Research Findings for the Community

TITLE

Patient-reported outcomes differ by age, education level, and sex among those with atrial fibrillation

What was the purpose of this research study?

Atrial Fibrillation symptoms are highly variable: between 25% to 30% of patients with atrial fibrillation are have no symptoms, while other patients report severe symptoms that affect their quality of life. We sought to determine if individual characteristics (sex, age, and education level) impacted quality of life and symptom severity over a one-year time span.

What questions were asked?

Do women, older adults, and individuals with lower levels of education have higher symptom severity and lower quality of life? We looked at this at 3 different time points over one year (baseline, 6 months, and 1 year).

What was the study design?

The cohort study following the outcomes of 953 people with atrial fibrillation over the age of 18. The people in the study were recruited across 4 different academic medical centers to: 1) Fill out surveys every 6 months on their patient-reported outcomes, including symptom severity and quality of life, and 2) Allow this survey data to be linked to their electronic medical record data.

What was discovered?

Women, younger adults, and those with lower levels of education reported higher symptom severity and lower quality of life, and this persisted over time. The study was limited by missing data at the 6-month and 12-month survey data collection points, and because those who chose not to join the study may experience atrial fibrillation different than those who did.

What does this mean for my health?

If you have atrial fibrillation, factors including your age and sex may impact your symptom severity and quality of life.

Research article (literature citation)

Gleason, K.T., Dennison Himmelfarb, C.R., Ford, D.E., Lehmann, L., Samuel, L., Han, H.R., Jain, S., Naccarelli, G., Aggarwal, V., & Nazarian, N. (2019). "Association of Sex, Age, and Education Level with Patient-Reported Outcomes in Atrial Fibrillation." *BMC Cardiovascular Disorders*, 19(85). doi.org/10.1186/s12872-019-1059-6