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P wave duration index is associated with silent atrial fibrillation in patients with cardiac resynchronization therapy

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Aim: Atrial fibrillation (AF) episodes can be silent, symptomatic or emerged with its complications in the pacemaker implanted patients. The aim of this study was to investigate the relation between P wave duration index (PWDI) and silent AF occurrence in paintets with cardiac resynchronization therapy (CRT).

Methods: The study population consisted of 181 CRT device implanted patients. The AF episodes that lasts at least 30 seconds with no symptoms were accepted as silent AF. PWDI is calculated by dividing the P wave duration by the PR interval.

Results: Patients were separated into two groups as "with silent AF" and "without silent AF". Without silent AF group had 121 patients (mean age 62.9 ± 8.7 years, 62% male). With silent AF group had 60 patients (mean age 67.9 ± 9.7 years, 60% male). Patients with silent AF had a significantly higher mean age (p=0.001). PR duration was significantly higher in patients without silent AF (p=0.001). First degree IAB and PWDI values were significantly higher in patients with silent AF (p values were 0.001 and <0.001 respectively). Age (OR: 1.073, %95 CI:1.028-1.119,p=0.001) and PWDI (OR:1.053, %95 CI:1.028-1.078, p<0.001) were detected as independent predictors for silent AF in multivariate logistic regression analysis. In the ROC analysis, the cut off value of PWDI was determined as 0.67 to detect silent AF episodes with 81.7% sensitivity and 50.4% specificity (AUC:0.701, p<0.001).

Conclusion: PWDI and age significantly associated with silent AF in patients with CRT. PWDI can be considered to be a useful and easily applicable parameter to predict patients who will develop sient AF.

Biography

Onur Kaypakli is currently working as an Assistant Professor of Cardiology in the Department of Cardiology at Mustafa Kemal University, Faculty of Medicine - Hatay, Turkey.

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