

Atrial Fibrillation

The Beat Goes On: **Living with AFib**

Live
Your Life.



Know
Your Heart.



Know
Your Choices.



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What is AFib?

This guide is for you if you have AFib, or if you are at risk for AFib. This guide is not meant to replace the important information you receive from your healthcare professional. The good news is that AFib can be controlled. Millions of people live a full life with AFib.

What is AFib?

AFib is short for Atrial Fibrillation. AFib is when your heart flutters, or beats unevenly.

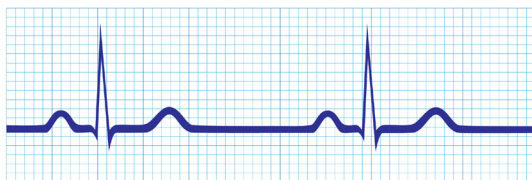
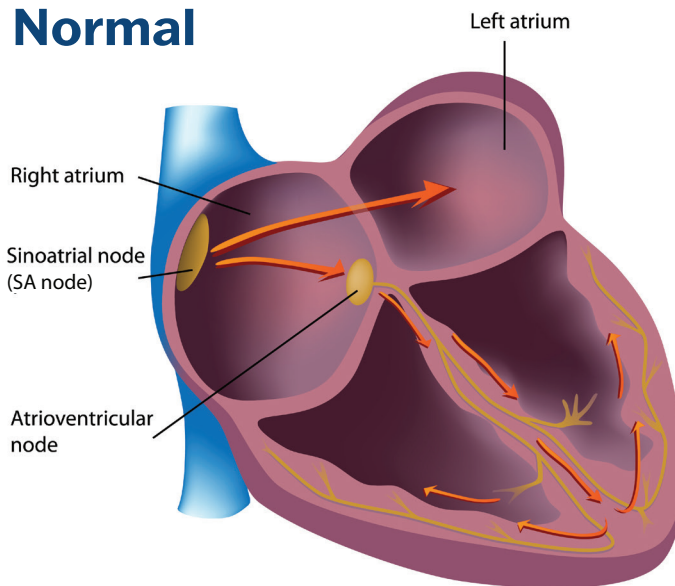
A normal heart beat starts in the right atrium, which is the upper right chamber (or “part”) of the heart. An electrical signal starts the heart beat at the sinoatrial (SA) node. The beat travels down through the heart from there. With AFib, signals come from many different places in the upper chambers of the heart. These beats travel down to the heart and makes your heart beat irregularly. Your heart may beat faster, too.

Why is this happening to me?

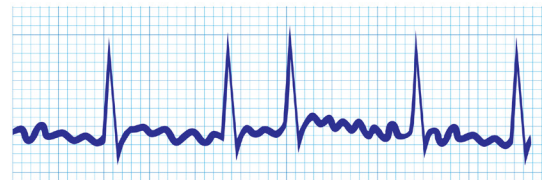
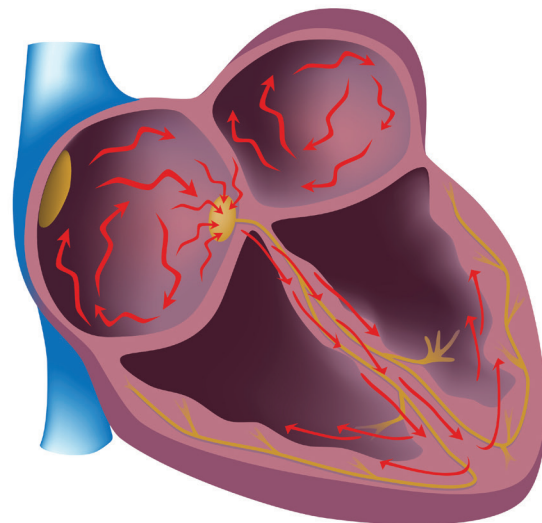
AFib is the most common irregular heart rhythm in the world. Over 59 million people in the world have AFib.

Anyone can get AFib. Even people who live healthy lifestyles and have no other medical problems can have AFib.

