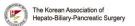


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Risk Of New-onset Atrial Fibrillation Among Heart, Kidney And Liver Transplant Recipients: Insights From A National Cohort Study

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Background: The objective of the study was to explore the incidence of atrial fibrillation (AF) in various populations of patients with organ transplantation (OT).

Methods: We used a large national data set from Taiwan to investigate the incidence of AF after OT. Frequency matching method used to match controls: OT patients were 4:1. Kaplan–Meier analyses with the use of the Aalen–Johansen estimator was employed for estimating the cumulative incidences of new–onset AF. The Fine–Gray competing risks model was also employed to analyze the risk of AF for the OT cohort compared with the non–OT cohort. 6955 OT patients and 27,820 controls were included in this study.

Results: OT did lead to a 3.09-fold risk for AF [95% confidence interval (CI) = 2.07-4.62], especially in the subgroup of female gender [adjusted subhazard ratio (aSHR) = 6.66, 95% CI = 3.85-11.5], age ≤ 49 years (aSHR = 8.19, 95% CI = 3.99-16.8) and without comorbidity (aSHR = 4.61, 95% CI = 2.71-7.87). Moreover, liver recipients tended to be more likely to develop new-onset AF among those OT patients (aSHR = 4.07, 95% CI = 2.63-6.30) as compared to the controls. This study demonstrates an increased incidence of AF after OT.

Conclusions: Heightened awareness and clinician vigilance are warranted to facilitate early diagnosis and improved outcomes.

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