Atrial fibrillation and MPNs

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Dear Editor,

Oral anticoagulants are usually indicated in patients with atrial fibrillation (AF) as primary or secondary prevention of thrombosis. Mahé et al. have recently published in *Annals of Hematology* that the risk of thrombosis was higher in 96 patients with polycythemia vera (PV) or essential thrombocythemia (ET) and concomitant AF than in the remaining 617 patients with a myeloproliferative neoplasm without AF included in the OBENE study [1]. The authors stated that their results are in contrast with those reported by Freitas et al. [2]. However, it must be pointed out that the cohorts of patients included in both studies are totally different. Freitas et al. reported the rate of thrombosis in 186 patients with AF treated with oral anticoagulants, 64 of them with concomitant PV and the remaining 124 lacking any myeloproliferative neoplasm (MPN) [2]. In addition, thrombosis-free survival was restricted to the period of time in which patients were treated with oral anticoagulants with the probability of thrombosis being similar among cases (PV plus AF) and controls (AF without PV) [2]. In summary, these two studies have explored the same problem from a different

approach making difficult the comparison of results among them. However, the results from both studies reinforce the need for adequate antithrombotic therapy with oral anticoagulation in patients with MPNs suffering from concomitant AF.

Compliance with ethical standards

Conflict of interest The author declares that there is no conflict of interest.

References

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