Normal



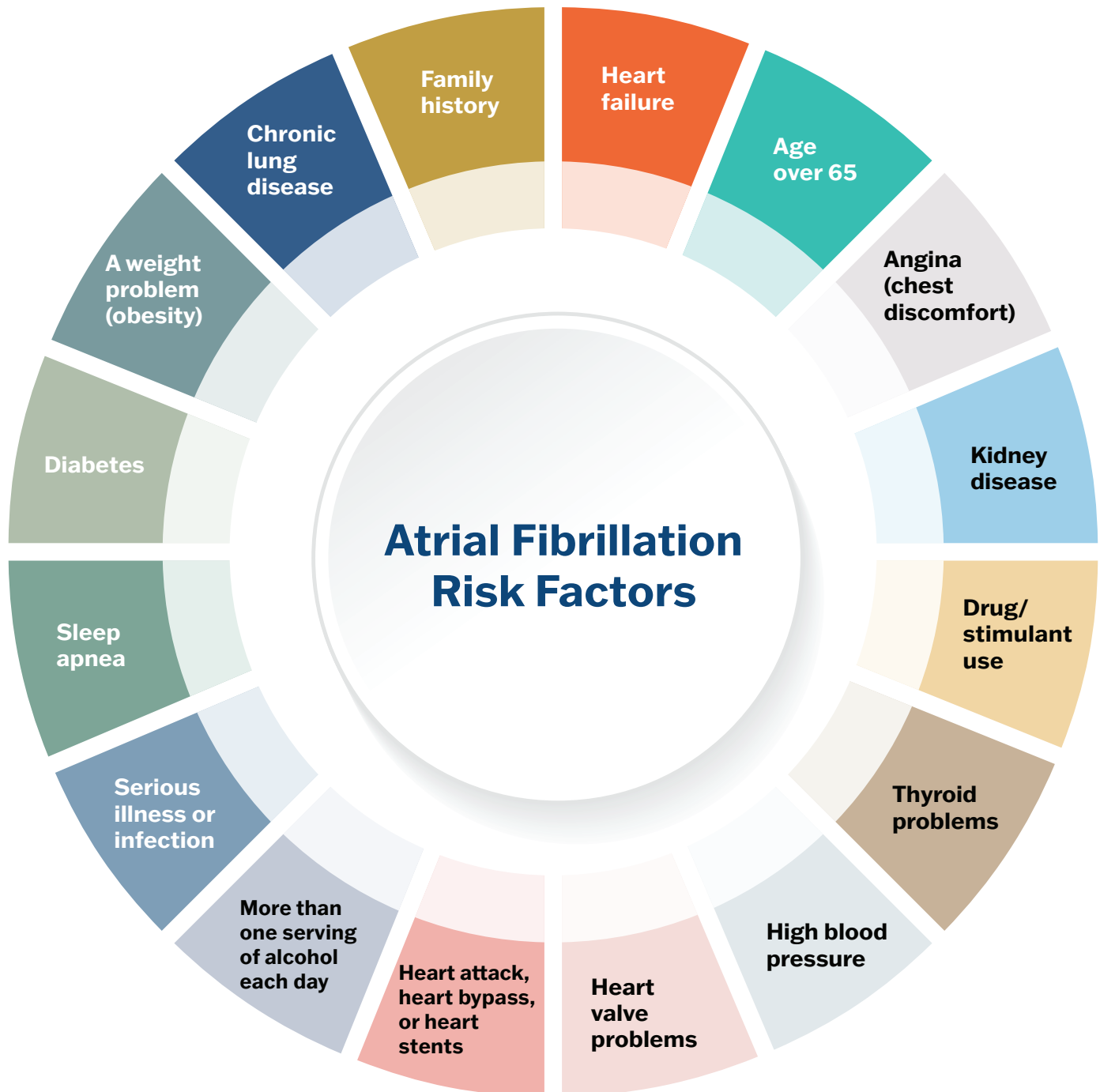
Atrial Fibrillation



The picture on the left shows how a normal heart beat starts at the SA node and travels through the heart. The picture on the right shows AFib. The signals in the upper chambers of the heart come from many different places. These signals are fast, and irregular as seen in the bottom heart rhythms.

What is AFib?

People with these below conditions have a higher chance of having AFib:



No matter what risk factors you have, AFib can be controlled. This guide will tell you about AFib, and what you can do to live well with AFib. The risk of AFib goes up with age. About 1 in 3 people will have AFib in their lifetime. No matter what risk factors you have, AFib can be controlled. This guide will tell you about AFib, and what you can do to live a full life with AFib.

Why is AFib a Problem?

It is important to know that many people are able to live normal, healthy lives with AFib. AFib is not always a dangerous rhythm, but AFib can cause problems.

