CATHETER ABLATION

WHAT IS CATHETER ABLATION?

Catheter ablation is a procedure used to treat abnormal heart rhythms such as atrial flutter or atrial fibrillation with radiofrequency. If your EPS revealed an abnormality in an electrical pathway that is causing a rapid heart rhythm, your doctor may use ablation to treat the problem.

Ablation is usually performed right after the EPS, in the EP lab. A specialized catheter with a small electrode at the tip is applied to the area of the pathway that is causing the abnormal rhythm. Energy is then passed through to the catheter tip, destroying that area of the pathway.

WHEN IS ABLATION NECESSARY?

There are many drugs that can be used to treat abnormal heartbeats but sometimes these drugs are not effective, or not the best treatment for a particular condition. For some heart rhythm problems, it is better to interrupt part of the heart’s electrical system. Successful ablation may treat the problem and eliminate the need to use these drugs.

HOW DO I PREPARE FOR AN EPS AND ABLATION?

Your doctor will give you specific instructions. Generally, patients should:

- Not eat or drink anything after midnight the day before the procedure; you may have sips of water to take your medication
- Bring a complete list of medications you are currently taking with you to the hospital
- Your doctor may want you to stop taking certain medications for one or more days before the procedure. Make sure you know which medications to take and which ones to hold
- Pack a small bag for your hospital stay.
- Make arrangements for someone to drive you to and from the hospital, since you will not be permitted to drive after the procedure

WHAT HAPPENS AFTER THE PROCEDURE?

After the procedure, the catheters are removed and pressure is applied to the insertion site for

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10 – 20 minutes. You will need to lie flat on your back for 4 – 6 hours. Most patients can be discharged the same day as the procedure.

After you go home, you should:

- Limit your activity for a couple of days. You can be up and about, but avoid heavy lifting and strenuous physical activity. Ask your doctor when you can fully resume your normal activities.
- Notice small lump or bruise at the catheter insertion site. This is common and should disappear within a month. Call your doctor if the insertion site becomes painful or warm to touch or if you develop a fever over 100°F.
- Call your doctor if you experience rapid heart rhythm again, or if you experience dizziness, chest discomfort or shortness of breath
- Check with your doctor about your medications. You may be able to stop your antiarrhythmic medications if the ablation was successful.

WHAT ARE THE COMPLICATIONS?

Complications are unusual. Bleeding sometimes occurs where the ablation catheter was put into the vein. Ablation sometimes destroys more conduction tissue than desired and causes heart block; if this happens, you may need a pacemaker. Rarely, the heart rhythm abnormality comes back after the ablation, and the procedure may need to be done again. The catheter may cause other damage to the heart muscle depending on where the electrical pathway is in the heart. Ask your doctor how these risks apply to you.