

How to discover and confirm the existence of paroxysmal, persistent and permanent atrial fibrillation

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Atrial fibrillation (AF) is the most common sustained arrhythmia, and its prevalence increases with age. In those aged 60 or older, screening studies reveal the prevalence (in AF at time of screening) to be 4-6%. However, the true incidence of AF remains unclear because most of the patients had no symptoms of palpitations or the elevation of resting heart rate. AF is associated with increased morbidity and mortality including a 5-fold increased risk of stroke and a 2-fold increased risk of mortality. Since many with AF are asymptomatic, presentation with a complication such as stroke may be the first manifestation of this arrhythmia. In up to one quarter of cases of ischemic stroke, a cause is not found and subclinical AF is a likely etiological factor. Therefore, advanced screening tools are necessary to improve the detection of AF and improve the rate of anticoagulant treatment to prevent AF related thromboembolism.