
We thank Drs Watanabe and Aizawa for their letter concerning our recent publication in Circulation Arrhythmia and Electrophysiology, “Blood lipid levels, lipid-lowering medications, and the incidence of atrial fibrillation.” In their letter, they ask whether the association of lipids with the risk of atrial fibrillation observed in the Atherosclerosis Risk in Communities cohort was modified by age or sex.

In our published analysis, we did not detect any significant interactions by age categories (using mean age to create a dichotomous variable) or sex for any of the lipid levels. These issues are noted in the results and discussion sections of the article. As suggested by Drs Watanabe and Aizawa, we reanalyzed the data by using an age cutoff of 50 years and further stratifying by sex. After multivariable adjustment, we did not find any significant interactions between age, sex, and low-density lipoprotein or high-density lipoprotein cholesterol.

We agree with the authors that the paradox found between higher levels of total cholesterol and low-density lipoprotein cholesterol with a lower incidence of atrial fibrillation is intriguing and complex. Additional research using cohort data should evaluate this question further, and, if the results are replicated, future focus should be to study the underlying mechanisms.

Disclosures
None.

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