Arrhythmia Alliance

www.heartrhythmalliance.org

Working together to improve the diagnosis, treatment and quality of life for all those affected by arrhythmias

Arrhythmia Checklist

Could your heart rhythm problem be dangerous?

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BLACKOUTS? • PALPITATIONS? • DIZZINESS?
SHORTNESS OF BREATH?

Do you or a member of your family experience any of the above symptoms?

Introduction

This checklist is designed to help you and your doctor determine whether or not you suffer from a heart rhythm problem. Also called arrhythmias, heart rhythm problems are a leading cause of symptoms and the most common cause of sudden death in the UK today. Despite this, very few doctors are trained to identify and treat arrhythmias, and very few people are aware that an electrical problem with the heart can usually be treated safely and effectively.

The checklist below was prepared with the guidance of the Medical Advisory Committee of Arrhythmia Alliance.

None of these on their own makes it certain that you have an arrhythmia, but if you or your family have experienced any of the above, you should read this checklist to help you decide what to do next.

- What is an arrhythmia?
  - A cardiac arrhythmia is when the heart beats too fast, too slowly or irregularly.
  - These beating problems arise because of faults with the heart's electrical system.
  - Arrhythmias are caused by, or arise from, a range of conditions including heart failure, blackouts, syncope, sudden cardiac arrest, heart attack, stroke and cardiomyopathy.

- Why are arrhythmias a problem in the UK?
  - There are over 100,000 deaths from arrhythmias in the UK every year.
  - There are approximately 100 heart rhythm specialists in the UK. It is important when being referred to ensure you are seen by one of these specialists because not all cardiologists are trained in this speciality.

- What is wrong with your heart, the plumbing or the electrics?
  - Some patients with a heart condition have a problem with the "plumbing". Usually this is coronary heart disease, which causes blockages to the arteries supplying blood to the heart muscle. When one of these arteries becomes furred-up, angina may result, and if one of these arteries suddenly blocks, a heart attack may result, with consequent scarring of the heart muscle. In other cases, the "plumbing" may be impaired by damage, narrowing or infection of one of the heart valves. Other patients may have sufficient damage to their heart muscle that the pump cannot cope, and this results in heart failure. Some patients may have completely healthy arteries, valves and heart muscle, and yet the "electrics" are faulty. This is like moving into a new home with new heating pipes, radiators and tank, but the timing switch is faulty, and the heating doesn't work as it should.

    However, patients with only an electrical fault may be at high risk or low risk. Some electrical disease can cause sudden death, such as inherited disorders like Long QT Syndrome. Others, like SVT, may be not be a threat to life, but may have a major impact on education, work and social life. When electrical faults cause arrhythmias, AND there is heart disease such as a previous heart attack, or heart failure, then the risks of death may be very high, and a cardiologist should be advising the patient in all cases.

Arrhythmia Checklist

- **Treating arrhythmias**
  - There are several treatment options, and many arrhythmias can be treated without drugs or side effects.
  - For many arrhythmias, a pacemaker-like device can completely resolve the problem almost instantly.

- **The importance of a heart rhythm tracing, electrocardiogram, or ECG**
  - The information that is of most use to your cardiologist or heart rhythm specialist is an ECG (electrical recording of the heart beat), recorded during your symptoms and therefore during your arrhythmia. This will make the diagnosis and treatment much easier and quicker. It is your RIGHT to ask doctors or nurses who record an ECG on you in the ambulance, surgery or hospital, for a copy for yourself, according to Government guidelines (the National Service Framework for Arrhythmias). Retain this copy, and do not give it away or lose it. Take it with you to a consultation with a cardiologist or heart rhythm specialist, but always keep a copy yourself for future use if needed.

Checklist

- Do you experience palpitations/shortness of breath? ☐
- Have you fainted or passed out DURING exercise, whilst emotional or when startled? ☐
- Have you ever fainted or passed out AFTER exercise? ☐
- Do you feel your heart beating rapidly or more rapidly than it should? ☐
- Do you feel your heart beating irregularly? ☐
- If you have had an ECG, did you keep a copy? ☐
- Have you ever had discomfort, pain or pressure in your chest during exercise? ☐
- Have you ever been diagnosed with an unexplained seizure or fit? ☐
- Have you been diagnosed with epilepsy which fails to respond to medication? ☐
- Have you ever had exercise-induced asthma not well controlled with medication? ☐
- Are there any family members who had a sudden, unexpected, unexplained death before age 40? (including cot death, car accident, drowning) ☐
- Are there any family members who died suddenly of heart problems before age 40? ☐
- Are there any family members who have had unexplained fainting or seizures? ☐
- Are there any relatives with certain conditions, such as:
  - Enlarged heart: hypertrophic cardiomyopathy (HCM) ☐
  - Heart rhythm problems: Long QT syndrome (LQTS) ☐
  - Short QT syndrome ☐
  - Brugada syndrome ☐
  - Marfan syndrome (aortic rupture) ☐
  - Heart attack at age 40 or younger ☐
  - Pacemaker or implanted defibrillator ☐

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iPACT International Pharmacists for Anticoagulation Care Taskforce

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Please remember these are general guidelines and individuals should always discuss their condition with their own doctor.

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