The aim of this study was to evaluate long-term outcomes in patients with atrial fibrillation undergoing percutaneous left atrial appendage (LAA) closure with the Watchman device. Atrial fibrillation is one of the most common arrhythmias and is associated with a high risk for cardioembolic ischemic events, most notably stroke. Percutaneous LAA closure is an alternative to oral anticoagulation, because most thrombi originate from the LAA. All consecutive patients with minimum CHADS2 or CHA2DS2-VASc scores of 1 who underwent LAA closure with the Watchman device between June 2006 and August 2010 were eligible. Follow-up examinations were performed after 45 days to 3 months, 6 months, and 1 year and thereafter annually. Afterward, alternating office visits and telephone follow-up were performed every 6 months. A total of 102 patients were included. The mean age was 71.6 ± 8.8 years, and 37.3% were women. The mean CHADS2 and CHA2DS2-VASc scores were 2.7 ± 1.3 and 4.3 ± 1.7, respectively. Procedural success was achieved in 96.1% of patients. During a mean follow-up period of 3.0 ± 1.6 years, the annual rates of transient ischemic attack, stroke, intracranial hemorrhage, and death were 0.7%, 0.7%, 1.1%, and 3.5%, respectively. LAA closure with the Watchman device is safe and feasible for stroke protection in patients with atrial fibrillation. Low ischemic events
rates demonstrate its effectiveness during long-term follow-up.

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