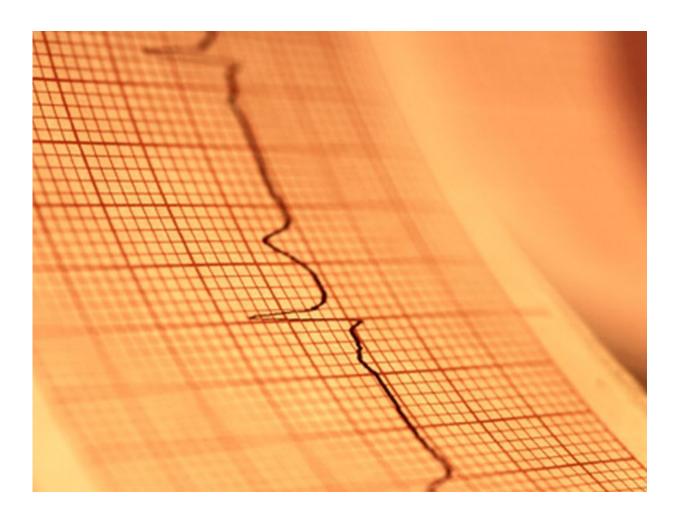


A-fib tied to adverse outcomes in patients undergoing PCI

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(HealthDay)—For patients undergoing percutaneous coronary



intervention (PCI), atrial fibrillation (AF) is associated with in-hospital adverse outcomes, according to a study published in the Aug. 30 issue of the *Journal of the American College of Cardiology*.

Nadia R. Sutton, M.D., M.P.H., from the University of Michigan in Ann Arbor, and colleagues used a prospective multicenter registry to examine the correlation between AF and in-hospital adverse outcomes after PCI. Data were included for 113,283 PCI cases from 47 hospitals.

The researchers found that 12 percent of patients had a history of AF, which varied by institution (2.5 to 18.4 percent). Patients with a history of AF were older at baseline and more likely to have comorbid congestive heart failure, cardiomyopathy, cerebrovascular disease, and chronic lung disease. In-hospital complications, including in-hospital mortality (3 versus 1 percent), were more likely for those with a history of AF. Treatment with a bare-metal stent was more likely for patients with a history of AF in propensity-matched analysis (27 versus 18 percent). Independent associations remained between AF and an increased risk of developing post-procedural bleeding, heart failure, cardiogenic shock, and in-hospital mortality in the propensity-matched model (odds ratios, 1.32, 1.33, 1.26, and 1.41, respectively).

"AF is common among patients undergoing PCI," the authors write. "AF is associated with older age, the presence of other comorbidities, and independently associated with in-hospital post-procedural <u>heart failure</u>, cardiogenic shock, and mortality."

One author disclosed financial ties to Osprey Medical and Blue Cross Blue Shield of Michigan.

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