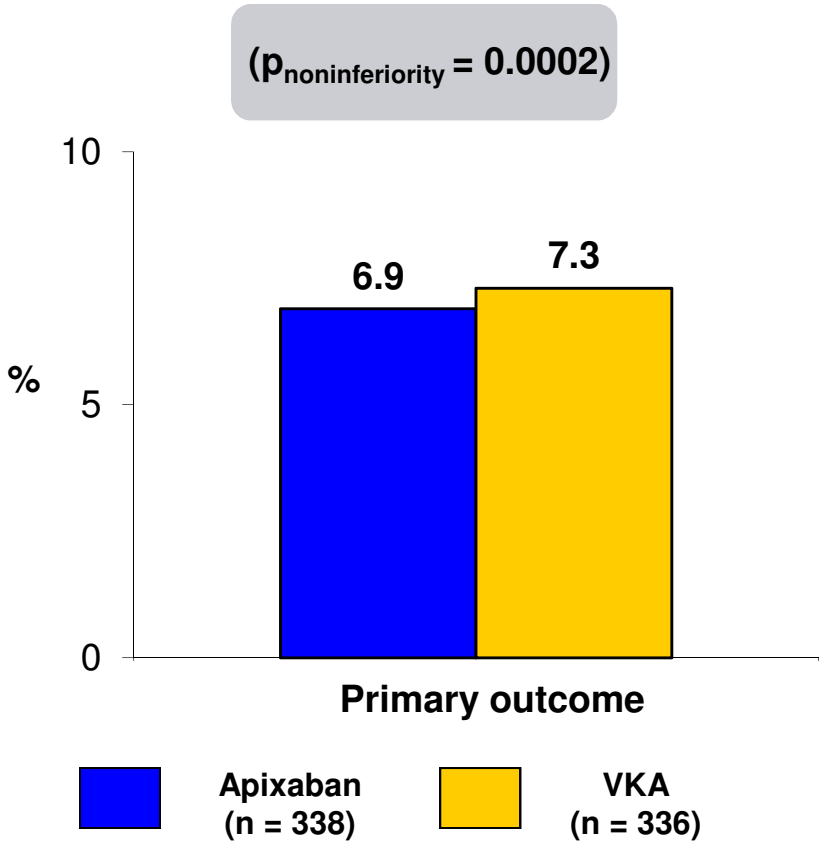
AXAFA – AFNET 5

Trial design: Patients undergoing first-time catheter ablation for AF and with ≥1 risk factor for stroke were randomized in a 1:1 fashion to either apixaban 5 mg BID or vitamin K antagonist (VKA). Patients were followed for 90 days.



Results

- Primary outcome, composite of all-cause mortality, stroke, or major bleeding at 90 days: apixaban vs. VKA: 6.9% vs. 7.3%, p for noninferiority = 0.0002
- Change in patients with abnormal Montreal Cognitive Assessment at end of study: -5.1% vs. -9.2%
- No lesions on brain MRI: 72.8% vs. 75.2%, p = 0.64

Conclusions

- Apixaban is noninferior to VKA for the composite clinical endpoint with no differences in cognitive function among patients undergoing first-time catheter ablation for AF
- Among the subset of patients who received an MRI, new lesions were noted in nearly one quarter of patients with no difference between the two groups

Kirchhof P, et al. Eur Heart J 2018;Mar 20:[Epub]