

Medical Cardioversion

Several anti-arrhythmic drugs can be used to convert Atrial Fibrillation into sinus rhythm. Flecainide, sotalol, ibutilide (ibutilide is not available in the UK) and amiodarone can be selected. If this procedure is selected, no anaesthesia or sedation is necessary. The injection is usually (depending on the drug chosen) given over a period of 10 minutes to one hour.

During this time the ECG is monitored continuously and may be recorded from time to time. Usually the arrhythmia will terminate within minutes or at most 1 - 2 hours after the injection. The ECG is often monitored for some minutes to hours after the drug has been administered to be sure that any abnormal rhythm, which may emerge, may be quickly detected and treated. When the situation is

stable the patient is allowed to go home. If the Atrial Fibrillation has not been converted to normal sinus rhythm, another treatment strategy will be discussed with the patient. Cardioversion with medicines should follow the same rules as for electrical cardioversion.

It is possible to convert early onset Atrial Fibrillation by taking anti-arrhythmic medicines by mouth. However, at normal doses, this may take several days or weeks to occur. Amiodarone is usually the most effective agent, although sotalol and other drugs such as flecainide and propafenone may be effective in some patients. Administration of a higher than normal dose of anti-arrhythmic medication is usually more successful but this must be done initially in hospital to test the effect and safety of the technique.

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