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Authors reply

Dear Editor,

I want to clarify and respond to the comments about our manuscript entitled "Epidemiology of atrial fibrillation in Turkey: preliminary results of the multicenter AFTER study" published in the March 2013 issue of the Archives of the Turkish Society of Cardiology.^[1]

We thank our colleagues for their interest in our research.

- 1. They recommended using TTR values rather than using a single INR in order to evaluate the efficacy of anticoagulant therapy. It is true and ideal. However, application of percent of visits in range or percent of days in range would not be practical in such a wide study. Therefore, a cross-sectional method was used as the authors stated.^[2]
- 2. A large amount of data was gathered with this epidemiologic study, and it is impossible and not logical to interpret all the data in one manuscript. CHA₂DS₂-VASc and HAS-BLED scores were evaluated and will be published as separate sub-studies.^[3]
- 3. Their assumption regarding the availability of novel anticoagulants for more than two years in Turkey is not true. Dabigatran was the first novel anticoagulant drug and was introduced to the market in March 2011,

but was not widely available at the time of the study. Indications and treatment attitudes will be discussed again in depth in another paper.

Sincerely,

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