

GENDER-BASED STROKE RISK IN PATIENT WITH ATRIAL FIBRILLATION AND HEART FAILURE TREATED WITH MINERALOCORTICOID RECEPTOR ANTAGONIST



Paghdar S, MBBS*, Desai S, MBBS*, Ruiz J, MD*, Malkani S, MD*, Goswami R, MD*
*Division of Heartfailure and transplant, Mayo Clinic in Florida

BACKGROUND

Atrial fibrillation (AF) is the most common cardiac arrhythmia detected in hospitalized patients. It is independently associated with an increased risk of stroke. Anti-fibrotic properties of mineralocorticoid receptor antagonists (MRA) have been proposed to modulate AF burden. Gender differences in patients with AF exist within the epidemiology and causative mechanisms to outcomes and complications. We compared men and women with known AF while treated with MRA to assess potential differences in stroke rate.

METHOD

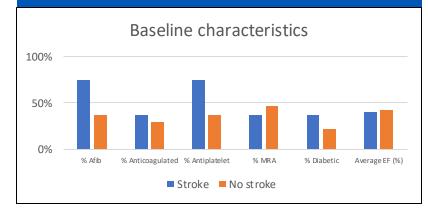
We performed a retrospective chart review of all patients with confirmed HF and AF diagnoses after IRB approval. Patient data were extracted from electronic medical records. Patients with AF and HF treated with MRA were included in this study.

Central Message

Men were more likely to have AF and stroke compared to females with HF on MRA therapy.

Males were more likely to be hypertensive, which may relate to increased stroke rate in this patient population.

Increased awareness of the genderbased prevalence of stroke rate in patients with HF and AF may allow for earlier recognition and reduction in stroke events.



RESULTS

A total of 64 patients with HF and AF treated with MRA were reviewed between January 2021 to September 2022. 34 were male, and 30 were female. Females were younger, 66 years (57 -74) compared to males, 73 years (60 - 78), p=.13. The median ejection fraction was similar among women, 42% (31 - 50) compared to men, 41% (33 - 49), p = .43. A significantly higher incidence of atrial fibrillation was found in our male group (59%) compared to the female group (30%), p=.02. There was no significant difference in MRA or anticoagulation use between male and female patients (p = .11, p = .12 respectively). More men had strokes compared to females (16% vs. 26% p = .17). Men were also more likely to be hypertensive compared to females (47% vs. 25%, p<.01).

CONTACT INFORMATION

Rohan M. Gosw ami, MD Consultant Mayo Clinic in Florida Gosw ami.rohan@mayo.edu 904-956-3272

DISCLOSURE INFORMATION

Authors have no relevant financial disclosures.