**DISMAL RATES OF ANTICOAGULATION IN ELDERLY WOMEN FOR STROKE PREVENTION IN ATRIAL FIBRILLATION**

**V.N. Singh**1, N.N. Singh2, J. Levine3, N.N. Singh1, M. Nelson1, L. Marlow1

1University of South Florida College of Medicine, Tampa, FL, 2Suncoast Cardiovascular Research, St Petersburg, FL, 3Bayfront Medical Center, St Petersburg, FL, USA

Background: Despite clear guidelines regarding the utilization of anticoagulant therapy for reducing stroke in atrial fibrillation (AF), elderly women, who are at high risk of stroke and stand to benefit the most, fail to avail this benefit. The reasons for such dismal rates of anticoagulant usage remain unclear.

Methods: We reviewed charts from 694 patients with paroxysmal and persistent AF, 262 (37.8%) of these were women, of which 158 (60.3%) were elderly (>70 years of age), and 104 (39.7%) were younger. Anticoagulant usage in the elderly women was compared with younger women as well as older men.

Results: Of the 262 women, 62% were on Warfarin, while 76% of the 432 men were anticoagulated. Elderly women (n=158) exhibited only 49% rate of anticoagulation (n=78) versus younger women (80%, n=84; p<0.05) or 226 elderly men

(61%, n=138; p<0.05). Reasons for the non-usage included physician deferral for advanced age (37%), Minor bleeds (20%), falls (15%), patient's choice (17%), major bleeding (6%), and 5% for problems in obtaining labs.

Conclusions: The elderly patients with AF who are at the greatest risk of stroke appear to receive anticoagulation much less often. The rates are quite dismal in the elderly women, who remain untreated half of the time. It is surprising that actual bleeding is not the commonest reason for such deferral, rather physician's or patient's fear seem to be the most important factors. Addressing these correctable factors can potentially lead to dramatic reduction in the risk of stroke in the elderly women.