healthylivingNT

Cardioversion

What is a Cardioversion?

Cardioversion is defined as anything that converts the heart rhythm to normal. This information sheet deals with Elective Electrical Cardioversion. This is the procedure where a small electrical current is delivered to an abnormally beating heart to restore it to normal.

Why do I need a Cardioversion?

When the heart beats abnormally (known as an arrhythmia or fibrillation) blood doesn't get pumped effectively around the body. Because of this you may start to experience some symptoms such as dizziness, shortness of breath, tiredness and palpitations (heart racing). Your doctor has most likely tried you on medications to try to correct this (chemical cardioversion) but they have not been successful and your symptoms are affecting your day to day activity and heart function. With a successful cardioversion your heart rhythm will be restored to normal, otherwise known as sinus rhythm, and you will feel much better.

What will happen during the Cardioversion?

Prior to your cardioversion you will have been given instructions on when to fast, what medications to take and to have a shower as normal but apply no lotions or powders to your skin and remove all your jewellery. When you arrive for your procedure the nurse will confirm that you have done all of this and that you have signed a consent form. You will be attached to a heart monitor and an IV line will be inserted in your hand and a light anaesthetic to make you sleepy will be given through this. You generally wake with no recollection of the procedure due to the effects of the sedation, but for this reason need to be picked up by someone and should not drive or make important decisions for the rest of the day. Once you are asleep the doctor will deliver a small electrical current to your chest via a defibrillator machine. This electrical current causes all the heart muscle to contract simultaneously, stopping all disorganized (fibrillating) contractions and allowing the hearts natural pacemaker (the sinoatrial node) to take over and restore a normal heart beat. When you wake up you will have to stay to be observed for a few hours. When you are stable you will be allowed to go home or back to the hospital ward.

What are the risks?

Because the upper heart chambers (atria) are fibrillating (quivering) and do not contract effectively there is a risk of blood clots forming. Restoring the heart rhythm with cardioversion can cause these blood clots to dislodge when the heart begins contacting normally causing a heart attack or stroke. This risk can be minimized by thinning the blood prior to the procedure. This thinning is known as anticoagulation and drugs such as Aspirin, Warfarin or Heparin are usually prescribed for around 3 to 4 weeks prior to cardioversion and blood tests are taken to ensure the blood is thin enough. Sometimes some skin irritation can occur on your chest from the defibrillator pads, but a mild soothing cream will ease this.

What else do I need to know?

A normal heart rhythm is restored in most cases, however, later down the track some people may return to an abnormal rhythm again and a cardioversion may need to be repeated. If you start to feel any of the symptoms you had previously or are concerned in any way, please make another appointment to see your doctor.

For more information contact the Cardiac Educator at Healthy Living NT.

information sheet

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