

Electrophysiological Studies and Ablation

Introduction

The Covid pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

Please read the following information in conjunction with the staying healthy guidance appropriate for your condition.

What is EP?

The studies (known as 'EPS' for short) involve introducing a number of wires (electrodes) by way of a vein in your right groin up into the heart. The electrodes will measure the activity of your heart's electrical system, mapping out any fast or irregular heartbeats. The electrodes will usually be able to relay information about which area(s) of the conduction system is responsible for the palpitations and other symptoms that you are experiencing.

You were referred to see the consultant electrophysiologist (a specialist cardiologist), because your symptoms and heart tracings indicate that the electrical signals within your heart have not been working properly.

Your consultant will have reached a diagnosis as a result of previous tests you will have had and will be happy to discuss this with you. Whatever the specific diagnosis, your heart will intermittently be beating abnormally.

You may also suffer from episodes of:

- Palpitations
- Dizziness
- Breathlessness.

It may be that you are suffering from one of the following conditions:

- Supra ventricular tachycardia (SVT)
- Wolf-Parkinson-White syndrome (WPW)
- Atrial flutter
- Atrial fibrillation
- Ventricular tachycardia

All the above result in abnormal heart rhythms (arrhythmias).

Please read the following information in conjunction with the staying healthy guidance appropriate for your condition.

Guidance for Patients

How the test is performed

Atrial Fibrillation

My Planned Care Patient Information Platform

The procedure for this involves electrically isolating the pulmonary veins in the left upper chamber of the heart. You do not need to be in atrial fibrillation at the time of the procedure. As with atrial flutter, your INR test must be above 2 for four consecutive weeks before your procedure.

Atrial Tachycardia:

This involves the study (for normal heart structure) and possible mapping of the upper chambers of the heart to identify the specific tissue responsible for the arrhythmia. Identifying the tissue can allow the area to be ablated.

Ventricular tachycardia

This procedure involves the study of the lower chambers of the heart to identify which area is causing the arrhythmia. The area may be ablated to prevent further arrhythmia. Identifying the tissue can allow the area to be ablated.

Contact Us

Professor Faizel Osman - Consultant Cardiologist

Telephone 02476 965767