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Multimorbidity approach in elderly patients with atrial fibrillation. The upcoming EHRA-PATHS project

Abordagem da multimorbilidade em doentes idosos com fibrilhação auricular. O próximo projeto EHRA-PATHS

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Atrial fibrillation (AF) is the most common type of sustained arrhythmia encountered in clinical practice, affecting millions of people worldwide. It is associated with a marked, increased risk of cardiovascular and neurological conditions, such as heart failure, stroke and dementia. It is also linked to an increase in hospital admissions and mortality, resulting in a significant burden on the healthcare system (1,2).

Most of the population suffering from AF in Europe is in the group >65 age range, which is a major public health concern given the rise in the number of elderly people, particularly considering the estimated high proportion of individuals ≥80 years old. Moreover, risk factors predisposing to AF, like hypertension, diabetes, obesity, renal failure, chronic pulmonary disease or concomitant heart disease also become more prominent with aging (1). The coexistence of multimorbidity and AF is known to influence arrhythmia perpetuation, which has a clinical impact in this population. On the other hand, accurate identification and adequate management of cardiovascular comorbidities have gained major importance in this setting, potentially leading to reduced AF burden and improved outcomes (3). The establishment of integrated care models focused on a comprehensive multidisciplinary approach with individual-centered management need to be determined as a strategy to obtain the best clinical outcomes.

According to the new European Society of Cardiology AF guidelines (4), there is consistent evidence suggesting that all aspects of AF management are more effective when comorbidities and risk factors are considered. Therefore, a careful search for these comorbidities and risk factors is mandatory and should be applied to all patients with a diagnosis of AF.

The recent EHRA-PATHS study is a multicenter European project led by the European Society of Cardiology and the European Heart Rhythm Association on integrated care for

elderly patients with AF. It aims to evaluate how multimorbidity is currently addressed and to improve clinical practice in the field of AF, changing the current single-disease approach to a multidisciplinary AF team strategy.

The EHRA-PATHS consists of work packages, including the characterization of multimorbidity, polypharmacy and sex-related aspects of AF, looking at current clinical practice for the management of multimorbidity in elderly AF patients, developing innovative well-structured interdisciplinary care pathways that are patient-tailored, and evaluating the impact in outcomes of the holistic care of multimorbid AF patients in Europe (5). The whole project will last five years.

As part of the project, a randomized trial will be conducted in 68 hospitals from 14 countries over one year, and will provide investigators with the opportunity to address differences in healthcare systems throughout Europe. EHRA-PATHS investigators have developed novel pathways for common comorbidities and risk factors experienced by patients aged 65 years and older with newly diagnosed AF that will be evaluated in this trial. Care pathways have been incorporated into a software tool to assist healthcare professionals in evaluating elderly AF patients in a systematic and comprehensive way.

Portuguese centers will participate in this major European project.

We hope that the results of this interdisciplinary clinical program will feed into the design of innovative systematic care pathways to treat elderly AF patients with multimorbid conditions efficiently throughout Europe.

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