

Arrhythmogenic Right Ventricular Cardiomyopathy (ARVC)

The Jordan Boyd Inherited Heart Disease Clinic

Notes:

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:
www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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Arrhythmogenic Right Ventricular Cardiomyopathy (ARVC)

How does the heart work?

- The heart is a hollow organ made of muscle. It has 4 chambers: 2 at the top (**atria**) and 2 at the bottom (**ventricles**).
- Blood flows from the body into the top chambers. The blood is pumped to the bottom chambers, and is then pumped back out to the body.
- Electric signals that pass through the heart muscle control the pumping of the chambers. This electrical activity is called the **heart rhythm**.

What is arrhythmogenic right ventricular cardiomyopathy (ARVC)?

- In ARVC, some of your heart muscle is replaced by fat and scar tissue.
- ARVC usually affects the right side of the heart. The fat and scar tissue dilate (stretch) the right side of your heart. This weakens the heart muscle. This makes it harder for your heart to pump blood out to your body.

- Treatments may include:
 - › Medications
 - › A pacemaker called an **internal cardioverter defibrillator** (ICD). The ICD identifies a fast heart rhythm and slows your heart rhythm down to a safer speed
 - › A heart transplant. This is rare.
- Intense and repetitive types of exercise may make ARVC worse. Talk with your health care provider about what activities are safe for you.

For more information about ARVC:

- **Hearts in Rhythm Organization (HiRO)**
 - › www.heartsinrhythm.ca/arvc/info
- **The Canadian Sudden Arrhythmia Death Syndromes (SADS) Foundation**
 - › www.sads.ca
 - › Has information about inherited heart diseases and a booklet on ARVC that you can download

- › **Cardiac MRI:** A scan using magnets and radio waves. It measures the size of your heart chambers, how well your heart pumps, and shows any fat and scar tissue in the heart muscle.
- **Your cardiologist (heart doctor) may want you to have other tests when they are diagnosing you.** They will talk with you about this, if needed.

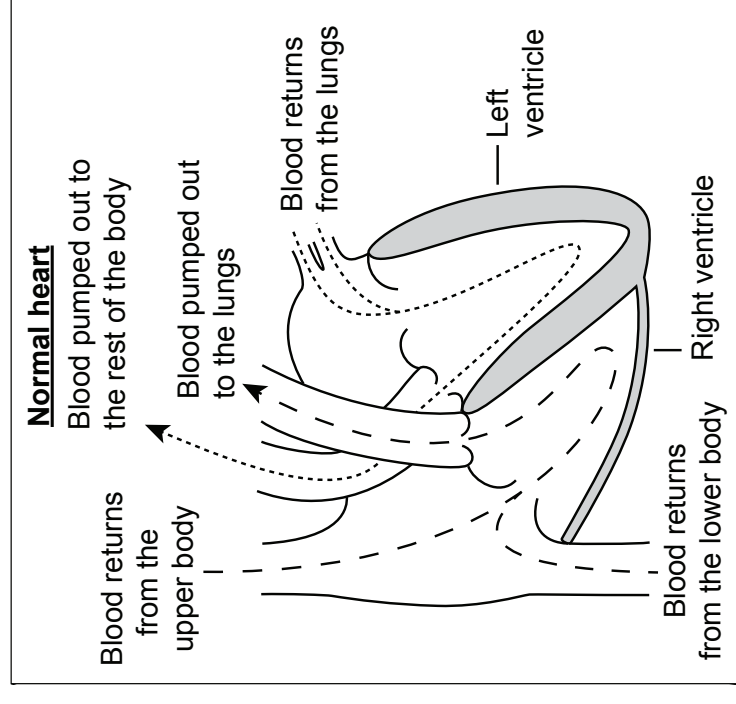
Genetic testing and family screening

- If your cardiologist thinks changes in your genes caused your ARVC, they may ask if you would like to talk with a genetic counsellor about genetic testing.
- Your cardiologist may also want to ask other members of your family to test for ARVC. They may ask you to give letters with information about ARVC to your family members.

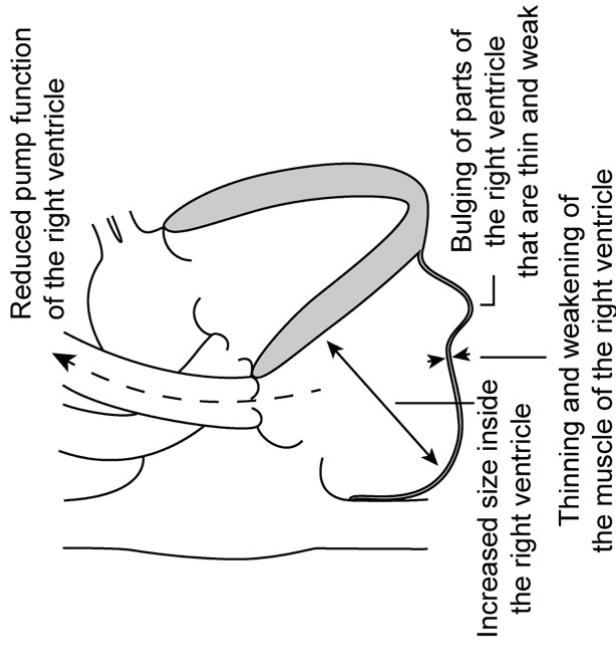
How is ARVC treated?

- There is no cure for ARVC, but there are treatments that can control a fast heart rhythm and help with your symptoms.

- If your ARVC is very bad, it may cause fluid to build-up in certain parts of your body, like:
 - › Your lungs, making it harder to breathe
 - › Your ankles or belly, making them swell
- ARVC can also change your heart's electrical activity. This can cause a dangerous, fast heart rhythm.



Arrhythmogenic right ventricular cardiomyopathy



What causes ARVC?

- ARVC can be caused by changes in your genes. These changes can be hereditary (passed from parents to their children).
- Sometimes the cause is not known.

Tell your health care provider if you had a relative who died suddenly at a young age. This could have been caused by ARVC.

What are the symptoms of ARVC?

- Symptoms may include:
 - › Lightheadedness
 - › Fainting
 - › Palpitations (feeling like your heart is jumping, racing, or fluttering)
 - › Trouble breathing
 - › Tiredness
 - › Pain, swelling, or tightness in the chest

How is ARVC diagnosed?

- Health care providers use different tests to diagnose ARVC. You may have some of these tests:
 - › **Electrocardiogram (ECG/EKG):** A recording of your heart rhythm for 10 to 20 seconds.
 - › **Signal averaged electrocardiogram (ECG/EKG):** A more detailed recording of your heart rhythm for 5 to 10 minutes.
 - › **Holter monitor:** A recording of your heart rhythm for 24 hours (1 day).
 - › **Echocardiogram (Echo):** An ultrasound that measures the size of your heart chambers and how well your heart is pumping.