Cognitive impairment in heart failure patients: role of atrial fibrillation

Laura Leto, Mauro Feola

School of Geriatry, University of Turin, Italy; Cardiovascular Rehabilitation-Heart Failure Unit Ospedale SS Trinita’ Fossano Italy
E-mail: m_feola@virgilio.it (Feola M)


Keywords: Atrial fibrillation; Cognitive impairment; Heart failure

Author’s reply

We read with great interest the letter of Yiginer, et al.[1] regarding the influence of atrial fibrillation (AF) in the development of cognitive impairment in heart failure (HF) patients. The comment is related to the review published in the Journal by Leto, et al.[2] that was a systematic overview about cognition, pathophysiology of cognitive impairment in heart failure patients. In the letter, Yiginer, et al.[1] underlined as AF, declining the cerebral perfusion due to risk of thromboembolism, seemed to be one of the most evident cause of cognitive dysfunction in the elderly population. We agree completely with the comment, considering the experience of Gaita, et al.[3] on 180 atrial fibrillation patients (without HF) in which in 90% an area of silent cerebral ischemia at MR imaging was revealed and cognitive performance resulted to be worse in AF patients than in subjects with sinus rhythm. The major finding of this clinical experience was that AF patients with persistent or paroxysmal AF had a higher prevalence of silent cerebral ischemia and that might determine a worse cognitive performance. In conclusion, physicians who treat HF patients should be very careful in the presence of AF, reducing the risk of thromboembolism with anticoagulation therapy, avoiding the silent cerebral ischemia and the consequence in cognitive impairment.

References


Corrections

In the article by WANG et al “Effect of probucol on insulin resistance in patients with non-diabetic chronic kidney disease” which published online March 28, 2015, and appears in Volume 12, Issue 5 of the journal [J Geriatr Cardiol 2015, 12(5): 521-527. DOI: 10.11909/j.issn.1671-5411.2015.05.020], a correction was required to include an “Acknowledgements” section of this article.

Acknowledgments

This work was supported by grants from the National Natural Science Foundation of China (81273968 and 81471027), the ministerial projects of the National Working Commission on Aging (QLB2014w002), and the four hundred project of 301 (YS201408).

The corresponding author Ri-Bao WEI, discloses that she received significant research grant from the above founds, which had not included in the original document. The author regrets this omission.

This correction has been made to the current online version of the article, which is available at http://www.jgc301.com/ch/reader/view_abstract.aspx?file_no=20150226001&flag=1