



My recovery after an ablation procedure

Patient Information

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My recovery

Immediately after ablation procedure

You should remain in bed for a few hours depending upon on the type of procedure and when the tubes (or 'sheaths') are removed from your groin.

Your nursing team will monitor you and manage your wound.

- If the tubes are removed immediately at the end of the procedure in the catheter lab you will have a dressing or pressure bandage applied to the groin and you will likely need to remain in bed for 4-6 hours.
- As long as tubes remain in your groin or a pressure bandage is applied to your groin, your leg should remain still and you should not bend your leg or sit up.
- After the immediate recovery period, your groin will be examined by the care team, and on their recommendation, you may then cautiously get out of bed.

After discharge

- Bandage advice: remove your bandage the day after the treatment and clean the skin with mild soap and water and dry carefully.
- For 3-4 days (or until the skin has healed), you should not bathe nor swim but you may shower.
- Rest your groin and do not move around too much. For the first two weeks, you should refrain from exercise or undertaking strenuous physical activity.
- You should not drive your car for a week.

It may be possible that you experience these normal symptoms after the procedure:

- your groin is somewhat swollen and blue
- your groin and/or upper leg is somewhat painful or sore for a couple of days
- you still have a burning sensation in the chest
- you have arrhythmia symptoms for the first two months

My recovery

Who do I contact if I experience discomfort or symptoms?

You should contact your doctor or nurse specialist if you experience:

- an increase in swelling, pain and/or redness of your groin
- shortness of breath or chest pain
- pain behind the heart when swallowing
- arrhythmia symptoms for more than 24 hours

Can the arrhythmia return after ablation?

In the first few weeks after the treatment, you may feel your heart skip a beat a bit more often, or even an “onset” to arrhythmia. The arrhythmia may return after the ablation as the scars created during the procedure will take approximately two months to form. During these first two months, you may still feel some arrhythmia symptoms, but this does not necessarily mean that the procedure has failed.

Also, your heart rhythm may feel faster than usual for a period of time and you may feel tired as your heart and body need time to adjust. These symptoms will improve on their own over time.

It is likely during this period that your doctor will recommend that you continue to take your arrhythmia medication. During your first outpatient visit after the procedure, your doctor will discuss your medication with you and if / when it can be discontinued.

Preventing blood clots

To minimize the risk of clots in the heart after the procedure, it is important not to interrupt your blood thinning medication during the first three months, not even temporarily. Any non-urgent medical or dental procedures should be postponed if this requires discontinuing the blood thinning medication. During your first outpatient visit, your doctor will discuss your medication with you and if / when it can be discontinued.

Follow-up appointment

A follow-up appointment will be planned for you to come to the outpatient clinic after the ablation procedure with a specialist. During this appointment, the results of the ablation procedure and your current medication will be discussed.

Patient Information:

1. What is an arrhythmia?
2. What is Atrial Fibrillation?
3. Preparing for my first arrhythmia consultation
4. Atrial fibrillation treatment options for rhythm control
5. What is an ablation procedure?
6. My hospital stay for an ablation procedure
7. **My recovery after an ablation procedure**

For more PATIENT RESOURCES related
to Atrial Fibrillation, please visit

getsmartaboutafib.eu



As with any medical treatment, individual results may vary. Only a Cardiologist or Electrophysiologist can determine whether ablation is an appropriate course of treatment. There are potential risks including bleeding, swelling or bruising at the catheter insertion site, and infection. More serious complications are rare, which can include damage to the heart or blood vessels; blood clots (which may lead to stroke); heart attack, or death. These risks need to be discussed with your doctor and recovery takes time.

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