

Stroke, A-fib recurrence low at one year after AF ablation

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0.001). There was no difference in CHADS2, CHADS2-VASc-Score, or AF recurrence in patients with versus without stroke. Patients who experienced stroke had a trend toward a higher percentage of [coronary artery disease](#) (50 versus 10 percent; P = 0.057).

"The overall risk of stroke and AF recurrence is low in patients with a recurrence free interval of at least 12 months after AF ablation," the authors write. "Of note, recurrence of AF was not associated with a higher risk of stroke in our study population."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Stroke and atrial fibrillation (AF) recurrence are low one year after AF ablation, according to a study published online Dec. 9 in the *Journal of Cardiovascular Electrophysiology*.

Simon Kochhäuser, M.D., from Southlake Regional Health Centre in Newmarket, Canada, and colleagues examined the frequency of [stroke](#) and AF recurrence in [patients](#) on and off therapeutic oral anticoagulation (OAC) one year after AF ablation. A total of 398 patients were identified from an AF database and were screened for AF recurrence, changes in OAC or antiarrhythmic medication, and the occurrence of stroke or [transient ischemic attack](#).

The researchers found that OAC was discontinued in 69.3 percent of patients. During a median follow-up of 529 days, the researchers found that 1 percent of patients suffered from stroke and 13.8 percent experienced AF recurrence. The chance of AF recurrence was increased in association with persistent AF (49.1 versus 26.8 percent; P =

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