

## Types

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**Paroxysmal** spontaneous termination within 7 days

**Persistent** requires cardioversion to restore sinus rhythm

**Permanent** sinus rhythm cannot be restored

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## Treatment

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**Freq. control** *goal <110/min*

T Bisoprolol 2.5-5 mg

T Digoxin 0.13-0.25 mg *if heart failure*

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**Rhythm control** *if symptomatic*

**Paroxysmal** T flekainid (Tambocor) 50-100 mg x2

**Persistent** Electrical cardioversion

AF <48 h → no anticoagulants needed

AF >48 h → anticoagulants > 3 weeks  
before procedure (alternative: TEE)

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**Anticoagulants** *If CHA<sub>2</sub>DS<sub>2</sub>-VASc > 2*

1. NOAK, ex. dabigatran (Pradaxa)

2. Warfarin (Waran)

3. Long-term treatment with LMH

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