ATRIAL FLUTTER



In atrial flutter, the electrical signal travels along a pathway within the right atrium. It moves in an organized abnormal circular motion, or "circuit," causing the atria to beat faster than the ventricles of your heart. Atrial flutter makes a very distinct "sawtooth" pattern on an electrocardiogram (ECG), a test used to diagnose abnormal heart rhythms.

Symptoms of Atrial Flutter

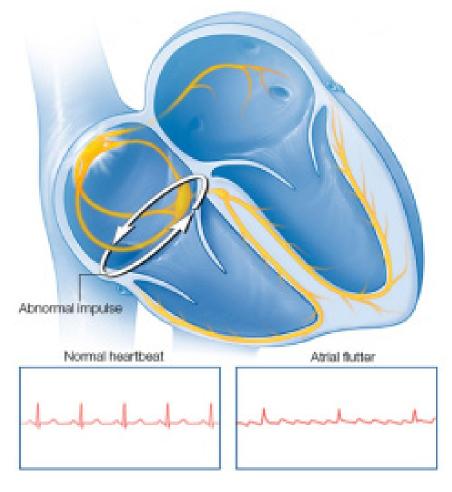
Some people with atrial flutter may feel no symptoms at all. Others may experience:

- Feeling tired or having low energy
- Heart palpitations (feeling like your heart is racing, pounding, or fluttering)
- Fast, steady pulse
- Shortness of breath
- Trouble with everyday exercises or activities
- Pain, pressure, tightness, or discomfort in your chest
- · Dizziness, feeling lightheaded, or fainting

Risk Factors for Atrial Flutter

Some medical conditions increase the risk for developing atrial flutter. These include:

- Heart failure
- Previous heart attack
- Acquired or congenital valve abnormalities
- High blood pressure
- Thyroid dysfunction
- Alcoholism (especially binge drinking)
- Chronic lung disease
- Acute (serious) illness
- Diabetes



Complications of Atrial Flutter

- Stroke: Atrial flutter makes it harder for the heart to pump blood effectively. With the blood moving more slowly, it is more likely to form clots. If the clot is pumped out of the heart, it could travel to the brain and lead to a stroke.
- Heart failure: Without treatment, atrial flutter can cause a fast heart rate for long periods of time. When this occurs, the heart muscle can become weak and tired. This can lead to heart failure.

Diagnosis

- → **ECG:** atrial flutter is diagnosed by an electrocardiogram (ECG), which is a test performed in a doctor's office that records the electrical activity of your heart.
- → **Heart Monitors:** Record the heart's rhythm while wearing the device. These include:
- A Holter Monitor is worn for 24-48 hours
- · An Event Monitor for 2-4 weeks.
- → Apple Watch: These can take a quick reading of your heart rhythm that you can send to your doctor for review. Please ask your nurse for more information on this.

Treatment: In general, treatment of atrial flutter has 3 components or goals:

1. Anticoagulation: As noted, there is a risk of a blood clot with AFL. If this clot travels, it can cause a stroke. Anticoagulants are prescribed to prevent a blood clot. Options include warfarin, Eliquis, Xarelto or Pradaxa. Doctors can calculate a patient's stroke risk based on age and other medical conditions (such as heart failure, high blood pressure and diabetes). Your doctor will discuss with you if an anticoagulant is recommended for you

2. Rhythm or Rate Control:

- A) Rhythm Control: This aims to restore and maintain normal (sinus) rhythm. By doing this the heart pumps more efficiently alleviating symptoms. This can be done by three different ways
- *i) Cardioversion:* This is a brief shock performed at the hospital as an outpatient procedure used to temporarily restore sinus rhythm
- *ii) Medications called antiarrhythmics:* examples are Amiodarone, Tikosyn, Sotalol, Flecainide, Propafenone, Mexiletine, Dronedarone.
- *iii)* **Ablation:** This is as an outpatient procedure that uses heat to create a line at the Cavotricuspid Isthmus (CTI) in the right atrium with the goal of interrupting the reentrant circuit thought to be responsible for atrial flutter.
- B) Rate Control: This slows down the heart rate, allowing the ventricles to pump more blood to the rest of the body. This can help relieve symptoms. Examples of medications used are Beta blockers (metoprolol, atenolol, carvedilol, nadolol, bisoprolol), calcium channel blockers (diltiazem, verapamil).

3. Lifestyle Modification:

Without addressing lifestyle factors such as obesity, smoking, excessive drinking, exercising regularly and treating conditions such as diabetes, hypertension and sleep apnea, other treatments are less likely to be successful.