

COVID-19 and New-Onset Atrial Fibrillation



During the COVID-19 pandemic lockdowns, all non-critical appointments in hospitals have been postponed, and GPs and private specialists are only seeing patients with the most urgent needs. The priority for most healthcare facilities has been managing and treating COVID-19 patients. However, while this is going on, there are reports of reduced volumes of patients with non-infectious disease.

Atrial fibrillation is one of the most common cardiovascular conditions. Accurate and early treatment is critical for patients with this condition. What are the consequences of a national lockdown on patients with AF?

A new study was conducted with patients in Denmark to determine the incidence, patient characteristics and related events associated with new-onset atrial fibrillation during the COVID-19 lockdown. The study included patients between 18-90 years who had received a new-onset AF diagnosis during the first three months of 2019 and 2020. Patients diagnosed during the lockdown (March-April) were compared with the group of patients diagnosed a year earlier. Specifically, there were two main study periods. The first was from January 1 and January 2 through April 1 for 2019 and 2020, and the second was from March 12, 2020, through April 1, 2020. Data from 2019 and 2020 corresponding periods were compared, and corresponding weeks in 2017 and 2018 were also assessed to ensure that no generalisations were made.

Findings from the study showed that there was a lower incidence of new-onset AF during the three weeks of lockdown in 2020 compared with the same time period in 2019. Overall, there was a 47% drop in total numbers. Patients who were diagnosed during the lockdown period were younger, and there was a greater prevalence of patients with a history of cancer, heart failure and vascular disease. 5.3% of patients with new-onset AF suffered an ischaemic stroke during the lockdown, and 2.7% died compared to 4.3% and 1.3% patients during the corresponding period in 2019.

Study results show that there was a 47% drop in registered new-onset AF cases following the lockdown in Demark. It is believed that in case of a prolonged lockdown or subsequent lockdowns, the risk of undiagnosed AF patients developing complications could increase, and this could translate into poorer outcomes in these patients during the COVID-19 pandemic. While the study did not find any statistically significant evidence of higher odds of suffering a related event during the lockdown period, the researchers encourage further investigation and emphasise the need to exercise caution when managing patients with cardiovascular disease.

Source: European Heart Journal

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Published on : Thu, 9 Jul 2020