Nuts and Bolts of Atrial Fibrillation Ablation

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Afib is associated with an increased risk of stroke
Afib makes the heart beat fast and irregular
<table>
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<th>Am I a candidate for Afib ablation?</th>
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<td>• Recurrent Afib despite taking heart rhythm pills</td>
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<tr>
<td>• Flecainide (Tambocor)</td>
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<td>• Propafenone (Rhythmol)</td>
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<td>• Sotalol (Betapace)</td>
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<td>• Tikosyn</td>
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<td>• Amiodarone (Pacerone)</td>
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Anatomy of the heart
What needs to be done before the procedure?

- Visit with your physician to discuss the pros and cons of the procedure
- Certain tests may be ordered
  - Echocardiogram (ultrasound)
  - Transesophageal echo
  - MRI or CT scan of the heart
  - Heart monitor
What to expect the day of procedure

- Arrive in the morning
- Nothing to eat after midnight
- IV insertion, labs drawn
- Meet the team taking care of you that day
  - Doctor or doctors
  - Nurses
  - EP lab staff
What do I do with my medications?

• Blood thinners sometimes are stopped the day before procedure
  • Depends on what type of blood thinner
  • Ask you doctor about your specific situation

• Usually, other medications can be taken with sip of water.
Will I be awake? Will it hurt? Can I watch?

- Groin area will be numbed.
- You will be very sleepy, or asleep during the procedure.
  - Conscious sedation ("Twilight" sedation)
  - General anesthesia may be used
- Pain should not be part of the procedure.
EP Lab
Surgical ablation
aMAZE Trial

• Patients with persistent Afib
• Goal is to eliminate Afib
• Extra benefit of possibly eliminating need for blood thinners.
What happens after the procedure?

- You will wake from sedation, go to recovery area
- Family can join you at that time
- May be admitted to the hospital or go home the same day.
- Resume medications, including blood thinners.
What happens after the procedure?

• Occasionally chest pain will occur.
• Follow-up with your physician in 4 weeks.
• Repeat testing may be needed
  • Echo
  • Heart monitor
What if the Afib comes back?

- Sometimes your afib may flare up in the first 4 weeks.
- If afib continues, medications or repeat ablation may be necessary.
  - Average number of procedures needed is 2
Summary

• Many patients are candidates for Afib ablation.

• There are several different approaches to Afib ablation.

• Your doctor will help you work through the process—from start to finish.