FORWARD



Omega-3 Fatty Acids for the Prevention of Recurrent Symptomatic Atrial Fibrillation: Results of a double-blind randomized clinical trial

Introduction: Therapies limiting recurrent atrial fibrillation (AF) have limited efficacy and high rates of adverse events. Efficacy studies looking at omega-3 polyunsaturated fatty acids (n-3 PUFA) provide mixed results. **Objective:** Evaluate efficacy of chronic n-3 PUFA supplementation to prevent recurrent symptomatic AF in individuals with previous AF at normal sinus rhythm. **Outcomes by Number of Pts.**



Presented by: Macchia A, AHA Scientific Sessions, Los Angeles

Methods: Prospective, randomized, double-blind, placebo-controlled, parallel-group trial. 586 outpatient individuals; confirmed symptomatic paroxysmal AF requiring cardioversion (n=428), at least 2 AF episodes in the 6 months before randomization (n=55), or both criteria (103.) Treatment = 1g/day n-3 PUFA or placebo for 1yr., followed for 12 months, or time to death or recurrent AF.

Primary endpoint: Symptomatic recurrence of AF (first recurrence). Results: No sig. differences placebo vs. n-3 PUFA. At 12 months, 56 of 297 participants (18.9%) on placebo and 69 of 289 participants (24.0%) on n-3 PUFA had recurrent symptomatic AF (HR 1.28; 95% CI 95% 0.90-1.83;, p=0.17). No difference for any other prespecified end points. Composite of all-cause mortality, non-fatal stroke, non-fatal AMI, systemic embolism, heart failure or severe bleeding occurred in 20 (6.7%) and 16 (5.5%) pts. randomized to placebo or n-3 PUFA, respectively (HR 0.86; 0.44-1.66; p=0.65). 2.7% placebo and 2.0% prescription omega-3 discontinued due to intolerance. Conclusion: n-3 PUFA (1g/d) for 1yr did not reduce recurrent AF.

© 2012, American Heart Association. All rights reserved.