

Background:

Atrial fibrillation is a common reason for consulting the Emergency Department, which requires rapid and effective treatment, mainly in cases associated with hemodynamic instability, taking into account special conditions such as structural heart disease.

OBJECTIVE:

To assess in patients with structural heart disease who need control at sinus rhythm those who underwent pharmacological cardioversion, the efficacy and type of antiarrhythmic drugs used.



Patients & Methods :

Descriptive, observational, retrospective study in an emergency service that attends to a population of 200,000 inhabitants and 275 emergencies / day in which all patients diagnosed with atrial fibrillation (AF) who consulted in the period of January 1 were selected. 2017 to June 26, 2017 that presented previous structural cardiopathy measured by previous echocardiography up to 2 years previously, fulfilling the inclusion criteria 240 patients.

Variables under study: presence of structural heart disease, pharmacological cardioversion (FVC) performed, efficacy of FVC, antiarrhythmic drug used.

Results & discussion :

During the period studied in 2017, 240 patients were consulted in our Emergency Department who were diagnosed with AF, of whom 31.25% had structural heart disease. Among them, in order of frequency, 30.41% had valve heart disease, 27% dilated, 27% hypertrophic and 6.25% ischemic. Of the total percentage of structural heart diseases, 62.67% of the rhythm control required FVC to be effective in 72.34% of the cases. Of these, 82.35% were treated with Flecainide being effective in 71.43%, 38.24 %%, with Amiodarone being effective in 61.65% and 17.64 %% with Vernakalant being effective in 83.33%.

Conclusion & perspectives :

- In approximately more than 50% of patients with structural heart disease treated with FVC, the antiarrhythmic of choice was Flecainide in accordance with clinical practice guidelines.
- Approximately one third of heart diseases were hypertrophic, another third valvular and another third dilated as shown in the literature.
- Some patients were treated with Vernakalant as an alternative to Flecainide for FVC of patients with AF as supported by clinical practice guidelines in patients with mild HF (NYHA I-II), including patients with ischemic heart disease, provided that present hypotension or severe aortic stenosis.

KEYWORDS:

Atrial Fibrillation, Muscular Dystrophy, Emery-Dreifuss, History Taking, Medical