

# Arrhythmias

## DOFETILIDE EFFICACY AND SAFETY PROFILE IN OFF-LABEL USE

ACC Moderated Poster Contributions  
McCormick Place South, Hall A  
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Session Title: Arrhythmias: AF/SVT: Continuing Role of Pharmacologic Therapy for Atrial Arrhythmias  
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Authors: *Genevieve E. Brumberg, Nitin Gera, Evan Adelstein, Samir Saba, Sandeep Jain, Electrophysiology Division of the Heart and Vascular Institute, University of Pittsburgh Medical Cen, Pittsburgh, PA, USA*

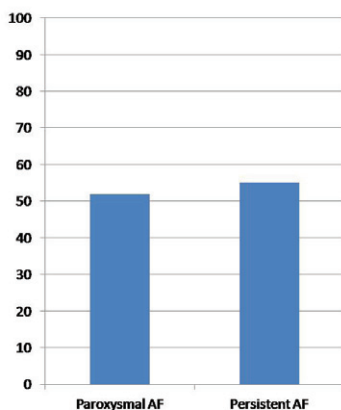
**Background:** Dofetilide is FDA-approved for maintaining sinus rhythm in patients with persistent atrial fibrillation (AF); however, it is also frequently used in patients with paroxysmal AF.

**Methods:** We studied 135 AF patients initiated on dofetilide at our institution between October 2002 and July 2008 in order to compare the efficacy and outcomes in paroxysmal (n=69) vs. persistent AF (n=66).

**Results:** The average age was 60±11 years. The incidence of male gender, coronary disease, hypertension, diabetes, hyperlipidemia, left atrial size >4cm, and LVEF <40% did not differ significantly between the paroxysmal and persistent AF groups. Dofetilide was discontinued in 20 patients (15%) during the initiation admission and in 21 patients (16%) within 6 weeks of initiation (24 due to inefficacy, 9 with excessive QT prolongation, 4 with Torsades de Pointes, 3 unable to afford the medication, and 1 with worsening renal function). At 12 months, 52% of paroxysmal and 55% of persistent AF patients were clinically free from AF (p=0.33, panel a). At 24 months, 64% of paroxysmal and 39% of persistent AF patients remained on dofetilide because of continued clinical benefit (p=0.003, panel b).

**Conclusion:** The majority of patients who discontinue dofetilide do so early in its use. While dofetilide is FDA approved for the treatment of persistent AF, it appears to have a comparable efficacy and safety profile in paroxysmal AF. Furthermore, dofetilide is more likely to be continued in paroxysmal AF patients longterm.

Panel a. Percent of Patients AF Free at 1 year



Panel b. Continuation of Dofetilide at 2 years

