AF Association 843-415-1886 info@afa-us.org www.afa-us.org

# **Recovering from ablation for atrial fibrillation**

This fact sheet has been written and prepared by patients, for patients, in the hope of allaying many of the fears and anxieties which often occur following ablation for atrial fibrillation. It is the result of peer discussion and hopefully includes many of the "things nobody told me" which had caused worry in the weeks and months following an ablation.

Ablation works by creating scar tissue on the inside surface of the heart which blocks the rogue electrical impulses which cause AF. The scars can be made by heat or intense cold but do not form instantly. They can take up to three months or more and that period is often referred to as the blanking period. You may therefore still get symptoms during this time that can still settle down subsequently.

## Rest

Although you may not have a great scar to show it, your heart has suffered some trauma and will take time to recover. The general recommendation is to take things very easy for the first week (short walks and only a single flight of stairs, generally within the house, or not very far outside), and a slow gentle progression following that. Some very fit or younger patients may find that they can return to work guite guickly but many others take much longer. Above all listen to your body and don't push yourself too hard. If you are still working then discuss your condition with your employer and explain that the situation may be fluid. Do not lift anything heavy for at least a week. Above all, you are not a failure and everyone's recovery is very individual, so do not be rushed.

## Palpitations

Because the heart does not heal immediately you may experience some palpitations, ectopic beats (missed beats) or even runs of AF in the



## Sore throat

You may find that you have a sore throat after your procedure. This is probably due to having had a transesophageal echocardiogram (TOE) during the procedure to check for any clots which may be present in your heart. It may also be caused by breathing equipment if you had a general anesthetic. Treat as any other sore throat and it will soon pass.

## Migraine aura

A migraine may shock and worry you but is perfectly normal. Not everybody suffersfrom this but it is quite common usually about two to three days after the ablation. It results from the transseptal puncture needed to gain access from the right to left atria. You may find vision disturbance with either flashing lights or blind spots in your sight often with a following headache. Don't worry, you are not having a stroke or going blind and the symptoms will pass after a week or so. However, if you are concerned then contact your physician or if you feel very unwell go to the ER.

## **Ectopic beats**

Ectopic beats, which feel like missed beats, can be common following ablation. They are considered harmless but can be distressing when frequent. This does not mean that your ablation has failed. Try slow deep breathing. Use your diaphragm rather than shoulders and breathe slowly and deeply for at least five minutes, slowing your breathing down to less than six breaths a minute.



Founder: Trudie Lobban MBE, FRCP (Edin) Executive Director: Francesca Lobban Published January 2009 / Reviewed May 2023





AF Association 843-415-1886 info@afa-us.org www.afa-us.org

#### **Groin/leg bruises**

You may find that you get a colorful bruise where the entry wound for the catheter is. You may even find a hard lump there. Don't worry as this is quite normal. When it finally fades away you know that your heart is beginning to heal so it can be a useful guide to when you can start pushing your recovery a little more. However, if you are concerned at all about infection (pus, increasing redness of the area, temperature, poor wound healing), or the wound site in general, contact your physician.

#### Fast heart rate

It is not uncommon to find that your heart rate is a faster than before your AF started and you had your ablation. Typically, this may be around 85-90 bpm which is a common side effect of the ablation. It may take six to eight months (or even longer) to return fully to earlier levels but don't worry, it will normalize. Again it does not mean that the ablation has failed.

#### **Bloating and digestive problems**

Some people find that they suffer fromabdominal discomfort post-ablation. This is probably caused by irritation to the esphagus during the procedure, or sometimes to a nerve near the heart known as the vagus nerve. It will usually disappear within a few days but can be alleviated with normal indigestion remedies . Alternatively, see your GP for other remedies if needed.

#### Depression, anxiety, worry

Many patients suffer with anxiety post-ablation worrying that it has not worked due to some of the above-mentioned symptoms. This can be a highly emotional time and these feelings are not uncommon, so please do not worry if you fall into this category. Try to remain positive but if you find that you have such difficulties, then do talk to your doctor and look into things like mindfulness and cognitive behavioral therapy which can be most helpful.

#### When to seek medical help

There are a few rare but potentially serious complications that can occur after an AF ablation. These will have been discussed with you before the ablation is done. If you feel very unwell or experience any new or unusual symptoms such as sudden weakness in an arm/leg and/or unexplained fevers it is worth seeking medical attention urgently. If you are just not sure about some symptoms that do not bother you too much then you can always seek help less urgently from the Cardiologist or GP.

Acknowledgments: AF Association would like to thank all those who helped in the development and review of this publication. In particular, thanks are given to Francesca Lobban.



Founder: Trudie Lobban MBE, FRCP (Edin) Executive Director: Francesca Lobban Published January 2009 / Reviewed May 2023

