

Five-minute test during routine GP appointments could prevent stroke

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People at risk should be tested for atrial fibrillation every time they attend a health appointment, according to results of the AFFECT-EU project, which is holding its final event today in Brussels, Belgium. Patients at high risk of the disorder, such as those with heart failure or prior stroke, should be invited for a screening test.

Scientific coordinator Professor Renate Schnabel of the University Hospital Hamburg-Eppendorf, Germany, said, "Screening for atrial fibrillation can identify undiagnosed atrial fibrillation so that the condition can be managed according to guidelines, including starting anticoagulation medication to prevent strokes. AFFECT-EU has concluded that opportunistic screening, where at-risk groups are screened when they contact the health care system, plus targeting patients at particular risk, may be a productive and cost-effective way to implement screening across Europe."

Atrial fibrillation is the most common heart rhythm disorder globally. The number of adults aged 55 years and older living with the condition in the European Union is expected to more than double from 8.8 million in 2010 to 17.9 million by 2060. People with atrial fibrillation are up to five times more likely to have a [stroke](#) than their healthy peers. The disorder often has no symptoms and remains undiagnosed until a stroke occurs.

The four-year project brought together health care professionals, patient representatives, payers, and industry in a consortium of 26 partners, including the European Society of Cardiology (ESC), to define a feasible atrial fibrillation screening strategy for health care systems across Europe, with the ultimate aim of preventing subsequent strokes and premature death.

The consortium identified the ability of atrial fibrillation screening to reduce strokes in a contemporary meta-analysis of 35,836 participants.

A further study by the consortium in 11 European countries found that there were no national screening programs, and most atrial fibrillation was detected in patients with symptoms. But in a survey conducted by the group in 18 European countries, GPs said screening for atrial fibrillation was nearly as important as screening for common cancers.

A subsequent analysis by project members demonstrated that screening results in savings of stroke-related costs regardless of the method (e.g., opportunistic or targeted). Project members then developed a budget impact analysis calculator that health regulators and payers can use to estimate the [financial impact](#) of implementing a screening program over a five-year period.

Regarding who is at elevated risk of atrial fibrillation or stroke and should therefore be screened, studies by consortium members identified that the following are [risk factors](#): increasing age, obesity, [high blood pressure](#), and high blood levels of N-terminal pro-B-type [natriuretic peptide](#) (NT-proBNP), which is commonly tested to diagnose [heart failure](#).

Project manager Daniel Engler of the University Hospital Hamburg-Eppendorf, Germany, said, "People with atrial fibrillation are more likely to be severely disabled or die from a stroke or heart failure than those without atrial fibrillation, making prevention an imperative to reduce morbidity and maintain a high quality of life."

"AFFECT-EU has paved the way for well-implemented atrial fibrillation [screening](#) programs to increase the number of new diagnoses, leading to guideline-adherent care, thereby reducing stroke risk and [atrial fibrillation](#) disease burden."

Provided by European Society of Cardiology

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