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By Chris Tighe at 1:31 pm, Aug 15, 2018

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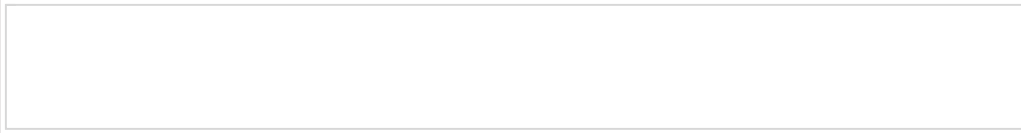
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Atrial Flutter



Atrial flutter is a problem with way your heart beats. Such problems, whether in the rhythm or speed of the heartbeat, are known as arrhythmias.

ARTICLES ON TYPES OF ATRIAL FIBRILLATION

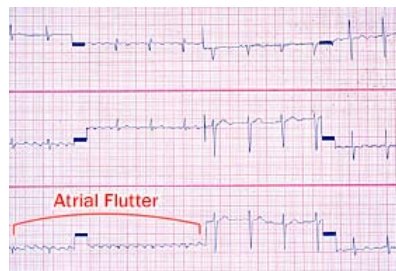
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▶ [Atrial Flutter](#)

What Happens in Atrial Flutter?

Your



heartbeat is a sort of electrical circuit. Sometimes the signals that cause it go awry. Atrial flutter results from an abnormal circuit inside the right atrium, or upper chamber of your heart. It beats extra-fast, about 250-400 beats per minute. A normal heartbeat is 60-100 beats per minute.

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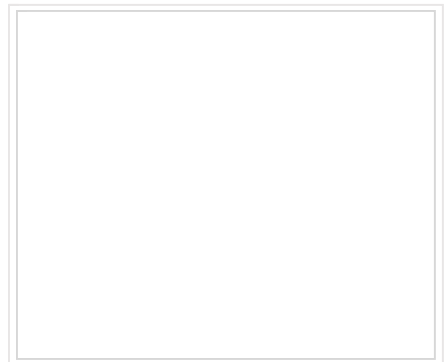
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The beat slows down when the signals reach the AV node, a bundle of cells in the upper wall of muscle between the ventricles, your heart's lower chambers. It usually slows the beats by a fourth or a half, or down to somewhere between 150 and 75 beats per minute.

An abnormally fast heart rate is called **tachycardia**. Because atrial flutter comes from the atria, it is called a supraventricular (above the ventricles) tachycardia.

Atrial flutter is closely related to another **arrhythmia** called **atrial fibrillation**. The two sometimes alternate back and forth.

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What Are the Risks of Atrial Flutter?

The main danger is that your heart doesn't pump blood very well when it beats too fast.

- Vital organs like the heart muscle and **brain** may not get enough blood, which can cause them to fail.



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The Warning Signs of Stroke

- [Congestive heart failure](#), [heart attack](#), and [stroke](#) all can result.

With proper treatment, atrial flutter is rarely life-threatening. [Complications](#) of atrial flutter can be devastating, but treatment almost always prevents them.

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Are There Types of Atrial Flutter?

Paroxysmal atrial flutter can come and go. An episode of atrial flutter usually lasts hours or days.

Persistent atrial flutter is more or less permanent.

What Causes Atrial Flutter?

Doctors don't always know. In some people, no root cause is ever found. But atrial flutter can result from:

- Diseases or other problems in the heart
- A disease elsewhere in your body that affects the heart
- Substances that change the way your heart transmits electrical impulses

Heart diseases or problems that can cause atrial flutter include:

- **Ischemia** : Lower blood flow to the heart due to [coronary heart disease](#),

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hardening of the arteries, or a [blood clot](#)

- **Hypertension** : High blood pressure
- **Cardiomyopathy** : Disease of the heart muscle
- **Abnormal heart valves**: Especially the mitral valve
- **Hypertrophy**: An enlarged chamber of the heart
- **Open-heart surgery**

Diseases elsewhere in your body that affect the heart include:

- **Hyperthyroidism** : An [overactive thyroid gland](#)
- **Pulmonary embolism** : A blood clot in a blood vessel in the [lungs](#)
- **Chronic obstructive pulmonary disease (COPD)**: A condition that lowers the amount of oxygen in your blood

Substances that may contribute to atrial flutter include:

- Alcohol (wine, beer, or hard liquor)
- Stimulants like [cocaine](#), [amphetamines](#), [diet pills](#), cold medicines, and even [caffeine](#)

