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Titel des Beitrags:
Prospective assessment of short- and long-term quality of life after ablation for atrial fibrillation.

Abstract:
Quality of Life After Ablation for Atrial Fibrillation. Background: This study prospectively assesses different aspects of short- and long-term quality of life (QoL) after catheter ablation for atrial fibrillation (AF). An analysis of 7 validated generic and tailored questionnaires was performed with regard to the relation of QoL to ablation success. Methods: The study included 133 patients (74% men, age 57±10) who underwent pulmonary vein isolation ± linear or electrogram-guided substrate modification for AF. QoL was quantitatively assessed at baseline, 3 months after ablation and at a median of 4.3 ± 0.5 years after ablation by the AF severity scale (AFSS), AF symptom checklist (AFSC), WHO-5-Well-Being-Index (WHO), Major Depression Inventory (MDI), Sleep and Vegetative disorder (SV), Vital Exhaustion (VE), and Illness intrusiveness (II). Results: QoL was improved significantly 3 months after ablation in all patients (regardless of ablation success or AF type) and stayed significantly improved after a median of 4.3 ± 0.5 years after ablation by the AF severity scale (AFSS), AF symptom checklist (AFSC), WHO-5-Well-Being-Index (WHO), Major Depression Inventory (MDI), Sleep and Vegetative disorder (SV), Vital Exhaustion (VE), and Illness intrusiveness (II). Patients who had a successful ablation improved significantly more than patients with an unsuccessful ablation in the AFSS, AFSC, and MDI questionnaire (delta change from baseline to long-term follow-up P
Conclusion: Overall, all patients significantly improved their QoL irrespective of the AF type in all questionnaires 3 months and 4 years after ablation. The increase in QoL was significantly greater in patients who underwent a successful ablation than patients with unsuccessful ablation in the AFSS, AFSC, and MDI questionnaire.