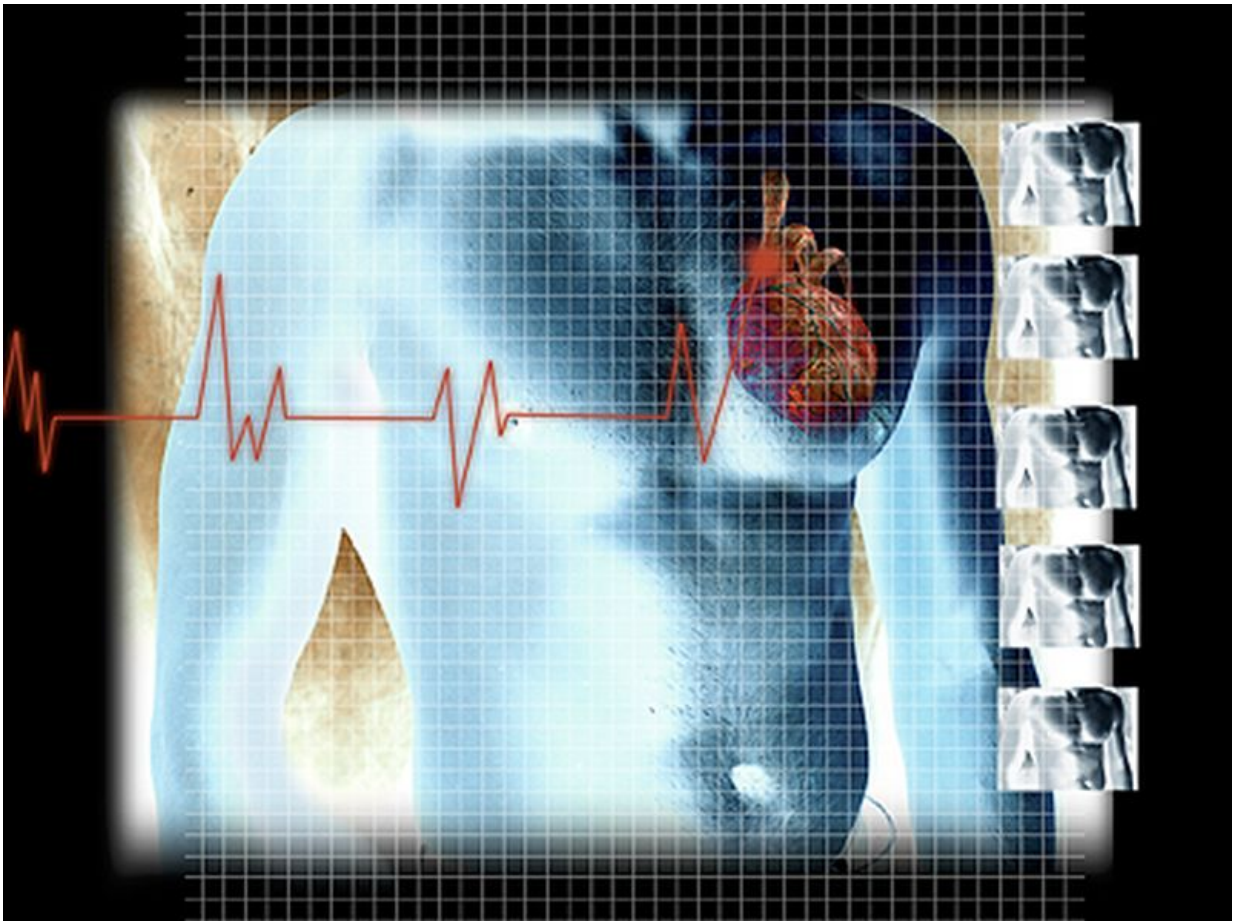


# Distinct demographics for persistent A-fib from onset

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(HealthDay)—Patients with persistent atrial fibrillation (AF) from the

onset (PsAFonset) have distinct demographics and poorer clinical outcome, according to a study published online March 23 in *JACC: Clinical Electrophysiology*.

Han S. Lim, M.B.B.S., Ph.D., from the Hôpital Cardiologique du Haut-Lévêque in Bordeaux, France, and colleagues enrolled [patients](#) referred for PsAF ablation from three centers. They compared 129 consecutive patients with PsAFonset with 231 patients with PsAF that progressed from paroxysmal AF. In addition, they characterized AF drivers using noninvasive mapping in 90 patients (30 PsAFonset and 60 controls).

The researchers found that patients with PsAFonset were younger, more obese, more often males, more often had hypertension, and had larger left and right atria. PsAFonset patients had a shorter AF-cycle-length, higher degree of fractionation, and lower endocardial voltage. A significantly higher number of reentrant driver regions and extra-pulmonary vein regions harboring reentrant drivers was seen among PsAFonset patients; in contrast, more focal driver regions were seen among controls. The PsAFonset group had lower acute AF termination rate. Patients with PsAFonset had significantly higher AF, atrial tachycardia (AT), and AF/AT recurrence rates during a mean follow-up of  $17 \pm 11$  months from the last procedure.

"The findings highlight the importance of defining criteria for early detection of atrial substrate disease," the authors write.

Several authors disclosed financial ties to the pharmaceutical, medical device, and medical technology industries.

**More information:** [Full Text \(subscription or payment may be required\)](#)

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