Authors' objectives
The most frequently occurring complication in patients with atrial fibrillation is thromboembolism and in particular ischaemic stroke. It is believed that in more than 90% of all cases the thrombus originates from the left atrial appendage. Currently, the gold standard in the therapy of atrial fibrillation is oral anticoagulation (OAC) with vitamin-K antagonists. The percutaneous closure of the left atrial appendage is a new non-pharmacological approach aiming at eliminating the left atrial appendage from systemic circulation in order to prevent thromboembolic events, such as ischaemic stroke. The aim of our systematic review is to compare the efficacy and safety of percutaneous left atrial appendage (LAA) closure to prevent thromboembolic events with that of OAC with vitamin-K antagonists. This systematic review is the second update of the systematic review published in 2011.

Authors' conclusions
Percutaneous left atrial appendage closure could be an appropriate alternative for patients who are not eligible for OAC with vitamin-K antagonists. However, there are currently no studies available that have assessed the efficacy within this population. At present, the inclusion of left atrial appendage closure into the hospital benefit catalogue is not recommended. We propose a re-evaluation in 2018.

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Ludwig Boltzmann Institute fuer Health Technology Assessment (LBI-HTA), Garnisongasse 7 rechte Stiege Mezzanin (Top 20), 1090 Vienna, Austria. Tel: +43 1 236 8119 - 0 Fax: +43 1 236 8119 - 99 Email: agnes.kisser@hta.lbg.ac.at

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