

## Socioeconomic trends in oral anticoagulation therapy for atrial fibrillation patients with low risk of stroke

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**Funding Acknowledgements:** Type of funding sources: Foundation. Main funding source(s): Karen Elise Jensen Foundation Obel Family Foundation

**Background:** Studies suggest that oral anticoagulation (OAC) drugs are underused in patients with atrial fibrillation (AF) and high risk of stroke, especially in patients with low socioeconomic position (SEP). It is unknown, however, if the socioeconomic differences in guideline recommended practice exists in patients with low risk of stroke where OAC is not indicated.

**Purpose:** To examine the association between educational status and OAC treatment in patients with low risk of stroke where OAC was not indicated.

**Methods:** Register-based study. We included all Danish patients with a hospital diagnosis of incident AF between 1 Maj 1999 and 2 October 2015 with low risk of stroke according to guidelines covering the specific year of inclusion. Educational level was used as indicator for SEP. Outcome was OAC initiation -30 or +90 days of incident AF. Generalized linear regression was used to estimate absolute risk differences (RDs) between educational groups.

**Results:** 33805 AF patients with low risk of stroke were included (74.2 % men, mean age 56.4 years). Figure 1 shows that OAC was widely used in low-risk AF patients, especially in men. The initiation of OAC increased with time but the educational differences were reduced for women. Risk difference in the 1999-2002 was -14 % for women with high education (reference: low education) and -2 % in the period 2013-2016.

**Conclusion:** OAC was overused in patients with low risk of stroke, especially in patients with low education and the overuse increased with time. Educational differences were, however, slightly reduced with time, especially for women. Initiatives to ensure adherence to guideline recommendations should be emphasized in AF patients with low risk of stroke, especially for men and patients with low education.

Figure 1. Percentages per year for initiation of OAC according to educational status.

Abstract Figure.

