Authors’ reply

With pleasure we read the letter to the Editor by Kühne et al. We highly respect the conservative opinion of our colleagues. However, in our daily practice we are confronted with an important question: should we really withhold an established preventive therapy from patients and wait until they experience a complication?

The authors criticise left atrial appendage occlusion (LAAO), but leave the reader without any alternatives. Knowing that non-vitamin-K-antagonist oral anticoagulants (NOACS) have a discontinuation rate of at least 15% (RE-LY [1]) and >15% major and clinically relevant bleedings per year [2], the complication rate of 4.9% for LAAO is at least competitive.

During the years 2012–2015, a total of 273 LAAOs have been performed at the University Hospital Zurich, 428 at the University Hospital Berne and only 25 at the University Hospital Basel. We respect our colleagues who wait until stronger evidence becomes available, but we believe that it is the duty of a university hospital to change daily practice for the better for our patients and to create new evidence.

Since we share the same passion for quotes as the authors do, we would like to give Kühne et al. two quotes along the way: the former US president John F. Kennedy said in 1963 “Change is the law of life. And those who look only to the past or the present are certain to miss the future.” And in contrast to the previous quote, Wilhelm II Emperor of Germany (1916) once said “I believe in the horse, the automobile is a temporary appearance.”

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References