



Letter to the Editor

Reply to the letter to the editor: “Association between ankylosing spondylitis and atrial fibrillation”



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We thank Dr. Lai for insightful comments about the attributable risk for atrial fibrillation (AF) caused by ankylosing spondylitis (AS). The association between AS and cardiovascular disease were reported recently [1]. However, there is a paucity of information on the association between AS and AF.

Inflammation is a well-known important mechanism of AF development. Chronic inflammation caused left atrial remodeling, including inflammatory infiltrates and oxidative damage within atrial tissue resulting in atrial fibrosis [2]. As in line with the previous study [3], we found that AS patients with tumor necrosis factor inhibitor, whose inflammation seems severe than others, had a higher risk of AF [4]. Interestingly, the impact of AS on the development of AF was higher in patients under 40 years of age than those with old age. However, patients with AS usually younger than the most prevalent age of AF, the physician could underestimate the risk of AF.

As pointed by Dr. Lai, it is interesting to find that AS had a similar impact on the development of chronic obstructive pulmonary disease

(COPD) and AF (hazard ratio 1.45 vs. 1.54); however, the actual increment for an incidence rate of AF was 8-fold higher than COPD [4,5]. Smoking, inflammation, and hypoxia could contribute to AF development in patients with COPD. We agree with Dr. Lai's point that it is important to quit smoking in patients with AS to reduce the risk of COPD, and control inflammation and screen regularly to reduce the risk of AF and its complication.

Conflict of interest

All authors declare that there is no conflict of interest relevant to the submitted work.

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