POEMs Research Summaries
Your daily update for the Latest Patient Oriented Evidence that Matters

Prolonged monitoring more likely to detect AF after cryptogenic stroke

Clinical question
Does prolonged monitoring of patients who have had a cryptogenic stroke increase the likelihood that an episode of atrial fibrillation will be detected?

Bottom line
A 30-day period of monitoring was much more likely to detect atrial fibrillation (AF) in patients with cryptogenic stroke. For every 8 patients with cryptogenic stroke who undergo extended monitoring, one additional case of AF is detected. (LOE = 1b)

Reference

Study design
Randomized controlled trial (nonblinded)

Funding
Foundation

Allocation
Uncertain

Setting
Inpatient (any location)

Synopsis
These authors identified patients 55 years and older with a stroke or transient ischemic attack of undetermined origin (ie, no known diagnosis of AF and no clear evidence of small-vessel or large-vessel disease). The average age of the 571 participants was 73 years, 45% were women, and 90% were white. Most had a history of hypertension and hyperlipidemia, and the index event was an ischemic stroke in 63% of participants. Patients were randomized on enrollment to receive either 30 days of recording with an ambulatory event monitor, or an additional 24-hour period of Holter monitoring. Patients in the longer duration monitoring group were more likely to have an episode of AF lasting 30 seconds or longer detected during the first 90 days after enrollment (16.1% vs 3.2%; P < .001; number needed to treat = 8). They were also more likely to be treated with an anticoagulant (18.6% vs 11.1%; P = .01) than patients in the 24-hour monitoring group. Clinical outcomes such as subsequent stroke, bleeding complications, or mortality are not reported and the study was not powered to detect these outcomes.