

Supplementary material

Myrda K, Blachut A, Buchta P, et al. Impact of the COVID-19 pandemic on atrial fibrillation and atrial flutter ablation rates. The analysis of nearly 5 million Polish population. Kardiol Pol. 2021.

Please note that the journal is not responsible for the scientific accuracy or functionality of any supplementary material submitted by the authors. Any queries (except missing content) should be directed to the corresponding author of the article.

Clinical characteristics of patients undergoing atrial fibrillation and atrial flutter ablations in compared periods 2019 and 2020.

	2019	2020	p
Number of patients	284	88	
Age [years], median (IQR)	64 (56; 69)	66 (61; 72)	0.06
Sex [males], n (%)	164 (57.7)	51 (58.0)	0.97
Hypertension, n (%)	148 (52.1)	55 (62.5)	0.09
Diabetes mellitus, n (%)	19 (6.7)	17 (19.3)	<0.001
History of CAD, n (%)	107 (37.7)	51 (58.0)	<0.001
History of unstable angina, n (%)	42 (14.8)	19 (21.6)	0.13
Previous MI, n (%)	21 (7.4)	12 (13.6)	0.07
Previous stroke, n (%)	10 (3.5)	5 (5.7)	0.37
Previous TIA, n (%)	13 (4.6)	3 (3.4)	0.64
History of chronic heart failure, n (%)	73 (25.7)	33 (37.5)	0.03
History of PAD, n (%)	31 (10.9)	10 (11.4)	0.91
History of AF or AFl, n (%)	221 (77.8)	76 (86.4)	0.08
Previous cardioversion, n (%)	64 (22.5)	32 (36.4)	<0.01
Previous ablation, any method, n (%)	41 (14.4)	33 (37.5)	<0.001

IQR – interquartile range; CAD – coronary artery disease; MI - myocardial infarction; TIA – transient ischemic attack; PAD – peripheral artery disease; CKD – chronic kidney disease; CHF - chronic heart failure; AF – atrial fibrillation; AFl – atrial flutter;