

Postoperative atrial fibrillation may be associated with other factors

To the Editor,

We have read with great interest the article titled "SYNTAX score predicts postoperative atrial fibrillation in patients undergoing on-pump isolated coronary artery bypass grafting surgery," which was written with a great interest by Geçmen et al. (1) and published in *Anatol J Cardiol* 2015 Nov 18 Epub ahead of print. The authors studied the association between SYNTAX (Sx) score and a new onset atrial fibrillation in patients who underwent on-pump isolated coronary artery bypass grafting surgery (CABG) and concluded that such a score may help in the prediction of postoperative atrial fibrillation (PoAF) in patients undergoing isolated on-pump CABG. We thank the authors for their contribution of the present study that highlights the relationship between Sx score and PoAF. We agree with the authors that the association between PoAF and Sx score may be explained by the differences in clinical, angiographic, and procedural characteristics. However, we have some concerns regarding the applicability of their findings. The association between the severity of coronary disease and atrial fibrillation is not surprising, but the authors did not explain in what way their findings may impact daily clinical practice. It is not clear whether the potential utility of the Sx score in predicting new onset atrial fibrillation will be of clinical interest. Moreover, their screening strategy was not ideal. Shorter episodes of AF were probably missed.

In a review by Lau et al. (2), several factors were reported to be associated with new-onset AF following multivariate analysis, including advanced age, higher Killip class or heart failure, hypotension, higher heart rate, history of hypertension, history of stroke, female gender, increased peak creatinine, and increased C-reactive protein levels. In addition, inflammation and active infection promote the release of cytokines and upregulation of Toll-like receptor-2 expression on monocytes, which may act as

a trigger for PoAF (3, 4). In conclusion, these confounding factors will probably explain this association, but many of them were not taken into consideration in the analysis.

Ali Rıza Akyüz, Levent Korkmaz

Department of Cardiology, Trabzon Ahi Evren Cardiovascular and Thoracic Surgery Research and Application Center, Sağlık Bilimleri University; Trabzon-Turkey

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Address for Correspondence: Dr. Ali Rıza Akyüz

Sağlık Bilimleri Üniversitesi, Ahi Evren Göğüs ve Kalp Damar
Cerrahisi Sağlık Uygulama ve Araştırma Merkezi ; Trabzon-Türkiye
Phone: +90 462 231 41 14 Fax: +90 462 231 24 20
E-mail: dralirizaakyuz@gmail.com



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DOI:10.14744/AnatolJCardiol.2016.7084