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## Arterial hypertension as a risk factor for arrhythmia progression in patients with recurrent atrial fibrillation

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**Objective:** To assess the effect of uncontrolled Arterial Hypertension (AH) on the progression of arrhythmia for 1 year in patients with recurrent forms of Atrial Fibrillation (AF).

**Material & Methods:** 131 patients with restored sinus rhythm were retrospectively studied. AH was regarded as uncontrolled, in patients who did not achieve the target blood pressure.

**Results:** Depending on the control of the level of hypertension, patients were divided into two groups to determine the effect of hypertension on AF progression within 1 year. The first group consisted of 50 patients with uncontrolled hypertension, the second group-81 patients with controlled hypertension. In 32 (24.42%) patients progression of AF was observed. A comparative analysis revealed that a group of patients with uncontrolled AH are more prone to AF progression. So, in the 1st group the percentage of patients with AF progression was 46% and in the second group this index was 11.1% ( $p < 0.0001$ ). We identified correlations between uncontrolled hypertension and other risk factors for AF progression. Thus, a direct correlation was found between uncontrolled hypertension and the presence of HF ( $r = -0.359$ ,  $p < 0.0001$ ), the history of stroke or TIA ( $r = -0.221$ ,  $p < 0.05$ ), the history of a persistent AF ( $r = -0.205$ ,  $p < 0.05$ ) and obesity ( $r = -0.175$ ,  $p < 0.05$ ).

**Conclusion:** The presence of uncontrolled hypertension in patients with recurrent forms of AF 4-fold increases the risk of AF progression. In addition, uncontrolled hypertension is more often associated with the presence of other factors of AF progression.

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