



University
Hospitals Sussex
NHS Foundation Trust

Ablation for atrial flutter

Cardiac

Patient information

What is atrial flutter?

Atrial flutter is an arrhythmia (also called heart rhythm problem) that involves the upper chamber of the heart, the atria.

There are two types of Atrial flutter:

Typical flutter: it usually happens in the right atrium (RA) around the tricuspid valve, which is a flap between the upper and the lower right heart chambers (right ventricle and right atrium).

Atypical flutter: it does not originate in the right atrium (RA). The flutter may happen, for example, if you have had mitral valve repair or replacement, which is a flap between the upper and the lower left heart chambers (left ventricle and left atrium).

Why does flutter happen?

Atrial flutter can occur when an electrical impulse is trapped in a circle of tissue in the right atria and goes around at a rate of 300 beats per minute (bpm), the normal range is within 60 to 100 beats per minute.

Is the atrial flutter dangerous for me?

Atrial flutter is not life threatening.

You may feel:

- Unwell.
- Breathless.
- Tired.
- Lightheaded.
- High heart beats (palpitation).

However, some people are not aware of any symptoms.

People who have flutter **may** at other times have atrial fibrillation, a heart condition that causes an irregular and often abnormally fast heart rate. Both can cause a fast pulse; even though with flutter it may still feel regular.

Both rhythms can increase the risk of stroke. (individual stroke risk assessment is very important) This **may** happen because of the blood pooled in the atria (upper heart chambers) **may** lead to the formation of a clot. This clot **may** then dislodge and travel to the brain, causing a blockage in the brain's blood system (stroke).

What will happen during my catheter ablation for atrial flutter procedure?

Flutter ablation is offered to most people with typical flutter as it is very effective treatment with low-risk rates. The procedure for typical flutter takes around 1 to 2 hours.

The procedure takes place in a room like an operating theatre, called a cath lab.

It involves:

- Passing several fine tubes, called catheters, into the heart via the vein at the top of the leg, through a small puncture in the skin.
- Having a local anaesthetic in the groin to make you feel comfortable.
- Using a heated catheter tip to carry out the ablation. This means burning away the abnormal connections in the heart that cause the atrial flutter.

This is performed using x-ray guidance.

The chance of successfully curing the typical flutter with catheter ablation is around 95%.

What do I expect when I go home?

You may go home the day of the procedure, or the following morning, depending on the time of your procedure and your recovery.

Once you are home you may feel tired after the procedure and should rest if needed.

Please be aware

Avoid lifting heavy objects for 7 days.

Avoid intense exercise for 5 days, gradually returning to your normal level of exercise.

Try not to drive for 5 day (the DVLA recommends 2 days) you should not fly for 7 days.

Most people can resume normal activities within 2 weeks, but this can vary, for some it will take longer.

You may be able to return to work within a week of the procedure or you may need a few weeks to recover, depending on how you are feeling and the type of job you do.

The chance of the palpitations returning is low.

The atrial flutter **may** come back mainly because:

- The initial treatment was not completely effective.
- The area of the heart that was ablated (burned away) is still healing.

The procedure can usually be repeated if the palpitations return.

Common complications (unlikely to be serious)

Pain

- Chest pain can happen during and after the procedure due to inflammation around the heart.
- Groin pain can happen from the puncture site. We recommend taking regular paracetamol for a few days to help with the pain.

Bleeding

- Some blood loss from the groin straight after the procedure is common. In rare cases another procedure is needed to stop the bleeding.

Groin bruising/swelling

- Bruising can take several weeks to disappear because of the medications you have taken to thin your blood.

What symptoms should I look out for?

Seek medical help via the hospital if you have:

- Increased swelling and, or increase pain from the groin puncture site.
- Increased breathlessness.
- Severe chest pain.

Uncommon complications (can be serious)

Stroke (1 in 1000 people)

This can happen if a small clot or air bubble blocks blood supply to a part of the brain.

Blood around the heart (1 in 500 people)

If a puncture is made to the heart causing blood to leak out, a drain may be needed to be inserted to remove the blood leakage.

Permanent pacemaker (5 in 1000 people)

This could be needed if the normal electrical system of the heart is damaged.

Useful contacts and websites

Arrhythmia nurses

01273 067041

uhsussex.rrhythmia.nurses@nhs.net

Arrhythmia Alliance

<http://www.rrhythmiaalliance.org.uk/>

British Heart Foundation

<https://www.bhf.org.uk/>

This information is intended for patients receiving care in Brighton & Hove or Haywards Heath.

Ref. number: 2426

Publication date: 11/2024

Review date: 11/2027

© University Hospitals Sussex NHS Foundation Trust Disclaimer:

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

