

Dronedarone safety, efficacy standings bolstered in huge atrial-fibrillation trial

May 19, 2008 [Steve Stiles](#)

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excerpt:

Dr. L. Brent Mitchell (Foothills Hospital, Calgary AB) said to *heartwire* that he sees the dronedarone effect on ATHENA's primary composite outcome as "moderate to strong" and said its effect on AF "looked better than in the clinical trials preceding it. In ATHENA, for the first time, there's an antiarrhythmic drug for atrial fibrillation that actually seems to reduce [cardiovascular] mortality. That's going to make it very attractive, considering that other drugs when compared with placebo haven't done that – with the possible exception of amiodarone, and that's debatable." Mitchell wasn't involved in ATHENA.

A trade-off between efficacy and safety

"Any antiarrhythmic drug that's to be used for atrial fibrillation has to be compared with placebo," according to Mitchell. "The comparison of two active agents obscures any demonstration of harm." Pointing to the low rate of adverse side effects in the study, he said, "When you consider that atrial fibrillation is for most people a relatively benign arrhythmia, the safety profile of the drug is imperative. [Dronedarone] seemed to have a very good safety profile."