Atrial Flutter Symptoms

Some people have no symptoms at all with atrial flutter. Others describe:

- [Palpitations](#) (rapid heartbeat or a pounding or fluttering sensation in the chest)
- Shortness of breath

- [Anxiety](#)

People with heart or lung disease who have atrial flutter may have these and other, more significant symptoms:

- [Angina pectoris](#) (chest or heart pains)
- Feeling faint or light-headed
- Syncope ([fainting](#))

When to Seek Medical Care for Atrial Flutter

Call your doctor:

- If you have any of the symptoms of atrial flutter
- If you're taking [medication](#) for atrial flutter, and you have any of the signs and symptoms described
- If you've been diagnosed and are being treated for atrial flutter, go immediately to a hospital emergency department if you:
 - Have severe [chest pain](#)
 - Feel faint or light-headed
 - [Faint](#)

Atrial Flutter Exams and Tests

When you tell him your symptoms, your doctor will probably suspect an [arrhythmia](#). Because other conditions can cause similar symptoms, the doctor will want to rule out the most dangerous ones. Also, you can't get treatment until the doctor knows your specific arrhythmia type. These tests can tell a lot about what's happening with your heart:

[Electrocardiogram \(EKG\):](#)

- Measures and records the electrical impulses that control your heartbeat
- Highlights problems in these impulses and abnormalities in the heart
- The tracings can help pinpoint the type of arrhythmia and where in the heart it comes from.
- EKG also shows signs of:
 - [Heart attack](#)
 - Heart ischemia
 - Conduction problems
 - Hypertrophy: Abnormal heart enlargement
 - Problems with levels of chemicals, like [potassium](#) and [calcium](#), in your heart tissue.
- If you don't have symptoms, your doctor might give you this test if she finds signs of atrial flutter when you're at her office for something else.

Holter monitor/ambulatory EKG

- You might get this test if you have atrial flutter symptoms but get a normal EKG result. That can happen because arrhythmia comes and goes. Or you may just have premature heartbeats, which aren't dangerous.
- This test can help your doctor find out if you have a significant arrhythmia and what type.
- You'll wear the monitor around your neck for a few days while you go about your normal activities.
- It's connected to EKG electrodes attached to your chest.
- The device records your heart rhythm on a continual basis for 24-72 hours.

Event monitor

- It's a smaller device that you to wear for a longer time
- You can turn it on when you feel something abnormal.
- Sometimes the doctor can implant an event recorder under the [skin](#), and it can be worn for several weeks or months.

Echocardiogram :

- This safe, painless [ultrasound](#) test uses sound waves to make a picture of the inside of your heart while it's beating and between beats.
- It identifies heart valve problems, checks how well your ventricles work, and looks for blood clots in the atria.
- It uses the same technique doctors use to check babies in the womb.

Goals of Atrial Flutter Treatment

The goals are to control the heart rate, restore a normal [sinus](#) rhythm, prevent future episodes, and prevent [stroke](#).

Control your heart rate: The first treatment goal is to control the ventricular rate.

- If you have serious symptoms, like chest pain or congestive [heart failure](#) related to the ventricular rate, the doctor will lower your heart rate rapidly with IV medications or electrical shock. (This is called [cardioversion](#).)
- If you have no serious symptoms, you may get medications by [mouth](#).

- Sometimes you may need a combination of oral drugs to control your heart rate.
- You might need surgery to control your heart rate or rhythm, but this is rare.

Restore and maintain a normal rhythm:

Some people with newly diagnosed atrial flutter go back to a normal rhythm on their own within 24-48 hours. The goal of treatment is to convert the atrial flutter to a normal sinus rhythm and make sure it doesn't come back.

- Not everyone with atrial flutter needs anti-arrhythmic medication.
- How fast your arrhythmia returns and the symptoms it causes partly determine whether you'll get anti-arrhythmic drugs.
- Medical professionals carefully tailor each person's anti-arrhythmic medications to produce the desired effect without creating unwanted side effects, some potentially lethal.

Prevent future episodes: You can do this by taking daily medication to keep you heart beating at a safe and comfortable rate.

Prevent stroke : This devastating complication of atrial flutter happens when a piece of a blood clot formed in your heart breaks off and travels to the [brain](#), where it blocks blood flow.

