# Patients versus Populations Risk Enhancements versus Age Criteria 

Christine M. Albert, MD, MPH

Director, Center for Arrhythmia Prevention, Brigham and Women’s Hospital Professor of Medicine, Harvard Medical School

## Screening: AF Prevalence

- Prevalence of AF in the population impacts the effectiveness of screening


Relationship between disease prevalence and predictive value in a test with $95 \%$ sensitivity and $85 \%$ specificity.
(From Mausner JS, Kramer S: Mausner and Bahn Epidemiology: An Introductory Text. Philadelphia, WB Saunders, 1985, p. 221.)

- False Positives: 1). Expense of monitoring 2). Exposure to risks of AOC without benefit


## Office-Based Screening for Atrial Fibrillation

Table $3 \mid$ Prevalence and detection rate of new cases by age at start of study and sex. Figures are numbers (percentages)

| Group | Men |  |  | Women |  |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 65-74 | 75-84 | $\geq 85$ | 65-74 | 75-84 | $\geq 85$ |  |
| Baseline prevalence |  |  |  |  |  |  |  |
| Control | 74/1216 (6.1) | 84/703 (11.9) | 25/156 (16.0) | 44/1378 (3.2) | 106/1050 (10.1) | 56/420 (13.3) | 389/4923 (7.9) |
| Opportunistic | 70/1304 (5.4) | 63/650 (9.7) | 24/148 (16.2) | 48/1448 (3.3) | 91/1005 (9.1) | 44/375 (11.7) | 340/4930 (6.9) |
| Systematic | 69/1318 (5.2) | 67/647 (10.4) | 15/154 (9.7) | 68/1391 (4.9) | 70/1022 (6.8) | 50/396 (12.6) | 339/4928 (6.9) |

12 month prevalence

| Control | $81 / 1213(6.7)$ | $91 / 699(13.0)$ | $27 / 151(17.9)$ | $55 / 1377(4.0)$ | $122 / 1044(11.7)$ | $60 / 418(14.4)$ | $436 / 4902(8.9)$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Opportunistic | $90 / 1303(6.9)$ | $77 / 647(11.9)$ | $28 / 148(18.9)$ | $59 / 1443(4.1)$ | $109 / 1001(10.9)$ | $52 / 373(13.9)$ | $415 / 4915(8.4)$ |
| Systematic | $90 / 1312(6.9)$ | $82 / 643(12.8)$ | $23 / 154(14.9)$ | $77 / 1387(5.6)$ | $88 / 1012(8.7)$ | $53 / 398(13.5)$ | $413 / 4906(8.4)$ |

12 month new case detection

| Control | $7 / 1139(0.6)$ | $7 / 615(1.1)$ | $2 / 126(1.6)$ | $11 / 1333(0.8)$ | $16 / 938(1.7)$ | $4 / 362(1.1)$ | $47 / 4513(1.0)$ |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Opportunistic | $20 / 1233(1.6)$ | $14 / 584(2.4)$ | $4 / 124(3.2)$ | $11 / 1395(0.8)$ | $18 / 910(2.0)$ | $8 / 329(2.4)$ | $75 / 4575(1.6)$ |
| Systematic | $21 / 1243(1.7)$ | $15 / 576(2.6)$ | $8 / 139(5.8)$ | $9 / 1319(0.7)$ | $18 / 942(1.9)$ | $3 / 343(0.9)$ | $74 / 4562(1.6)$ |

Fitzmaurice et al. BMJ 2007

# Mass Screening for Atrial Fibrillation in 75 Year Olds The STROKESTOP Study 



- Cryptogenic Stroke: $16 \%$ reported with 30 day monitoring

Svennberg E et al. Circulation 2015;131:2176-84
Engdahl J et al. Circulation 2013: 127:930-937
Gladstone DJ et al. NEJM; 2014; 370:2467-2477

## Enhancing Prevalence in Screened Populations

- CHA2DS2-VASc:
- Age, Stroke, Female Sex, HTN, Vascular disease, HF, diabetes.
- AF Risk Scores:
- CHARGE: Age, male sex, white race, weight, height, SBP, DBP, antihypertensive, Diabetes, CVD, MI, Heart Failure
- WHS (Women): Age, Weight, Height, SBP, alcohol, smoking.


## Characteristics of Patients with SCAF Detected



Female sex, lower weight, and absence of vascular disease were significantly associated with no detection of AF.

## CHA2DS2-VASc was not associated with AF detection

