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Spotlight on Special Topics

ATRIAL FIBRILLATION AND MORTALITY IN COVID-19 PATIENTS

Poster Contributions

For exact presentation time, refer to the online ACC.22 Program Planner at <https://www.abstractsonline.com/pp8/#!/10461>

Session Title: Spotlight on Special Topics Flatboard Poster Selections: COVID

Abstract Category: 61. Spotlight on Special Topics: Coronavirus Disease (COVID-19)

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Background: Cardiac arrhythmias are associated with increased mortality among coronavirus disease (COVID-19) patients. Identifying a correlation between specific arrhythmias and mortality in COVID-19 patients will optimize inpatient management.

Methods: Using an observational database, we analyzed 1,346 hospitalized COVID-19 PCR-positive patients at Methodist Health System from March to July 2020. We compared in-hospital death or hospice referral rates between patients that did or did not have atrial fibrillation with and without rapid ventricular rate (RVR; ventricular rate > 110 beats per minute) on an initial electrocardiogram (EKG). A chi-square (χ^2) test was used to analyze observed variables.

Results: Of the 1,346 COVID-19 patients, 193 (14.3%) died in the hospital or were discharged to hospice and 1,153 (85.7%) were discharged home or to a post-acute care facility. Factors associated with an increased risk of inpatient mortality included patient age over 60 years, major acute cardiac event during hospitalization, chronic kidney disease, and those with atrial fibrillation. A greater proportion of patients with (32.7%) than without (13.5%) atrial fibrillation on their initial EKG died or were discharged to hospice [$\chi^2 (1, N = 193) = 20.2, p < .001$].

Conclusion: Atrial fibrillation on presentation is associated with significantly increased risk of in-hospital death or hospice discharge among hospitalized COVID-19 patients.