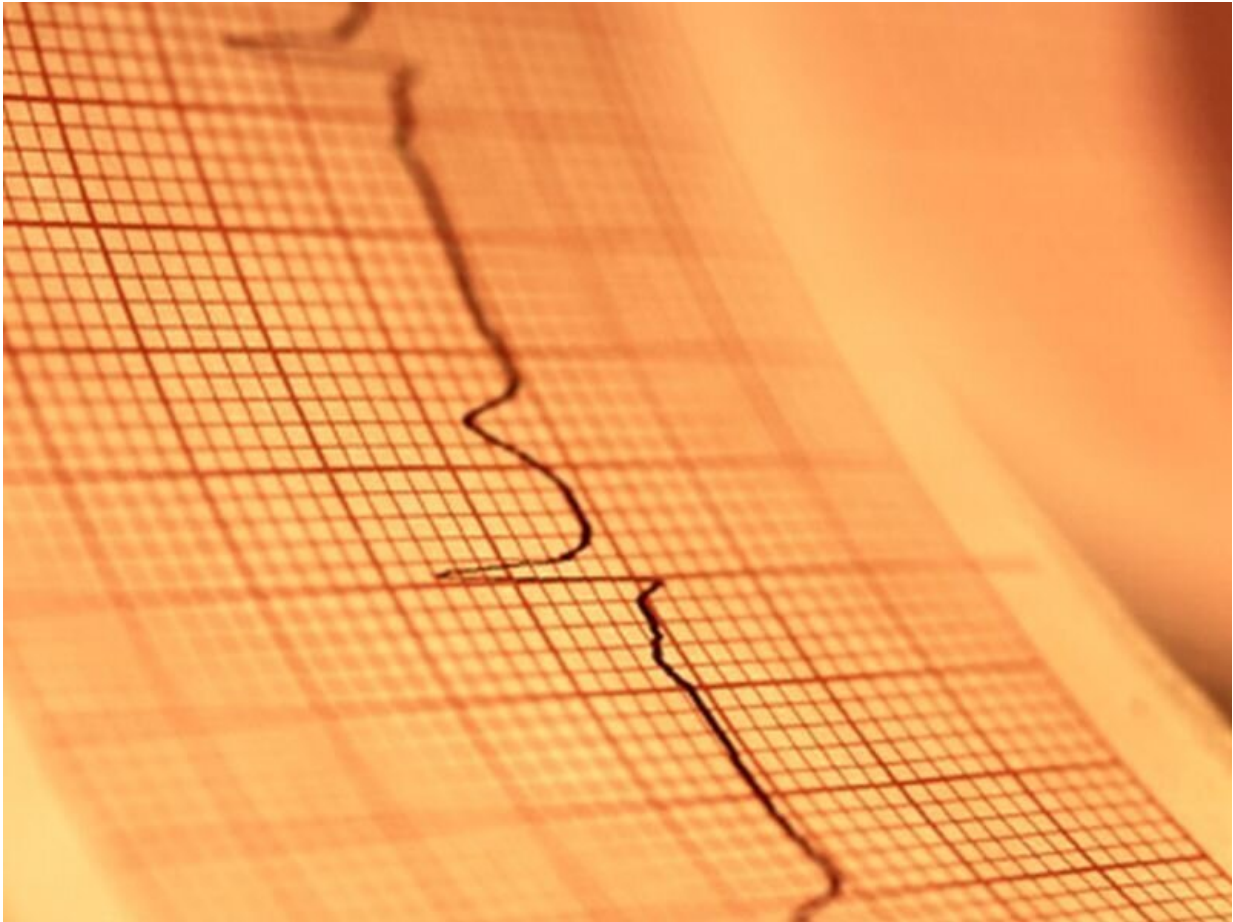


Got A-fib? It could heighten COVID risks

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a heart

(HealthDay)—Two preliminary studies offer mixed news for heart patients who fall ill with COVID-19: Those on certain blood pressure-lowering drugs are not at increased risk of dying, but those with atrial

fibrillation (a-fib) may be.

