

Quality of Life among Supraventricular Tachycardia Patients Post Radiofrequency Cardiac Ablation in Jordan

"جودة الحياة بين مرضى تسارع القلب الفوق البطيني بعد كي العصب القلبي"

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Abstract

Introduction: Supraventricular tachycardia (SVT) is a common arrhythmia with associated symptoms such as palpitation, dizziness, and fatigue. It significantly affects the quality of life (QoL). Radiofrequency cardiac ablation (RFCA) is a highly effective treatment to eliminate this arrhythmia and improve different aspects of QoL.

Purpose: To assess the level of QoL among patients with SVT, examine the difference in QoL pre, and post RFCA.

Methodology: Repeated measures pre and post test design was used in this study with a convenience sample of 112 patients (female 62, male 50) completed the study. QoL was assessed by short form (SF-36) version one and Arabic version. Data was collected at admission through face- to-face interviews and one-month post-discharge through phone interviews.

Results: The mean of QoL among patients with SVT was low: 33.73 before RFCA. There was a significant difference between the mean of QoL before and one month after the RFCA procedure. The mean of QoL was 62.48 post-RFCA procedure in comparison with before the RFCA procedure, which was 33.73. Also, the current study found that there was no significant difference in the mean score of QoL based on age, gender, working status, marital status, and smoking, coronary artery disease, diabetes mellitus, and hypertension of the patients post RFCA. In addition, patients who diagnosed AVNRT had a higher mean of QoL level post RFCA procedure than other types of SVT (mean= 67.35), and patients who used calcium channel blocker (CCB) medications post RFCA due to recurrent arrhythmias had a better QoL than patients who used beta blocker (BB) medications (mean=75.70). Moreover, this study showed that there was a significant negative relationship between the total score of QoL and the number of episodes and duration of episodes pre and post procedure (QoL Pearson r -0.777, -0.721) respectively.

Conclusion: QoL after RFCA improved for both physical component scale and mental component scale. Patients who diagnosed with AVNRT had a higher QoL post RFCA than other types of SVT. Patients who used CCB medications had better QoL than patients used BB medications post RFCA.

Key words: Radiofrequency cardiac ablation, quality of life, supraventricular tachycardia, Jordan.