- Medical conditions that happen together, such as [congestive heart failure](#) and mitral valve disease, greatly raise the odds of having a [stroke](#).

- If you have persistent atrial flutter, you might need a blood-thinning drug to prevent your blood from clotting.

People who aren't as likely to have a stroke and those who can't take warfarin may use [aspirin](#). Aspirin is not without its own side effects, including bleeding problems and [stomach](#) ulcers.

Procedures That Treat Atrial Flutter

The first step in treatment is to restore a normal rate and sinus rhythm. There are two ways to do this: [medication](#) and defibrillation.

Electrical cardioversion : The doctor gives your heart a shock to regulate your heartbeat. She'll use paddles, or she'll stick patches called electrodes onto your chest.

First, you'll get medicine to make you fall asleep. Then, your doctor will put the paddles on your chest, and sometimes your back. These will give you a mild electrical shock to get your heart's rhythm back to normal.

Most people only need one. Because you're sedated, you probably won't remember being shocked. You can usually go home the same day.

Your [skin](#) may be irritated where the paddles touched it. Your doctor can point you toward a lotion to ease [pain](#) or [itching](#).

Radiofrequency ablation: This is a type of catheter ablation most often used for atrial flutter. Your doctor puts a thin, flexible tube into a [blood](#) vessel in your leg or neck. Then she guides it to your [heart](#). When it reaches the area that's causing the arrhythmia, it sends out radiofrequency energy (similar to microwave heat) that

destroys those cells. The treated tissue helps get your heartbeat regular again.

Atrial Flutter Medications

The choice of medication depends on how often atrial flutter happens, the root cause, your other medical conditions and overall health, and the other drugs you take. The classes of medications used in atrial flutter are:

Heart rate medicines: The most common way to [treat atrial fibrillation](#) is with drugs that control your heartbeat. These slow your rapid heart rate so your heart can pump more effectively. Most people take a medication called digoxin (Lanoxin).

You may require additional drugs. Some are called beta-blockers. They also slow your heart rate:

- [Atenolol \(Tenormin\)](#)
- [Bisoprolol \(Zebeta, Ziac\)](#),
- [Carvedilol \(Coreg\)](#)
- [Metoprolol \(Lopressor, Toprol\)](#)
- [Propranolol \(Inderal, Innopran\)](#)
- [Timolol \(Betimol, Istalol\)](#)

Others are known as calcium channel blockers. They slow your heart rate and cut the strength of contractions. You might get:

- [Diltiazem \(Cardizem, Dilacor\)](#)
- [Verapamil \(Calan, Calan SR, Covera-HS, Isoptin SR, Verelan\)](#)

Heart rhythm medicines: They slow the electrical signals to bring your heartbeat into what's called a normal sinus rhythm. These treatments are sometimes called chemical [cardioversion](#):

Sodium channel blockers, which slow your heart's ability to conduct electricity:

- [Flecainide \(Tambocor\)](#)
- [Propafenone \(Rythmol\)](#)
- [Quinidine](#)

Potassium channel blockers, which slow the electrical signals that cause AFib:

- [Amiodarone \(Cordarone, Nexterone Pacerone\)](#),
- [Dofetilide \(Tikosyn\)](#)
- [Sotalol \(Betapace, Sorine, Sotylize\)](#)

Anticoagulants: These drugs make your blood less able to clot. This lowers the odds that a blood clot will form in the heart or in a blood vessel and lead to a stroke.

- [Apixaban \(Eliquis\)](#)
- [Aspirin](#)
- [Clopidogrel \(Plavix\)](#)
- [Dabigatran \(Pradaxa\)](#)
- [Enoxaparin \(Lovenox\)](#)
- [Heparin](#)
- [Rivaroxaban \(Xarelto\)](#)
- [Warfarin \(Coumadin, Jantoven\)](#)

Atrial Flutter Care at Home

Most people known to have atrial flutter will be taking prescribed drugs. Avoid taking any stimulants. Talk to your doctor before taking any new medications, herbs, or [supplements](#).

Next Steps and Beyond

Atrial flutter does raise your chance of having a stroke. But if you don't have other [heart disease](#), your outlook is generally quite good. If it happens once without serious heart or lung disease, you may never have it again. If you do have other [heart disease](#), your atrial flutter may come back. If that happens, you should see a heart specialist (cardiologist).

WebMD Medical Reference | Reviewed by [James Beckerman, MD, FACC](#) on May 14, 2018

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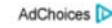
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