Problems from AFib:

AFib can reduce your quality of life

Symptoms of AFib (fatigue, weakness, tiredness, low energy, shortness of breath) can lead to a lower quality of life.

AFib can lead to stroke

The irregular heart beat with AFib can cause blood clots to form in the heart. The most common place for blood clots to form is in the left atrial appendage. When the clots break loose and move into the blood, it is known as thromboembolism. The clots can move to the brain, which may cut off the blood supply and cause a stroke.

This picture shows how a blood clot can travel from the heart to the brain, causing a stroke.

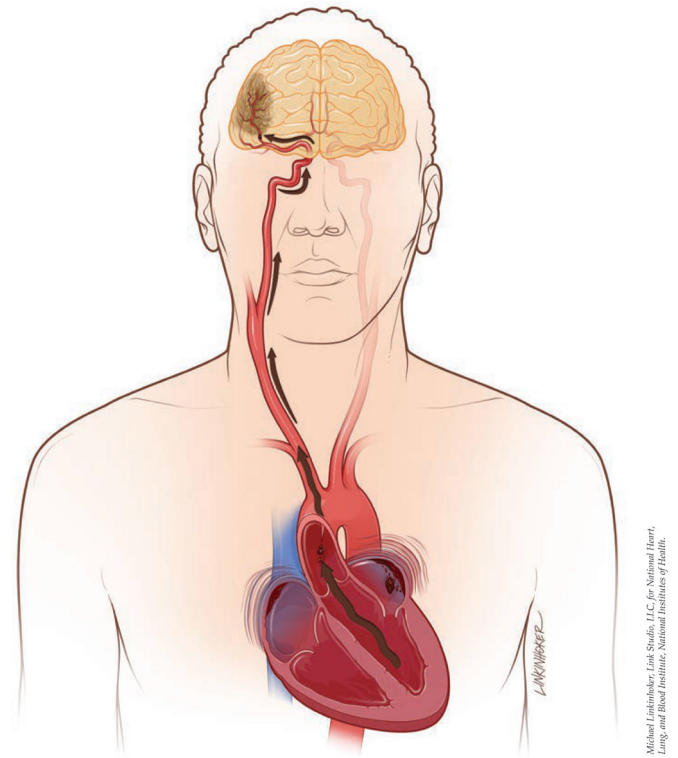
AFib can lead to heart failure

The fast and irregular heartbeats of AFib can make the heart weak. This is called heart failure.

If you already have heart failure, AFib may make it worse. Treating your AFib may make your heart failure better.

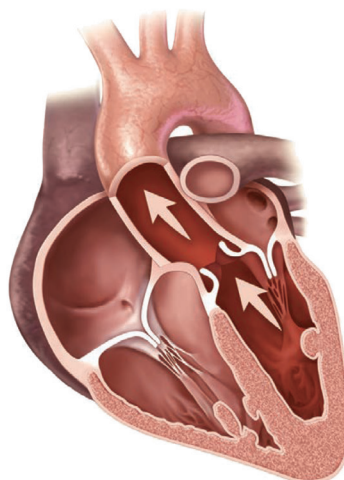
This picture shows a normal heart (on the left) and a heart with heart failure (on the right). See how the heart with heart failure is very large. It does not pump as well as the normal heart.

Treating AFib can help you feel better and lessen the chance of having these problems.

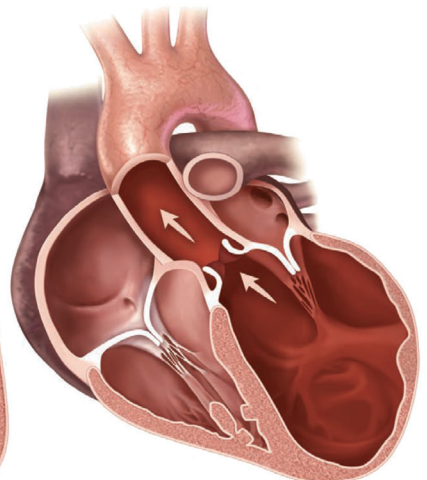


Michael Linkewitzer, Link Studio, LLC, for National Heart, Lung, and Blood Institute, National Institutes of Health.

Normal



Heart Failure



There are several types of AFib. Having AFib once puts you at increased risk for future episodes. While you may not pass through all stages, this is the most common pathway from pre-diagnosis to diagnosis of AFib.

It is important to know what kind of AFib you have and discuss what treatment options work best for you with your healthcare professional.



