

中文題目：所有陣發性心房顫動患者都應接受抗凝血劑治療嗎？

英文題目：Should all patients with paroxysmal atrial fibrillation receive anticoagulant treatment?

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It is not known whether paroxysmal atrial fibrillation (PAF) patients are at the same level of risk as those with persistent AF. The advantage may be outweighed by the bleeding risk if we anticoagulate PAF patients routinely. We happened to have a chance to treat a patient with PAF who developed acute stroke; the history was herein reported.

A 72-year old man has history of hypertension for 15 years and PAF for 10 years. The PAF has been controlled successfully with amiodarone 6 tablets weekly for a long time. Repeated electrocardiogram (ECG) and 24 hour Holter ECG monitoring had been studied intermittently during these 10 years, which did not find any episode of AF. No anticoagulant was administered because of bleeding side effect concerning. Unfortunately, he developed sudden onset of choking followed by loss of consciousness on Feb. 13, 2020. He was sent to our emergency department (ED) and endotracheal intubation and ventilator support was used promptly. Afterwards, he was admitted to our ICU with impressions of aspiration pneumonia, coma, and hypotension on Feb. 13th. After our aggressive treatment, his consciousness became clear on Feb. 18th. The endotracheal tube was removed on Feb. 24th. The calculated CHA₂DS₂-VAS score was 2 points on that day. He was transferred to Chest Medicine ward on Feb. 26th. Unfortunately, he developed acute stroke on March 2, 2020. MRI study revealed multiple embolic infarcts over bilateral superior cerebral arteries territories. Four times ECG studies all showed normal sinus rhythm during hospitalization. Patient was discharged with considerable improvement on April 23th.

This case demonstrated that although his PAF has been controlled well, he still developed stroke attack. Base on this case's experience, we recommended that for patients with PAF, if the currently used CHA₂DS₂-VAS score > 1 point, the anticoagulant therapy may be indicated.

Keywords: Anticoagulation, Atrial fibrillation, Electrocardiogram, Stroke