Editorial Comment

Statin for atrial fibrillation

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In the long term effects of simvastatin on protecting against atrial fibrillation in patients with acute myocardial infarction, in this issue of the Journal of Geriatric Cardiology, Chi et al. presented interesting data regarding the positive beneficial effects of simvastatin in the reduction of the frequency of atrial fibrillation in a selected group of patients. There have been occasional reports suggestive of mild antiarrhythmic properties of simvastatin, but these were more observational in nature. What is thought provoking about this report is that the group receiving simvastatin actually received less beta blocker therapy than the control group. It remains unclear as to how simvastatin actually reduces dispersion of tissue refractoriness, the basis of most arrhythmias. It also remains unclear as to whether there is a class effect (statin as a class having an effect in atrial fibrillation suppression), or whether this is specific to simvastatin alone. Patients included in this study all had acute myocardial infarction. It remains to be seen if this apparent antiarrhythmic property of simvastatin (or other statins) can be seen in other patients with atrial fibrillation and without organic heart disease. Clearly, atrial fibrillation is a heterogeneous condition, with many different etiologies, and presentations, and no single intervention is expected to be the single answer for all cases. Nonetheless the data in this study are indeed thought provoking and may add one more therapeutic option to what is presently available for the treatment of the most common arrhythmia.