



## Atrial Fibrillation (AF) Ablation

### 1. What is an atrial fibrillation (AF) ablation?

This procedure is used to treat some abnormal heartbeats. An extra electrical circuit in the heart usually causes the abnormal heartbeat.

A needle with a tube connected to it will be put in your arm. This is called an intravenous line or IV.

You will have an injection of local anaesthetic into the groin. A number of very small cuts are made in the skin. A special catheter is passed up through the vein in the groin into your heart. The doctors can see the catheter using x-rays.

The catheters record electrical signals from the heart. This allows the doctor to work out what abnormal heart beats you have. This part of the procedure is called an Electrophysiology Study (EPS).

Ablation delivers electrical energy to the inside of the heart to change abnormal tissues. The heat energy cuts off the abnormal pathways and may prevent abnormal heartbeats.

A mild burning feeling may be felt in the chest when the abnormal pathway is being cut off. This is the 'ablation'. The burning feeling will lessen when the ablation stops.

**50-70% of these procedures are successful.**

**30-50% may need to have this procedure again.**

### 2. My anaesthetic

This procedure will require an anaesthetic. If you have any concerns, discuss these with your doctor.

### 3. What are the risks of this specific procedure?

In recommending this procedure your doctor has balanced the benefits and risks of the procedure against the benefits and risks of not proceeding. Your doctor believes there is a net benefit to you going ahead. This is a very complicated assessment.

There are risks and complications with this procedure. They include but are not limited to the following.

**Common risks and complications (more than 5%) include:**

- Minor bruising at the puncture site.

**Uncommon risks and complications (1- 5%) include:**

- Develop other arrhythmia.
- A hole is accidentally made in the heart or heart valve. This will need surgery to repair.
- Chest pain.
- Major bruising or swelling at the groin puncture site. This (rarely) may need surgery.
- A stroke. This may cause long term disability.
- Blood clot in the leg (DVT) causing pain and swelling. In rare cases part of the clot may break off and go to the lungs.
- Skin injury from radiation. This may cause reddening of the skin.
- A higher lifetime risk from exposure to radiation.
- Pericarditis. This is an inflammation of the heart sack that can cause chest pain for some weeks after the procedure.

**Rare risks (less than 1%) include:**

- Narrowing of the veins from the lungs to the heart. This can be serious, causing breathlessness and may require further procedures.
- Heart attack.
- Damage to the phrenic nerve that controls the diaphragm (breathing muscle).
- Atrial Oesophageal fistula. A hole forms between the gullet and heart. This can cause vomiting of blood and a stroke. This may be life threatening.
- Death as a result of this procedure is rare.

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