

ALONE-AF

Évaluation randomisée de l'arrêt de l'anticoagulation à long terme
après ablation par cathéter pour fibrillation auriculaire



Long-term Anticoagulation Discontinuation After Catheter Ablation for Atrial Fibrillation : The ALONE-AF trial

JAMA

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**Long-Term Anticoagulation
Discontinuation After Catheter Ablation for
Atrial Fibrillation**

The ALONE-AF Randomized Clinical Trial

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of Cardiology

D'après la présentation de Boyoung Joung « Long-term Anticoagulation Discontinuation After Catheter Ablation for Atrial Fibrillation, the ALONE-AF trial » durant les Hot Lines de l'ESC 2025

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Évaluation randomisée de l'arrêt de l'anticoagulation à long terme après ablation par cathéter pour fibrillation auriculaire

Méthodologie de l'étude

Catheter ablation for AF

Prospective multicenter RCT

At least two 24-72 hours Holter and ECG between 3 month after ablation and enrollment
: A 24-72 hour Holter/ECG is mandatory within the 2 months before the enrollment.

840 AF patients without recurrence for at least 12 months after ablation

Randomization by trial center

18 sites in Korea

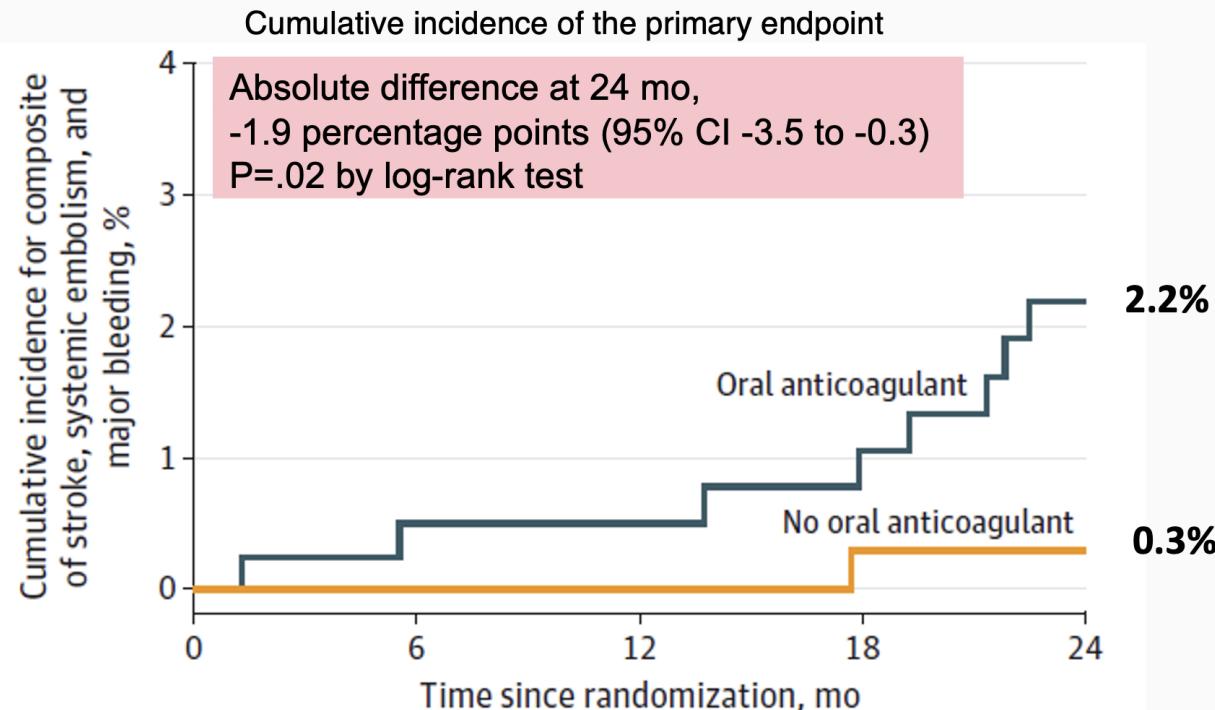
No OAC (N=420)

OAC (n=420)

Primary endpoint – composite outcome of stroke, systemic embolism, and major bleeding at 2 years after randomization

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Primary Endpoint: Net adverse clinical event



No. at risk

No oral anticoagulant	417	378	353	334	321
Oral anticoagulant	423	392	376	357	338

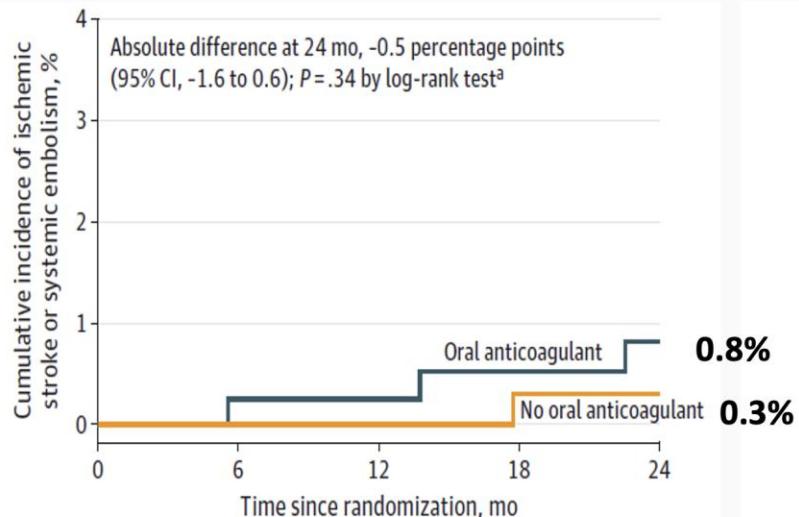
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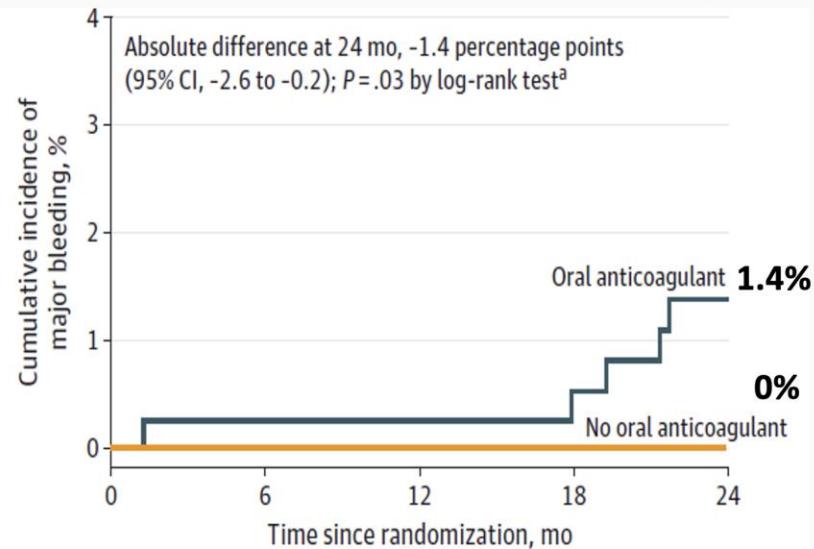
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Key Secondary Endpoint

Ischemic stroke or systemic embolism



Major bleeding



No. at risk

No oral anticoagulant	417	378	353	334	321
Oral anticoagulant	423	393	377	359	343

No. at risk

No oral anticoagulant	417	378	353	335	322
Oral anticoagulant	423	393	377	359	341

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