

The Rowan Suite

World Class Private Heart & Chest Care

Radiofrequency Ablation of Atrial Flutter

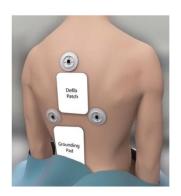
A treatment to correct an abnormal heart rhythm



This leaflet has been written to provide information about treatment to correct an abnormal heart rhythm called Atrial Flutter (Radiofrequency Ablation of Atrial Flutter). We hope it answers some of the questions or concerns you may have about the procedure. It is not intended to replace talking with medical or nursing staff.

How do I prepare for the procedure

During your setup for the procedure stickers will be applied to your chest and possibly your back to connect you to the monitoring systems. During set up the staff will ensure that your dignity is maintained at all times. The images below show where the sticker may be applied to your back and chest.





What is Radiofrequency Ablation of Atrial Flutter?

Radiofrequency ablation is a procedure performed to treat patients who are experiencing problems with an abnormal heart rhythm called Atrial Flutter.

How is it done?

The procedure is done through veins at the top of your right leg and sometimes under your left collarbone. You will be awake during the procedure but you will be given a local anaesthetic to numb the skin. You may be given sedation, which could make you feel quite drowsy.

A small cut is made in your groin and wires are passed through the blood vessel into your heart. As we know the exact pathway Atrial Flutter uses in the heart it can be 'burnt away' (ablated) using radiofrequency.

Will I have any pain or discomfort during the procedure?

This type of procedure may provoke some anxiety and there are also aspects of the procedure that may be uncomfortable or even painful. The staff will attempt to minimise this for you as much as possible by using sedative drugs and pain killers as required. They will actively monitor you throughout your procedure to ensure that you are as comfortable as possible. However, if you suffer significant pain or find the procedure unpleasant then you should inform staff immediately.

The level of pain that patient's experience does vary from feeling nothing at all or minimal pain to significant pain and unfortunately this cannot be predicted. If you do experience pain and if the doctors are unable to control the discomfort then your procedure will be stopped, this happens infrequently. It is common to experience a fast heart rate during the procedure.

How long does the procedure take?

It usually takes about one hour, although it can be longer.

How do I prepare for the procedure?

You may be asked to attend a pre admission clinic prior to the procedure. You will have various tests and meet with a nurse practitioner who will talk to you about the procedure and answer any questions.

Before you come into hospital for the procedure it is helpful if you shave your right groin (crease at the top of your leg). You will need to have a bath or a shower. You will be informed when to stop eating and drinking prior to the procedure.

Will it be successful?

The procedure is performed regularly in this hospital and is usually very successful in preventing further Atrial Flutter.

What are the benefits of having the procedure?

Terminating atrial flutter can restore normal heart rhythm and cease the feeling of palpitations or racing heart. It may also restore normal pumping function of the main chamber of your heart when it is impaired due to the fast heart rate. You may be able to discontinue any medication that you are on to control your heart racing.

What are the risks involved?

As with any procedure there is a small risk of complications. There is a small risk of a blood clot becoming dislodged during the procedure, which could lead to a stroke.

Taking drugs to thin the blood prior to the procedure will help to prevent this.

In some cases it is possible to damage the right coronary artery causing a heart attack. This may require angioplasty and stenting. You may experience complication in the groin, such as bleeding, collection of blood (haematoma) or bulge on the vessel (aneurysm).

It is possible to damage the normal electrical system while performing the procedure. If this happens there is a small risk of you requiring a pacemaker.

There is a risk of collapsing the lung (pneumothorax) as the wires are passed under the left collarbone. If this happens you may require a tube inserting into your chest to reinflate the lung.

In some cases 'burning' the heart muscle may lead to bleeding around the heart (cardiac tamponade). This may require treatment by inserting a drain.

Any risks involved with the procedure will be discussed with you in more detail before you sign a consent form.

What alternatives do I have?

Having no treatment is sometimes an option for many people with certain types of abnormal heart rhythms. Drugs called anti–arrhythmics and beta-blockers can be very effective at reducing heart rate and irregular heart rhythms.

Occasionally other treatments include cardioversion (electric shock to the chest wall) and pacemakers, to regulate the heart rate. Your doctor would be happy to discuss any alternative treatments if they are applicable to you.

What can I expect after the procedure?

Following the procedure you will be taken back to the ward.

You will need to rest on the bed for a few hours with your leg flat. You will be able to eat and drink unless you require further tests. The nurse looking after you will check your pulse, blood pressure and observe the puncture site at regular intervals.

When can I resume normal activities?

You may be able to go home later the same day. You should rest for the remainder of the day. You will not be able to drive for 2 days. If you have a large goods licence you should not drive for six weeks.

You may resume normal activities the following day although you must not lift heavy objects for 1 week. You should take about 1 week off work. This advice will be discussed with you before you go home and you will be given an advice sheet.

For further information visit:

- www.lhch.nhs.uk
- www.heartrhythmcharity.org.uk
- www.afa.org.uk
- www.nhs.uk
- www.dipex.org

Or contact:

The British Heart Foundation heart helpline on 0300 330 3311.

If you require a copy of this leaflet in any other format or language please contact us quoting the leaflet code and the language or format you require.

إذا لديك الرغبة في الحصول على نسخة من هذه المعلومات بأيّ لغة أخرى أو بشكل آخر (على سبيل المثال بخطوط كبيرة) ، الرجاء الاتصال علينا على الرقم 1257 600 0151 موضحاً الشكل او اللغة التي ترغب فيها.

如果您想索取一份以其他語文或形式(如大字體)編印成的資料傳單,請致電 0151 600 1257向我們查詢,並説明您所需要的形式和語文。

ئەگەر ئەم زانياريانەت بەھەر زمانيكى تر ياخود شيوازيكى تر دەريت (بۇ ئموونە بە چاپى گەورە) ئەوا تكايە بە ژمارە تەلەفۇنى 1257 600 0151 پەيوەندىمان پيوە بكە و ئاماژە بدە بەر زمانەي ياخود شيوەيەي كە دەتەريت

W celu uzyskania niniejszej informacji w innym języku lub formacie (np. dużym drukiem), prosimy o kontakt z nami pod numerem 0151 600 1257 podając wymagany format lub język.

Haddii aad u baahan tahay koobiga wargelintan oo luqad ama qaab kale (sida far waaweyn) fadlan nagala soo xiriir 0151 600 1257 adiga oo noo sheegaya luqadda ama qaabka aad wax ku rabtid.