

Questions

to ask your doctor/consultant before the procedure:

- What is an ablation?
- Why have I been offered an ablation?
- What are the different types of ablations?
- With so much choice, which type of ablation will I have?
- What are the benefits of having an ablation?
- What are the risks?
- Preparing for an ablation
- What to expect on the day of my procedure
- Recovering from an ablation
- Will I experience any side effects post ablation?
- Will I be able to stop taking a prescribed antiarrhythmic and anticoagulant medication?
- How long will it take to recover and return to my daily routine, such as work, exercise etc?

"I was anxious about having the procedure, so I called the Patient Services Team for advice, they reassured me and emailed me the Ablation Discussion Guide, it gave me an insight of what to expect of which I was very grateful for."

Jenny, Kent

AF is the most common arrhythmia related to age and lifestyle. The lifetime risk of AF over the age of 40 is estimated to affect 1 in 3 people.

"The Ablation Discussion Guide is incredibly helpful, packed full of information about what to expect before and after an ablation – I highly recommend reading it."
- Ian, Monmouthshire



If you have any questions, require support, advice, or additional information regarding patient resources and upcoming events, please contact our Patient Services Team:

Call:

+44 (0)1789 867502

Email:

info@afa.org.uk

or visit:

www.afa.org.uk

To view our patient resources, scan the QR code below:



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FOR PATIENTS & CAREGIVERS

Ablation for Atrial Fibrillation Discussion Guide

This guide is to help provide support and advice to individuals who have been offered an ablation



What is an ablation?

Where drug therapy alone is not a solution for the management of patients with AF, an ablation procedure may be offered as an effective treatment option to manage all types of AF. In this minimally invasive procedure, a flexible tube/wire (catheter) is inserted into a vein via a small incision in your groin, the catheter passes through the body before entering the heart. Once the target area of the heart has been identified, the section of the heart is 'ablated' where the abnormal electrical activity is taking place. The ablation is performed by a freezing/burning/electrical pulse technique to prevent and block the electrical activity. The procedure is performed under either sedation or general anaesthetic which will have been decided in advance with your doctor.

Why have I been offered an ablation?

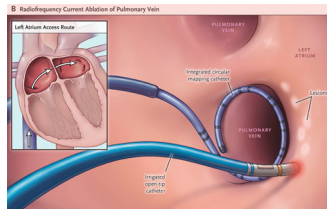
AF symptoms vary on an individual basis, you may find symptoms have an adverse effect on your daily life, or you may be intolerant to medications. Therefore, your consultant will have conducted the necessary assessments, reviewed all treatment options and decided whether this is the most appropriate treatment option for you. The decision to have an ablation will be a mutual agreement between you and your consultant.

What are the different types of ablation?

There are various types of ablation techniques, referred to as catheter ablation, however the most popular offered are:

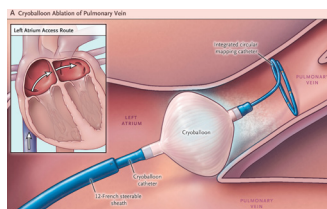
Radiofrequency Ablation (RFA)

RFA uses radiofrequency 'heat' energy to ablate targeted areas in the heart and prevent abnormal electrical currents.



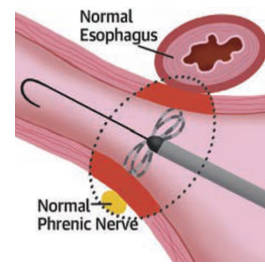
Cryoablation Ablation (CBA)

CBA is another minimally invasive procedure to treat the problematic symptoms of AF. The catheter is passed into the heart chamber and provides a freezing technique to ablate the selected area to prevent abnormal electrical currents from taking place.



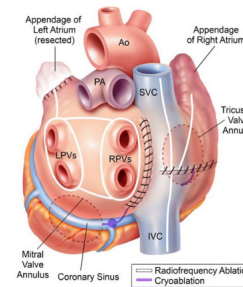
Pulsed Field Ablation (PFA)

PFA is a newer, non-thermal energy treatment that can be applied in a very precise and controlled way to specific areas of heart tissue. High energy pulses are used at therapeutic levels ablating the targeted areas of the heart. While relatively new in the UK, PFA offers a safe and effective way to treat AF without using heat or freezing. It more selectively targets the heart tissue needing treatment, with minimal impact on surrounding areas, allowing for a faster recovery.



Surgical Ablation

A procedure that blocks the faulty electrical signals in the heart that cause an irregular rhythm. This can be done as part of open-heart surgery (the Cox-Maze procedure) or through a smaller operation called the *mini-maze*. Both methods create small scars using heat or cold energy to help restore a steady heartbeat and rhythm, though recovery is usually longer than with catheter ablation.



What are the benefits of having an ablation?

Although there is no known permanent cure for AF, the desired outcome of an ablation is to halt, or significantly reduce your debilitating and unpredictable 'episodes' by aiming to restore normal 'sinus' heart rhythm. If you have any questions about success rates, please discuss with your consultant.

What are the risks?

When you consider having an ablation, it is important to remember that the aim is to improve your quality of life by reducing the burden of AF or eliminating your symptoms. All procedures can pose a potential risk, ranging from minor bruising, to rare complications such as perforation of the heart, leading to bleeding.

Preparing for an ablation?

Ahead of the procedure you will have had a pre-assessment with the doctor to discuss any questions or concerns. You should also have received advice about your medication and avoiding consumption of food/drink if necessary. Please ensure you have transport to and from the appointment as it is advised to avoid driving for a minimum of 48 hours. Do not worry if you are not experiencing an AF episode on the day of the procedure as this can be induced by the medical team to highlight the area to be ablated.

Recovering from an ablation?

Following the procedure, you will be shown to a recovery room to rest and lie flat, the wound in the groin will have been dressed, you will be given post care advice as well as feedback about the procedure and issued with your discharge notes. You may be able to go home the same day as your ablation. If possible, to promote your recovery period, it is advisable to arrange some home help, to allow you to avoid strenuous tasks such as heavy lifting, shopping, and cooking. It is also advisable to avoid exercise until you have discussed this at your follow up appointment with the doctor. Everyone recovers at a different rate, so it is important to rest, listen to your body and recover!

Will I experience any side effects post ablation?

- Common side effects include:
- Palpitations
- Groin/leg bruising
- Sore throat
- Bloating/digestive symptoms
- Migraine Aura
- Ectopic beats
- Minor feelings of depression or anxiety

If you are concerned about anything, follow the instructions on your discharge notes and seek medical advice.

Will I be able to stop taking a prescribed antiarrhythmic and anticoagulant medication?

Your doctor will be able to provide immediate feedback and answer any questions about your medication and post-care. This will be included in your discharge notes and also sent to your GP to be added to your medical record. A follow up appointment will be scheduled to review and monitor your recovery.

How long will it take to recover and return to my daily routine – work, exercise etc?

It is difficult to put a time limit on recovery, as everyone responds and recovers at a different rate. It is important to listen to your body and advice from your doctor. If you suspect any signs of infection, experience new or prolonged symptoms/side effects, do not hesitate to contact your doctor immediately or call 111 for advice.

It is very important to continue looking after your health in the long term, after you have had an ablation. If you have high blood pressure, it is really important to make sure that that is kept under control and speak to your doctor about any other medical conditions that could be contributing. Your doctor can also discuss healthy lifestyle choices like stopping smoking, reducing alcohol intake and the right level of physical activity for you.