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Country: **Slovenina**

Titel of the project: **A method of allocating paroxysmal atrial fibrillation to prevent embolic stroke with handholding ECG**

## Project details

### **Viktor Svigelj**

Zdravstveni nasveti Viktor Svigelj dr.med.s.p.

Award amount: €100,000

Paroxysmal variant of AF is as dangerous as permanent one, and in case of stroke, it is probably as frequent as permanent one, causing stroke and other embolic events. Allocating such patients with a simple and accurate method such as intermittent ECG recordings with handholding portable ECG can prevent such complications.

Atrial fibrillation is a common heart condition that affects a lot of people every year. A paroxysmal variant is as dangerous as permanent one, and in case of stroke, it is probably as frequent as in permanent variant in causing the most severe and disabling stroke and might be overlooked and in someone opinion not as important as permanent variant of atrial fibrillation. So it is important to allocate such patients to prevent stroke with the simple and accurate method such as intermittent ECG recordings . A substantial proportion of patients can be allocated this way comparing with the conventional ECG recordings, obtained occasionally and as many as possible stroke and other embolic events can be further on prevented with appropriate preventive therapy. With the OMRON® Portable ECG Monitor HCG-801, a recording of about 30 seconds can be made when symptoms occur whether at home or away or regularly 2 – 3 times a day to get as accurate as possible information on possible paroxysm of atrial fibrillation. The monitoring period will be at least 7 days and with 10 such low cost machines we can test approximately 40 patients a month. With the Novacor (2 recorders) R.TEST 3 automatic cardiac event monitoring, easy-to-carry compact and lightweight 8 days monitoring system we will use another way to detect an atrial fibrillation paroxysmal events in at least 8 patients a month. If necessary, to get more patients tested, another Omron and/or R.TEST 3 machinery will be purchased. Target population will be patients over 60 years of age, with no antagonists K therapy, normal heart rhythm and treated hypertension (normal or elevated blood pressure despite therapy) and/or dilatative myocardopathy. A letter of invitation will be send to GP's to allocate such patients and then after patients will be invited to our outpatient facility to give the portable ECG with sufficient explanation (oral and written) how to make recordings. ECG recordings will be check after at least a week of obtaining the recordings and the patient, if paroxysmal AF (or any other dangerous heart rhythm disturbances) are noticed, will be send to the antithrombotic outpatient clinic for further evaluation and appropriate preventive therapy. We expect that 15 – 20 % of all patients will have some paroxysm of atrial fibrillation, and according to some projection studies, a substantial number of patients with such a dangerous disease, as AF is, will be found. If, at the moment, in our country with 2 million population an estimated number of patients with permanent AF is 15.000 – 18.000, according to projection studies at least doubled number are expected in next 20 years, specially due to the opportunity to allocate such patients with paroxysmal atrial fibrillation. This will be also the basis for preventive therapy to avoid embolic complications in substantially higher number of patients.

## **Audience**

### **Type**

- Healthcare professionals
- Carers of AF Patients
- General public

### **Location**

Slovenia, Europe