



ATRIAL FIBRILLATION IS INDEPENDENTLY ASSOCIATED WITH INCREASED MORBIDITY AND MORTALITY IN ELDERLY TRAUMA PATIENTS

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Abstract:

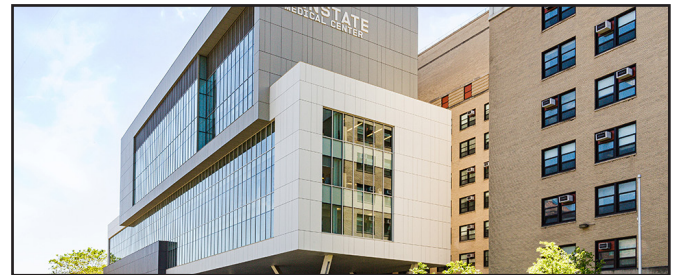
Among elderly trauma patients (age > 65), atrial fibrillation (AF) is the most common arrhythmia. Although there is evidence to suggest poor outcomes in patients who develop rapid ventricular response (RVR), there is a paucity of more generalizable data on outcomes for trauma patients with atrial fibrillation. At our level 1 trauma center, we sought to evaluate the clinical effects of AF in elderly trauma patients.

A retrospective data analysis was performed comparing patients over the age of 65 with AF to patients without AF. Data obtained included hospital length of stay, ICU length of stay, Injury Severity Score (ISS), ventilator days, and survival. Data were analyzed with one-way analysis of variance (ANOVA). 205 patients were enrolled, 44 with AF and 161 without AF. Patients with AF were found to have greater hospital length of stay (days) (8.0 vs. 15.2, $p < 0.0001$), ICU length of stay (days) (4.2 vs. 9.0, $p = 0.0006$), and survival to hospital discharge (77.2% vs. 90.7%, $p = 0.016$). Although there was a trend to suggest greater number of ventilator days among patients with atrial fibrillation, this was found to be not statistically significant. There was no difference in injury severity score between the 2 groups.

The in hospital morbidity including hospital length of stay, ICU length of stay, and mortality was significantly greater for elderly trauma patients with atrial fibrillation than for those without.

Biography:

Dr. Akella Chendrasekhar is a general surgeon in Staten Island, New York and is affiliated with one hospital. He has been in practice for more than 20 years.



Publication of speakers:

1. Systemic inflammatory response syndrome and platelet count $\geq 250 \times 10^9$ are associated with venous thromboembolic disease. Pate,
2. A., Baltazar, G. A., Labana, S., Bhagat, T., Kim, J., Chendrasekhar, A.
3. Higher haemoglobin levels and dedicated trauma admission are associated with survival after severe traumatic brain injury. Baltazar, G. A., Pate, A. J., Panigrahi, B., Sharp, A., Smith, M., Chendrasekhar, A.
4. Malnutrition as measured by albumin and pre-albumin on admission is associated with poor outcomes after severe traumatic brain injury. Baltazar, G. A., Pate, A. J., Panigrahi, B., LaBoy, S., Prosnia, R., Mody, A., Chendrasekhar, A.
5. Have plain abdominal radiographs outlived their usefulness? Pate, A., Baltazar, G., Chasin, C., Chendrasekhar, A.

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