

## PS2.012

### Management of atrial fibrillation in family medicine practice

*Olivera Batic-Mujanovic(1), D Kamberovic(2), L Gavran(3), M Becirovic(4), E Alibasic(5)*

*(1) Family Medicine Teaching Center Tuzla; Tuzla University, Bosnia and Herzegovina*

*(2) Health House Zivinice, Bosnia and Herzegovina*

*(3) Family Medicine Teaching Center, Health House Zenica, Bosnia and Herzegovina*

*(4) Health House Banovici, Bosnia and Herzegovina*

*(5) Health House Kalesija, Bosnia and Herzegovina*

*Corresponding author: Associate Professor Olivera Batic-Mujanovic, Family Medicine Teaching Center, Health House Tuzla; Department of Family Medici, Department of Family Medicine, Tuzla, Bosnia and Herzegovina. E-mail: oliverabaticmujanovic@yahoo.com*

**Background & Aim:** Atrial fibrillation (AF) is the most common cardiac arrhythmia. It impairs cardiac function and increases the risk of stroke which can be significantly reduced by anticoagulant therapy. The aims of this study were to estimate the prevalence of AF, CHADS2 score and prescribed therapy for AF in patients attended family care setting.

**Method:** This study was conducted in Family Medicine Teaching Center Tuzla and included 35/1492 patients with diagnosis of AF who were registered in family medicine team. We evaluated age, gender, duration and type of AF, CHADS2 score, comorbidity and prescribed medications (antiarrhythmic and anticoagulant drugs) for patients with AF.

**Results:** Prevalence of AF was 2.3% (35/1492). The most common type of AF was permanent (68.60), followed by persistent (36.6%) and paroxysmal (14.3%). There were 51.42% men and 48.58% women, without significant difference related to gender ( $p>0.05$ ). Prevalence of AF greatly increased with advancing age and majority of patients (54.28%) were  $\geq 75$  years. The mean duration of AF was  $4.21 \pm 7.46$  years. CHADS2 score 1 had 2.9% patients, CHADS2 score 2 had 37.1%, CHADS2 score 3 had 25.7%, CHADS2 score 3 had 11.42%, and CHADS2 score 5 had 2.9% patients. The most common prescribed antiarrhythmic drugs were beta-blockers (31.4%), amiodarone (28.6%), propafenone (17.1%) and verapamil (11.4%). Despite the fact that majority of patients had CHADS2 score  $\geq 2$  (77.14%), only 51.4% of patients used anticoagulant therapy. Overall 22.85% of patients had stroke, and only 75% of them used anticoagulant therapy. More than half of patients (62.5%) had stroke before AF was diagnosed.

**Conclusions:** Prevalence of AF was very high in family medicine settings. Systematic identification of patients with AF with high stroke-risk can help physicians to estimate stroke risk in patients and to prescribe oral anticoagulation to high-risk patients with AF in the primary care settings.