Studies analysing the frequency of rhythm disorders in patients with cirrhosis are rare. Nevertheless, factors triggering rhythm disorders occur frequently in cirrhosis. Therefore, a retrospective case control study was performed investigating the frequency of cardiac arrhythmia in a population of patients with cirrhosis while evaluating several associated factors. The files of patients with cirrhosis (n = 293) in the period 2004 - 2008 were analysed retrospectively regarding cardiac arrhythmia. The frequency of cardiac arrhythmia in the presence of relevant risk factors was analysed using $\chi^2$ tests and logistic regression models. 61.1 % of all patients were male (mean age 61.7 years) and 38.9 % female (mean age 62.8 years). The severity of cirrhosis according to the Child-Pugh score (CP) was as follows: CP A 43.3 %, CP B 32.8 % and CP C 23.9 %. Altogether, rhythm disorders were diagnosed in 16.4 % (48/293) of the study population, most frequently atrial fibrillation (68.8 %) and atrial flutter (6.7 %). An advanced age and comorbidities such as arteriosclerotic diseases, hypercholesterinemia (p < 5 mmol/L) potassium values were observed in 60.6 % of the study collective. Rhythm disorders were more often observed in patients with hyperkalemia (especially atrioventricular block, p < 0.01). Compared to the average population, the prevalence of atrial fibrillation was increased in our
The occurrence of rhythm disorders was significantly associated with arteriosclerotic diseases, hypercholesterinaemia and diabetes mellitus. Additionally, cardiac arrhythmia must be considered under diuretic therapy and in the presence of electrolyte disturbances.