

“Insufficient awareness of AF can leave people feeling terrified” – Dr Bose’s story



Dr Pabitra Paul Bose (pictured), from High Wycombe, knew something was wrong when his heart started racing. He was aware of a heart condition that caused the pulse to beat too fast or irregularly. He had heard of atrial fibrillation (AF).

“I was on holiday in the Middle East when I went to climb Mount Sinai. The mountain was about one and half miles high and it was the summertime. That evening I felt very poorly; my pulse was very irregular and I felt some palpitations in my chest. So immediately I knew it was atrial fibrillation. ”

He went to see his GP who referred him to a consultant cardiologist at the local hospital. An echocardiogram and electrocardiogram (ECG) was taken and Pabitra was told he was absolutely fine so he could go home. But six months later, the AF returned and he felt very unwell.

“I went to see my GP again,” Pabitra continues. “He did the same sort of investigations and said, ‘nothing to worry, just go home,’ without giving me any medication.”

Pabitra found himself worried and alone. He found it difficult to find information about AF.

“My heart was racing like anything yet when I went to see the doctor it seemed fine. I was frightened because I was afraid it could impact my organs and I wasn’t getting any treatment for it. I felt very weak; I couldn’t sleep or do anything. I just became completely numb within myself.

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"And then my wife rang the AF Association and they advised us of the various arrhythmia specialist centres in the UK. We decided to go to John Radcliffe Oxford Hospital. In my first appointment I was diagnosed with AF, which was a relief because at least I had confirmation of what I was feeling and why."

Pabitra was prescribed an oral anticoagulant, warfarin, which is a blood-thinning drug. This would limit his chances of suffering an AF-related stroke by preventing blood clots from forming in an area of the heart called the left atrial appendage.

"I was glad to be given an anticoagulant because I knew it would protect me from AF stroke risk but maintaining INR blood levels was not easy. I had to go for regular check-up, I had to watch my intake of certain foods and was restricted on alcohol consumption. It affected my lifestyle.

"The AF episodes were becoming more regular so I decided to go back to John Radcliffe Hospital and see Dr Kim Rajappan again. He suggested that I should consider catheter ablation, which would help to reduce or even get rid of my AF."

Catheter ablation is a procedure that destroys small areas in the heart that cause AF. It does not always work the first time, and for some people it does not work at all.

"I had to have the ablation treatment twice for it to work successfully. It was so quick, I was discharged from hospital the next day and the results were instant! I felt much better straight away and nearly two years later, I have not had another bout of AF."

Despite contacting his GP and seeing a local cardiologist, Pabitra didn't feel he was given the support he needed.

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"Your average patient has to see their GP, that is the way the healthcare system works but there isn't enough awareness or understanding of the heart condition. I was fortunate to be signposted by the AF Association to a specialist centre, so I was able to see a heart rhythm specialist. I would advise others who notice the symptom of an irregular pulse, palpitations and tiredness to see their GP and to insist on being referred to a specialist."

Pabitra feels there isn't enough awareness in the general public about AF so there could be many people out there with symptoms but they are not seeking the help they need;

"I don't think that many people have got a proper idea of the severity of this illness. As a member of the medical community, I was aware of the risks associated with AF, such as heart failure and stroke. But people need to learn about the importance of checking their pulse to see how regular their heartbeat is. I diagnosed myself by a simple pulse check and realised it was too fast and irregular. This is a straightforward test that everyone can do, which can help to detect AF."

Dr Pabitra Bose, High Wycombe (2013)