In one study, researchers reviewed records from nearly 400 COVID-19 patients who were hospitalized at their center between March and June 2020. The investigators found that those who suffered an a-fib episode during their stay had a substantially worse prognosis—being more likely to develop heart or kidney complications, or to die.

For people with a history of a-fib, the findings underscore the importance of COVID-19 prevention, said lead researcher Dr. Zaniar Ghazizadeh.

That means the people around them must be vigilant, too, said Ghazizadeh, a resident at Yale New Haven Hospital/Yale School of Medicine in Connecticut.

"Everyone in the community needs to be very careful to prevent the spread of COVID, by wearing masks and social distancing," he said.

And there's a good chance people will encounter someone with atrial fibrillation—a condition that affects between 3 million and 6 million Americans, according to the U.S. Centers for Disease Control and Prevention. It arises when the heart's upper chambers (the atria) beat erratically instead of maintaining a normal rhythm, which can either happen intermittently or be permanent.

In the new study, 20% of patients hospitalized with COVID-19 suffered an a-fib episode. Many had a history of the condition, but not all.

And, overall, their risks of other complications and death were heightened: More than half had a [heart attack](#), compared to 30% of patients who did not have in-hospital a-fib. And one-third developed heart failure, versus 9% of other COVID-19 patients.

Patients with in-hospital a-fib were also 2.5 times more likely to die or go into hospice.

Ghazizadeh is scheduled to present the findings at the American Heart Association's annual meeting, being held online Nov. 13 to 17. Studies reported at meetings are usually considered preliminary until they are published in a peer-reviewed journal.

Why did so many COVID-19 patients have an a-fib episode?

Ghazizadeh said various factors can trigger the arrhythmia. It's known that more-severe COVID-19 can cause widespread inflammation throughout the body, he noted, so that is one likely trigger.

Similarly, there are a few reasons why COVID-19 patients who suffer an a-fib episode have a worse outlook. For one, Ghazizadeh said, the a-fib might be a manifestation of a particularly severe infection.

But the arrhythmia, itself, may worsen damage to other organs, too.

"When [a-fib] happens, the heart isn't beating efficiently," Ghazizadeh said. That means [blood flow](#) is impaired, which can worsen fluid buildup in other organs.

Ghazizadeh said it's important for hospital staff to closely monitor heart rhythm in COVID-19 patients with a history of a-fib.

Dr. Mitchell Elkind is president of the heart association and a professor at Columbia University in New York City. He said SARS-CoV-2 is clearly more than a respiratory infection.

"The [coronavirus](#) can infect not only the lungs, but also the heart, the linings of the blood vessels, and potentially other organs throughout the body, as well," Elkind said.

That's the bad news. A separate study to be presented at the meeting highlighted some reassuring news.

Looking at 17 studies, researchers found that people on two common types of heart medication—ACE inhibitors and angiotensin-receptor blockers (ARBs)—were not at increased risk of testing positive for COVID-19. And when they did fall ill, they were at no greater risk of dying compared with patients not taking the medications.

ACE inhibitors and ARBs are prescribed for conditions like high [blood pressure](#), heart failure and chronic kidney disease.

Early in the pandemic, there was speculation that the drugs might make people vulnerable to COVID-19. That was based on animal research suggesting the drugs boost activity of ACE2 receptors on body cells. The coronavirus latches onto those receptors to enter cells.

Elkind said the new analysis confirms, in a large group of patients, the safety of the drugs. In fact, when researchers focused only on COVID-19 patients with [high blood pressure](#), use of ACE inhibitors and ARBs was linked to a lower risk of death.

Stopping the medications could put people at risk by allowing their blood pressure to rise, Elkind said.

"It's very important if people have controlled blood pressure to continue keeping it under control," he added.

More information: The American Heart Association has more on [heart disease and COVID-19](#).

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