

Impact of antithrombotic therapy in the prognosis of atrial fibrillation patients with advanced chronic kidney disease

J.M. Andreu Cayuelas¹, S. Raposeiras-Roubin², E. Fortuny Frau³, A. Garcia Del Egido⁴, J. Sellar-Moya⁵, C. Ortiz Cortes⁶, S.J. Camacho Freire⁷, P. Alonso Fernandez⁸, P. Jorge-Perez⁹, J. Lopez-Pais¹⁰, R. Bravo-Marques¹¹, J. Palacios-Rubio³, J. Benezet-Mazuecos¹², J. Cosin-Sales¹³

¹General University Hospital Reina Sofia, Murcia, Spain; ²Alvaro Cunqueiro Hospital, Cardiology, Vigo, Spain; ³University Hospital Son Espases, Cardiology, Palma de Mallorca, Spain; ⁴Hospital of Leon (Complejo Asistencial Universitario de Leon), Cardiology, Leon, Spain; ⁵Hospital Marina Salud, Cardiology, Denia, Spain; ⁶Hospital San Pedro de Alcantara, Cardiology, Caceres, Spain; ⁷Hospital Juan Ramon Jimenez, Cardiology, Huelva, Spain; ⁸Hospital de Manises, Cardiology, Valencia, Spain; ⁹INCANIS Hospital Universitario de Canarias, Cardiology, La Laguna, Spain; ¹⁰University Hospital of Santiago de Compostela, Cardiology, Santiago de Compostela, Spain; ¹¹Hospital Costa del Sol, Cardiology, Marbella, Spain; ¹²University Hospital Quironsalud Madrid, Cardiology, Madrid, Spain; ¹³Hospital Arnau de Vilanova, Cardiology, Valencia, Spain

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Introduction: Chronic kidney disease (CKD) is associated with an elevated thromboembolic and bleeding risk in atrial fibrillation (AF) patients, so the decision of antithrombotic therapy is a challenge.

Purpose: To analyze mortality, embolic and bleeding events in patients with advanced CKD and AF.

Methods: Multicentric retrospective registry on patients with AF and advanced CKD (CKD-EPI <30 mL/min/1.73 m²). For death, multivariable Cox regression analysis was developed. For embolic and bleeding events, competing-risks regression based on Fine and Gray's proportional subhazard model was performed, being death the competing event

Results: We analysed 405 patients with advanced CKD and newly diagnosed AF. 57 patients were not treated with antithrombotic therapy (14.1%),

80 only with antiplatelet/s (19.8%), 211 only with anticoagulation (52.1%), and 57 with anticoagulant plus antiplatelet/s (14.1%). During a follow-up of 4.6±2.5 years, 205 died (50.6%), 34 had embolic events (8.4%) and 85 had bleeding outcomes (21.0%). Bleeding event rate was significantly lower in patients without antithrombotic therapy (Figure). After multivariate analysis, anticoagulant treatment was associated with higher bleeding rates, without differences in mortality or embolic events (Table).

Conclusion: Anticoagulation therapy was associated with a significant increase in bleeding events in patients with advanced CKD and newly diagnosed AF. None of the antithrombotic therapy regimens resulted in lower embolic events rate neither benefit in mortality.

| Event | Therapy | HR | 95% CI | p |
|-----------------|---|------|------------|-------|
| Mortality | No antithrombotic therapy | ref | ref | ref |
| | Only antiplatelet therapy | 1.52 | 0.89–2.58 | 0.125 |
| | Only anticoagulant therapy | 1.19 | 0.76–1.86 | 0.460 |
| | Anticoagulant plus antiplatelet therapy | 1.44 | 0.80–2.61 | 0.228 |
| Embolic events | No antithrombotic therapy | ref | ref | ref |
| | Only antiplatelet therapy | 1.13 | 0.36–3.53 | 0.832 |
| | Only anticoagulant therapy | 0.62 | 0.21–1.79 | 0.376 |
| | Anticoagulant plus antiplatelet therapy | 0.57 | 0.12–2.67 | 0.475 |
| Bleeding events | No antithrombotic therapy | ref | ref | ref |
| | Only antiplatelet therapy | 2.78 | 0.89–8.69 | 0.078 |
| | Only anticoagulant therapy | 3.13 | 1.11–8.81 | 0.030 |
| | Anticoagulant plus antiplatelet therapy | 4.39 | 1.38–13.93 | 0.012 |

*Adjusted by age, sex, chronic kidney disease stage (4 or 5), CHA2DS2-VASC and HASBLED scores.

