

## Treatment for Patients with Atrial Fibrillation

### Abstract

Atrial fibrillation is irregular and rapid heart rate that can increase the risk of heart failure, heart stroke and other heart related problems. During atrial fibrillation the heart's two upper chambers i.e. the two atrial beat wild and irregularly, out of coordination with the two lower chambers i.e. the ventricles of the heart. Atrial fibrillation symptoms frequently include heart palpitations, shortness of breath and weakness. Two types of atrial fibrillation is paroxysmal is intermittent and continuous persistent. The most common causes for the atrial fibrillation is heart surgery, cardiomyopathy, chronic lung disease, congenital heart disease, coronary artery disease, congenital heart disease, heart failure, heart valve disease, hypertension and the pulmonary embolism. The less common cause's symptoms are hyperthyroidism, pericarditis and viral infection..

**Keywords:** Atrial Fibrillation; atrial beat; Heart Failure, Heart Valve Disease, Hypertension

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Heart is made up of four chambers two upper and two lower that means a set of atria and the set of ventricle. Within the right atrium (upper chamber) of the heart is having the group of cells known as sinus node and this is also known as natural heart pacemaker. The sinus node produces the signals that normally start each heartbeat. Generally the signal chamber passes for the upper two chambers of the heart only and later it connects it connects through the connecting pathway between the lower and upper chambers of the heart is defined as atria-ventricular node. The signal can give the contraction movement to the heart and pumps the blood to the whole heart and body for the organ functions. In atrial fibrillation the functions of the done though the signal node, the signal in the upper chambers are wild and rapid. The ventricular chambers also beat very fast and rapid.

The main reasons for the atrial fibrillation are as follows below. High blood pressure, heart attack, coronary artery diseases, abnormal heart valves, lung diseases, previous heart surgeries, viral infections, sleep apnea, stress due to illness.

The drugs used in this strategy include beta-blockers, non-dihydropyridine calcium channel blockers, and digoxin and especially in resistant to treatment subjects amiodarone. Promising effects of new ablation devices influence increase in number of candidates for atrial fibrillation ablation and lead to decrease in complications rate. Taking into account patients preferences as well as outcomes associated with catheter AF ablation, it should be considered in selected patients with symptomatic paroxysmal atrial fibrillation and in cases of ineffective pharmacological treatment of persistent atrial fibrillation.

The three types of medications are used for the treatment of atrial fibrillation, Rhythm control medications (antiarrhythmic drugs), Rate control medications, Anticoagulant medications. Treatment options in atrial fibrillation are extensive and are based on chosen rhythm or rate control strategy. Indications for anticoagulation therapy must be considered in all atrial fibrillation patients. Non-pharmacological treatments and risk factors control remain main stay in the treatment of patients with atrial fibrillation. Electrical cardio-version consist important choice in rhythm control levels.

Much progress has been made in the field of catheter ablation and cardiac surgery methods. Left atrial appendage closure may be beneficial in patients with atrial fibrillation. Cardiovascular implantable electronic devices are used with clinical benefits in both rhythm and rate control. Pacemakers, implantable cardioverter defibrillators and cardiac resynchronization therapy devices with different pacing modes have guaranteed place in the treatment of patients with atrial fibrillation.