

Irregular Fetal Heart Rhythm - Ectopic (extra) beats

An information guide



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Following an assessment of your baby an irregular heart rhythm has been noted.

This leaflet aims to provide information and explain about this condition.

A normal fetal heart beat

The heart is made up of four chambers: two collecting chambers (atrium) and two pumping chambers (ventricles). The heart's pacemaker is located in the top right sided collecting chamber, the pacemaker sends electricity through the heart to the ventricle so that the heart fills and contracts in time. The normal fetal heart rate ranges between 110 – 160 beats per minute (bpm).

What is causing the irregular fetal heart rhythm?

Atrial ectopic beats can occur at any time in pregnancy but are most common in the third trimester. The irregularity is caused by ectopic or extra heartbeats coming from the upper chamber, occurring out of normal rhythm. They usually occur soon after a normal beat, followed by a compensatory short pause, after the ectopic beat.

These extra beats can cause a slightly slower than normal heart rate and make it sound irregular. They can continue with every 2nd or 3rd beat for days or weeks without causing any problems with the heart function or causing any damage to the baby.

Is treatment required?

In most cases these ectopic or extra beats stop without any treatment towards the end of the pregnancy. In some babies these continue after birth, but without causing any significant problems.

In a small number of cases (1 or 2 cases in 100) the baby can have an abnormal fast heart rhythm (supraventricular tachycardia) before birth. This heart rate is usually more than 200 bpm. This does not usually cause any problems and can be treated by giving medication to the mother.

What monitoring is required during the rest of pregnancy and after birth?

We advise that your local midwife listens to your baby's heart rate every week to check that a fast rate has not developed (more than 190 bpm). No additional specialist scans are needed.

Rarely, if the heart rate remains very irregular during labour, it can be difficult to monitor the baby for signs of distress and a Caesarean section may be advised. For most cases this is not a problem and a normal (vaginal) delivery is possible.

If there are concerns that your baby's heart rate is irregular, after birth, the neonatal doctors will arrange an electrocardiogram (ECG) to confirm the diagnosis. If your baby's routine physical check is normal with regular heart rate and rhythm, then no further checks are required.

If you have any further concerns please discuss these with your local obstetric team or a member of the Pennine Fetal Unit at The Royal Oldham Hospital on (0161) 778 5183.

If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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