HealthManagement
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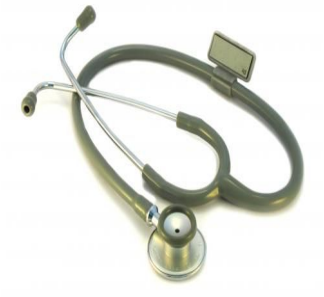
Role of Dronedarone for Treatment of Atrial Fibrillation & Atrial Flutter Discussed



Research into dronedarone, a new Class III antiarrhythmic agent, discusses how it has now been approved by the US Food and Drug Administration for use in patients with atrial fibrillation or atrial flutter due to the positive results of the ATHENA trial showing significant reductions in all-cause mortality and cardiovascular hospitalisation with dronedarone use.

A *post hoc* analysis of the ATHENA data also suggested a decrease in stroke risk with this agent. However, due to safety concerns in the heart failure population in the earlier ANDROMEDA trial, dronedarone is not recommended for patients with an ejection fraction <35% and recent decompensated heart failure.

Dronedarone is an amiodarone analog with multichannel blocking electrophysiologic properties similar to those of amiodarone, but several structural differences. Dronedarone's lack of the iodine moiety reduces its potential for thyroid and pulmonary toxicity. Preliminary data from the DIONYSOS trial, and an indirect meta-analysis comparing amiodarone with dronedarone, showed amiodarone to be more effective in maintaining sinus rhythm, while dronedarone was associated with fewer adverse effects resulting in early termination of the drug. Dronedarone is the first antiarrhythmic drug for the treatment of atrial fibrillation and atrial flutter shown to reduce cardiovascular hospitalizations. In patients with structural heart disease who have an ejection fraction >35% and no recent decompensated heart failure, dronedarone should be considered earlier than amiodarone in the treatment algorithm.

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