

CARDIOVERSION



What is a Cardioversion?

A cardioversion is a medical procedure where an electric shock is used to try to restore your heart to its normal rhythm. It is performed under a general anaesthetic, administered by a qualified anaesthetist. It is usually performed as a day procedure with discharge the same day of the procedure.

Why is a Cardioversion required?

Cardioversions are generally used for atrial arrhythmias like atrial fibrillation or atrial flutter. The success rate depends upon the nature of the arrhythmia, how long it has been going on, as well as any underlying heart problems. Your cardiologist can discuss the likely success rate with you.

How is the Cardioversion performed?

The cardioversion is usually performed in the intensive care unit, coronary care unit or cardiac catheter laboratory. You will be attached to a cardiac monitor and an intravenous cannula will be inserted. The anaesthetic agent will be administered through the intravenous cannula and when you are asleep, defibrillator pads or paddles will be placed either on your chest or on your back and chest and an electric shock will be delivered to try to restore your heart to its normal rhythm. Several shocks may be required to restore the normal rhythm.

Is there any preparation for the test?

Prior to the cardioversion you will need to fast for at least 6 hours. Full details will be provided to you by your Doctor's secretary when arranging your procedure.

How long will the procedure take?

The whole procedure normally only takes 10-15 minutes.

Are there any risks?

Complications are rare. There is a risk with any general anaesthetic. The major risk with a cardioversion is a stroke. This is uncommon if you have been taking Warfarin at a therapeutic level for at least 3 weeks or if you are on other anticoagulants like Pradaxa. Sometimes a transoesophageal echocardiogram (TOE) will be performed to make sure there is no blood clot inside the heart prior to the cardioversion. Occasionally other fast or slow heart rhythms can be precipitated. These will usually be managed by medications or further cardioversion while asleep.

What happens after my procedure?

You will be observed until the anaesthetic has worn off and you will be allowed home after 2-3 hours. As you have had a general anaesthetic, you cannot drive yourself home, so you will need someone pick you up. Following the procedure it is common to have minor chest discomfort or skin irritation similar to mild sunburn.

***Should you have any specific queries relating to your procedure,
please discuss these with your Cardiologist.***