Atrial Fibrillation: Mechanisms and Management

Hindawi

CALL FOR PAPERS

Atrial fibrillation (AF), the most common arrhythmia encountered in clinical practice, represents a true epidemic given the expected increased prevalence during the following decades mainly due to aging and increased burden of associated cardio-vascular risk factors. AF is a complex and heterogeneous arrhythmia associated with different conditions and substrates. Besides local triggers, atrial electrophysiological and structural abnormalities that constitute atrial remodeling seem to play an important role in AF development and persistence.

The main goal of this special issue is to publish high-quality research papers as well as review articles addressing recent advances in atrial fibrillation. We also encourage the clinical studies regarding the epidemiology, potential mechanisms, and pathophysiology in atrial fibrillation, biomarkers in atrial fibrillation, subclinical atrial fibrillation, potential role of pharmacological and nonpharmacological management in atrial fibrillation. With this objective, high quality contributions that have not been yet published or that are not currently under review by other journals or conferences proceedings are sought.

Potential topics include but are not limited to the following:

▶ Mechanisms in atrial fibrillation

▶ Pathophysiology in atrial fibrillation

▶ Epidemiology in atrial fibrillation

▶ Risk factors for in atrial fibrillation

▶ Biomarkers in atrial fibrillation

▶ Subclinical atrial fibrillation

▶ Pharmacological management in atrial fibrillation

▶ Nonpharmacological management in atrial fibrillation

▶ Catheter ablation in atrial fibrillation

▶ Stroke prevention in atrial fibrillation

▶ Autonomic modulation in atrial fibrillation

▶ Upstream therapy in atrial fibrillation

▶ Atrial fibrillation following cardiac surgery

Authors can submit their manuscripts through the Manuscript Tracking System at https://mts.hindawi.com/submit/journals/crp/atfi/.

Papers are published upon acceptance, regardless of the Special Issue publication date.

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