Letter by Petretta Regarding Article, “Catheter Ablation of Atrial Fibrillation in Patients with Left Ventricular Systolic Dysfunction: A Systematic Review and Meta-Analysis”

I read with great interest the systematic review and meta-analysis of Anselmino et al.1 assessing safety and long-term outcome of catheter ablation of atrial fibrillation in patients with left ventricular (LV) systolic dysfunction and evaluating the predictors of recurrence and effect on LV function. This study is important, as before this review outcome data were based only on small observational studies, without conclusive indication for catheter ablation of atrial fibrillation in patients with reduced LV ejection fraction. The meta-analysis included a total of 1838 patients from 26 studies with a mean follow-up of 23 months, ranging from 18 to 40 months.

The result indicates long-term sinus rhythm maintenance in patients with impaired LV systolic function is comparable with that reported on the long-term among the general population. Noteworthy, LV function consistently improves in these patients during the follow-up.

I think that further information should be given to a reader interested in the methods used in statistical analysis. It seems that the authors pooled the rates of event as dependent variables. Thus, in this meta-analysis, the effects size should be an outcome measure for individual groups, such as a measure for dichotomous variables (raw proportions or transformed proportions) or a measure for event counts (raw incidence rates or transformed incident rates).2–4 Differently, the authors reported the results as odds ratio, an outcome measure for 2-group comparisons.5,6 By the way, the legend of Figure 2 refers to funnel plots, but the figure presents forest plots.

Disclosures

None.

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References

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