The outcome in patients with acute ischemic stroke associated with nonvalvular atrial fibrillation—previously on oat or without

Radmila Amanovic Curuvija¹, Dragana Kosevic², Irena Grkic¹, Sanja Atic¹, and Vesna Miletic¹

¹Neurology, Hospital for cerebrovascular diseases Sveti Sava, Serbia
²Cardiology, Institute for cardiovascular diseases Dedine, Serbia
Correspondence: rcuruvija@gmail.com

Background: Management of non-valvular atrial fibrillation (NVAF) focuses on the use of anticoagulation to decrease the risk of acute ischemic stroke (AIS). Until recently, vitamin K antagonist (VKA) treatment was considered the standard of care, with the emergence of non-VKA oral anticoagulants (NOACs) shifting treatment practice. The question is: what is happening in everyday practice?

Methods: To assess the impact of the oral anticoagulant therapy (OAT) to stroke prevention in NVAF, we identified prospectively for six month period in 2015 year, all patients with NVAF and AIS who was previously on OAT or without. The previous clinical studies included in the systematic review of AIS risk factors identified history of AIS, increasing age, hypertension and structural heart disease to be good predictors of AIS risk in NVAF patients.

Results: In our data, 199 patients was referred to our Institution due to AIS associated with NVAF, and among them were 115 (57.7%) female and 84 (42.3%) male. Mean age was 77.2 years (44-102 years). Among them 49 (24.6%) patients was previously on OAT. In the group of patients who was on OAT, died 14 (7.03%) patients, and in other group-without OAT, died 36 (18.09%) patients. In group with OAT 18 patients had previously AIS.

Conclusion: In everyday practice OAT prescription for NVAF in prevention of AIS is extremely low and cannot be scientifically explained in light of well known guidliness. In our data, we proved benefit with OAT in prevention AIS in patients with NVAF.

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