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Comparison of CHA2DS2-VASc and C2HEST scores for predicting the incidence of atrial fibrillation among patients with end-stage renal disease- the known, the unknown, the unforgettable

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Purpose: The authors have studied assessment of CHA2DS2-VASc score versus C2HEST score in atrial fibrillation risk prediction in end-stage renal disease patients.

Methods: The authors conducted this study by Longitudinal Health Insurance Database 2000. The authors totally enrolled 4,601 end-stage renal disease patients. The predictive capability of atrial fibrillation by using CHA2DS2-VASc and C2HEST score was estimated by area under the receiver operating characteristic curve (AUROC).

Results: The AUROC for CHA2DS2-VASc score in predicting atrial fibrillation events was 0.5786, and AUROC for C2HEST score for atrial fibrillation prediction was 0.5983.

Conclusions: Both scores yield almost identical AUROC values implying no difference in predictive power. Further work is warranted to verify the prognostic value of the current scores.