Treatment of atrial fibrillation: from pharmacological to interventional therapy

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Atrial fibrillation (AF) is the most common persistent arrhythmia, affecting millions of patients worldwide and carrying a significant risk of serious complications such as stroke, thromboembolism, heart failure, and reduced quality of life. The goal of AF treatment is to control heart rhythm and rate, reduce symptoms, and prevent complications, particularly stroke. AF treatment includes various therapeutic options, chosen based on the severity of symptoms, patient age, comorbidities, and the risk of complications. Modern approaches to AF treatment include pharmacological methods (anticoagulants, antiarrhythmics, and drugs for rhythm and rate control) and interventional therapies such as electrical and pharmacological cardioversion, catheter ablation, and pacemaker implantation. Today, physicians take a holistic approach, combining these methods to achieve optimal results. Special attention is given to interventional therapy, especially catheter ablation, which has proven highly effective in patients with symptomatic atrial fibrillation who do not respond to medications. This minimally invasive procedure allows for the precise location and destruction of heart tissue causing the arrhythmia, restoring normal heart rhythm.[1] Nurses and technicians play a key role in the treatment process, whether by monitoring patients' heart rhythms, administering therapy, educating patients on symptom self-management, or providing support after invasive procedures.

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LITERATURE

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