

Blood thinning tablets for fast heart rhythms detected by your pacemaker/defibrillator

Department of Cardiology

Information for Patients

Last reviewed: December 2023

Next review: December 2026

Leaflet number: 867 Version: 2

Introduction

Your pacemaker or defibrillator is a device that monitors and treats fast or slow heart rhythms. Your device check has found that an 'atrial high-rate episode' (AHRE). This leaflet explains what this is.

What is an atrial high-rate episode (AHRE)?

Pacemakers and defibrillators can keep track of the heart rhythm. They record high or low heart rates which may suggest a heart rhythm problem.

An AHRE is a fast heart rhythm seen by a device. It comes from the top chambers of the heart (the atrium). Many patients with AHREs can develop another rhythm problem called atrial fibrillation (AF). AHREs may be an early stage of AF.

AF is a common type of heart rhythm problem.

- It is confirmed by an ECG (a test that checks for problems with the electrical activity of the heart).
- It cannot be confirmed using your device recordings.
- AF can raise the risk of blood clotting and stroke.
- Patients with AF are offered 'blood thinning' tablets, called anticoagulation. These can reduce the chance of stroke.
- We assess your risk of stroke and the need for blood thinning tablets based on your specific needs.

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If blood thinning tablets are needed in AF, why isn't it the same for AHREs?

AF is confirmed with an ECG at the time of the abnormal heart rhythm. AHREs are electrical signals recorded by the pacemaker. These may have happened since your last check. The need for blood thinning tablets has only been studied in patients with AF and not AHREs.

AHREs have a small risk of stroke but it is not known if blood thinning tablets reduces this risk.

Do I need blood thinning tablets?

There is some evidence that AHREs that last longer than 24 hours have a higher risk of stroke than if it less than 24 hours. At Glenfield Hospital, we have decided blood thinning tablets should be offered to those at the highest risk:

- An AHRE lasting longer than 24 hours.
- An AHRE in any patient who has had a stroke in the past.

It is important to be aware that blood thinning tablets are licenced for AF and not AHREs. We feel that the benefits of blood thinning tablets are greater than the risk in this setting.

What should I do now?

- We will send your GP a letter. This will say that an AHRE has been found at your recent device check.
- They will be asked to assess your stroke risk.
- You will need to make an appointment with your GP to discuss if blood thinning tablets are needed.

Contact details

If you have any questions or concerns you can call the Pacemaker Clinic on 0116 258 3837.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
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