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ATRIAL FIBRILLATION

Atrial fibrillation (AF) is the most common sustained cardiac arrhythmia seen in clinical practice. An optimal management plan requires that the potential risks and benefits of various treatment options, including quality-of-life issues, be carefully weighed for each patient.

This module will aim to:

- Review current recommendations – both for rate control and rhythm control approaches, and for anticoagulation.
- Provide information and risk stratification tools, related to stroke and major bleeding, to help assess different treatment options.
- Address the role and challenges of anticoagulant therapy.

What's New?

The following are the major changes recommended in a number of recent AF guidelines published throughout the world, including the UK

- Less emphasis on rate versus rhythm control (often requires both).
- Use of bleeding scores (e.g. HAS-BLED), as well as stroke risk tools (e.g. CHA₂DS₂VAS_C), to guide patient risk assessment for anticoagulation.
- Role of newer anticoagulant drugs e.g. dabigatran.
- Opportunistic screening for AF

CASES

Case 1: Allan, male, age 82

Allan is seen for a routine appointment to monitor his diabetes and hypertension. He has otherwise been in reasonably good health, although he has been unable to stop smoking. He is gradually becoming frail and had a fall last year.