ABSTRACT

“CLINICAL AND ECHOCARDIOGRAPHIC PROFILE OF ATRIAL FIBRILLATION”

BACKGROUND:

Atrial fibrillation (AF) is the most commonly encountered cardiac arrhythmia in clinical practice. Approximately, it accounts for 33% of arrhythmia related hospitalizations. It is a supraventricular tachyarrhythmia characterized by uncoordinated atrial activation leading to deterioration of mechanical function of the atria. Recognition of this disorder is important because it is associated with significant morbidity and mortality.

STUDY:

To analyse the etiological factors, clinical presentation, echocardiographic features and complications of 100 cases of atrial fibrillation.

METHOD:

A cross sectional study was conducted with a sample of 100 patients with atrial fibrillation at Institute of Internal Medicine, RGGGH for a period of six months and the clinical and echocardiographic profile was analysed.

RESULTS

The mean age of atrial fibrillation was 49 years, males and females being equally affected. Dyspnea was the most common presenting symptom, seen in 81% of patients followed by palpitation. Rheumatic heart disease (RHD) was the most common etiological factor, observed in 45% of patients followed by hypertension and coronary artery disease. Predominant valve affected is the mitral valve both in isolation and in combination. Heart failure was the complication in 32% followed by thromboembolism in 14%. Stroke was more common than peripheral embolism. The presence of clot on echo increased the risk of thromboembolism. Higher heart rate >
140/min a risk factor for clot formation. Left atrial enlargement had a higher incidence of clot on echocardiography and a higher incidence of ischemic stroke.

CONCLUSION:

Meticulous evaluation of risk factors and prompt treatment will reduce the complications, morbidity and mortality. Better recognition of clinical epidemiology of AF, along with an improved appreciation of the underlying mechanisms, is essential for development in improved methods for AF prevention and management.

KEY WORDS: Tachyarrhythmia, Dyspnea, Thromboembolism, Echocardiography