

Treatment for Supraventricular Tachycardia



Supraventricular tachycardia (SVT) is a class of abnormally fast heart rhythms that originate from the top chambers of the heart called the atria. You may also hear it called paroxysmal supraventricular tachycardia. Paroxysmal means that it happens from time to time. The normal heart rhythm is generated by your sinus node, and the electricity is conducted through the heart over specialized nerves. When the electricity meets the muscle cells, this results in regular and coordinated heartbeats. During SVT, the heart rhythm may be generated by an abnormal area of excited heart muscle in the atria or by an abnormal electric circuit that has formed in the heart, leading to rapid electrical activity. This can result in symptoms of palpitations, shortness of breath, chest pain, dizziness, or fainting.

Types of treatment

You may not need treatment for SVT if you have only rare episodes. If you do need treatment, there are several kinds. They include:

- **Valsalva maneuver.** This is a way to increase pressure in the belly (abdomen) and chest. It's done to trigger a slowing effect on the heart. It can correct your heart rhythm right away. To do it, you bear down with your stomach muscles, as though you are trying to have a bowel movement.
- **Carotid massage.** Your healthcare provider may rub the carotid artery in your neck. This produces a slowing heart rate reflex in the heart and can sometimes stop the arrhythmia.
- **Medicine.** There are various kinds you can take. Calcium channel or beta blockers can help correct heart rhythm. If you have SVT only 1 or 2 times a year, you may take beta-blockers or calcium channel medicines by mouth (orally) as needed. If your SVT is more frequent, you may need to take medicine every day. Some people may need to take several medicines to prevent episodes of SVT. For emergent cases, calcium channel or beta blockers can be given through IV (intravenously) for more rapid correction of the heart rhythm. Adenosine is another medicine that can be given through IV as well that can work in a matter of seconds. It's not available in an oral form.
- **Electrical cardioversion.** This is a shock to the heart to restart a normal rhythm right away. This may be done if you have a severe episode of SVT.
- **Catheter ablation.** This can cure SVT. Your healthcare provider puts a thin, flexible tube (catheter) into a blood vessel in the groin. They then gently push it up into your heart. The area of your heart that causes your SVT is then either cauterized with heat or scarred with freezing energy. This prevents that area from starting a signal that causes SVT. An ablation may need to be repeated if a new excited nerve area in the atria develops and the SVT returns.

Lifestyle changes to help prevent SVT episodes

Your healthcare provider might suggest other ways to help prevent SVT, such as:

- Have less alcohol and caffeine.
- Don't smoke.
- Lower your stress.
- Eat foods that are healthy for your heart.
- Don't take recreational drugs, especially stimulants that can over-excite the heart muscle. Some herbs and supplements can have this same effect. Always check with your healthcare team before you take any nonprescribed medicines.
- Stay well hydrated and get enough sleep.

When to call your healthcare provider

Call your healthcare provider if you have any of the following:

- Severe palpitations
- Severe dizziness or fainting
- Severe chest pain
- Symptoms that are happening more often

Call 911

Call **911** if you have sudden shortness of breath.

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