The stages of AFib are:

Stage 1: At risk for AFib	You have one or more risk factors for AFib, such as high blood pressure, obesity (being overweight), or sleep apnea.
Stage 2: Pre-AFib	There are changes in the heart or EKG that increases the risk for having AFib, such as heart failure, heart disease, or enlarged atria (upper chamber of the heart).
Stage 3: AFib	<p>In this stage, AFib is diagnosed and confirmed. There are different types of AFib. You may have different types of AFib over time.</p> <p>A) Paroxysmal: AFib that comes and goes, and stops within 7 days or less.</p> <p>B) Persistent: AFib that continues for more than 7 days and often needs treatment to get the rhythm back to normal.</p> <p>C) Long-standing persistent: AFib that continues for more than 12 months.</p> <p>D) Successful Ablation: No AFib after an ablation procedure.</p>
Stage 4: Permanent AFib	Patient and healthcare professional make a decision to stop further attempts to keep the heart in normal rhythm. AFib continues permanently.

The treatment goal for all types of AFib is to control your heart rate and prevent stroke.

AFib Signs and Symptoms

What does AFib feel like?

Some people do not feel anything or have any problems with AFib. If you do feel symptoms, they can include:

1. Feeling dizzy or lightheaded
2. Uneven, fluttering, or racing heart beat (palpitations)
3. Feeling weak or tired
4. Chest discomfort or tightness
5. Feeling short of breath
6. Sudden weight gain (examples: 2-3 pounds overnight or 3-5 pounds in a week)



Checking Your Pulse

Check your heartbeat or pulse as needed. Be sure to check it when you have any of these symptoms:

- More shortness of breath than usual
- Feeling lightheaded or weak
- Fast or racing heart beat

To learn more about checking your pulse visit:



youtu.be/w77tHehp6AI



How to check your pulse:

1. Place the pads of 2 or 3 fingers on the inside of your wrist, just below your thumb.
2. Press down until you feel your pulse. Be patient—it takes practice!
3. Talk with your healthcare professional about devices that can help you take your pulse at home.

Look for:

- Is your pulse regular?
- How many heartbeats do you have in a minute?

Call your healthcare professional if your pulse:

- Has been regular, and now it isn't
- Is over 100 beats a minute. Make sure to talk to your healthcare team about what pulse rate range is good for you.

AFib Signs and Symptoms

How do I know if I have AFib?

Your healthcare professional can tell you if you have AFib. They will take your health history and give you a physical exam. There are tests to see if you have AFib.

Health history

Your healthcare professional will ask about:

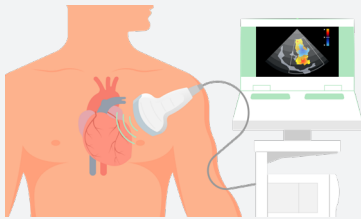
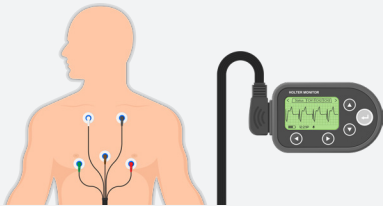
- Any symptoms such as new or worse shortness of breath, feeling very tired, or feeling irregular heart beats
- Your history of heart or lung disease, high blood pressure, or thyroid problems
- Your risk for sleep apnea, such as snoring, gasping for air when you sleep, or feeling very tired even after sleeping or resting
- Your health habits, like smoking, drinking alcohol, and exercise

Physical exam

The healthcare professional will listen to your heart to see if it is beating regularly or irregularly. Irregular or faster beats can mean that you are in AFib.

You may have other tests for AFib.





Monitor and echo tests

EKG (Electrocardiogram EKG or ECG)

The EKG records the electrical pattern of your heart. It will show how if your heart beat is regular or not.

Holter or Event Monitor

This is a device that is worn on the outside of your body between 24 hours or a few weeks. It records your heart rhythm and rate to help your healthcare professional understand how often and what abnormal rhythms your heart is doing.

Echo (Echocardiogram)

The echo technician gently presses a wand on your chest that takes pictures of your heart's chambers and valves while your heart is beating. Like a sonogram or ultrasound of the heart.

Blood tests

Blood tests may include thyroid function, kidney function and liver function tests will help guide your AFib treatment. Your healthcare professional may also adjust your medicines based on results of other tests that measure your kidney function.

Stress tests

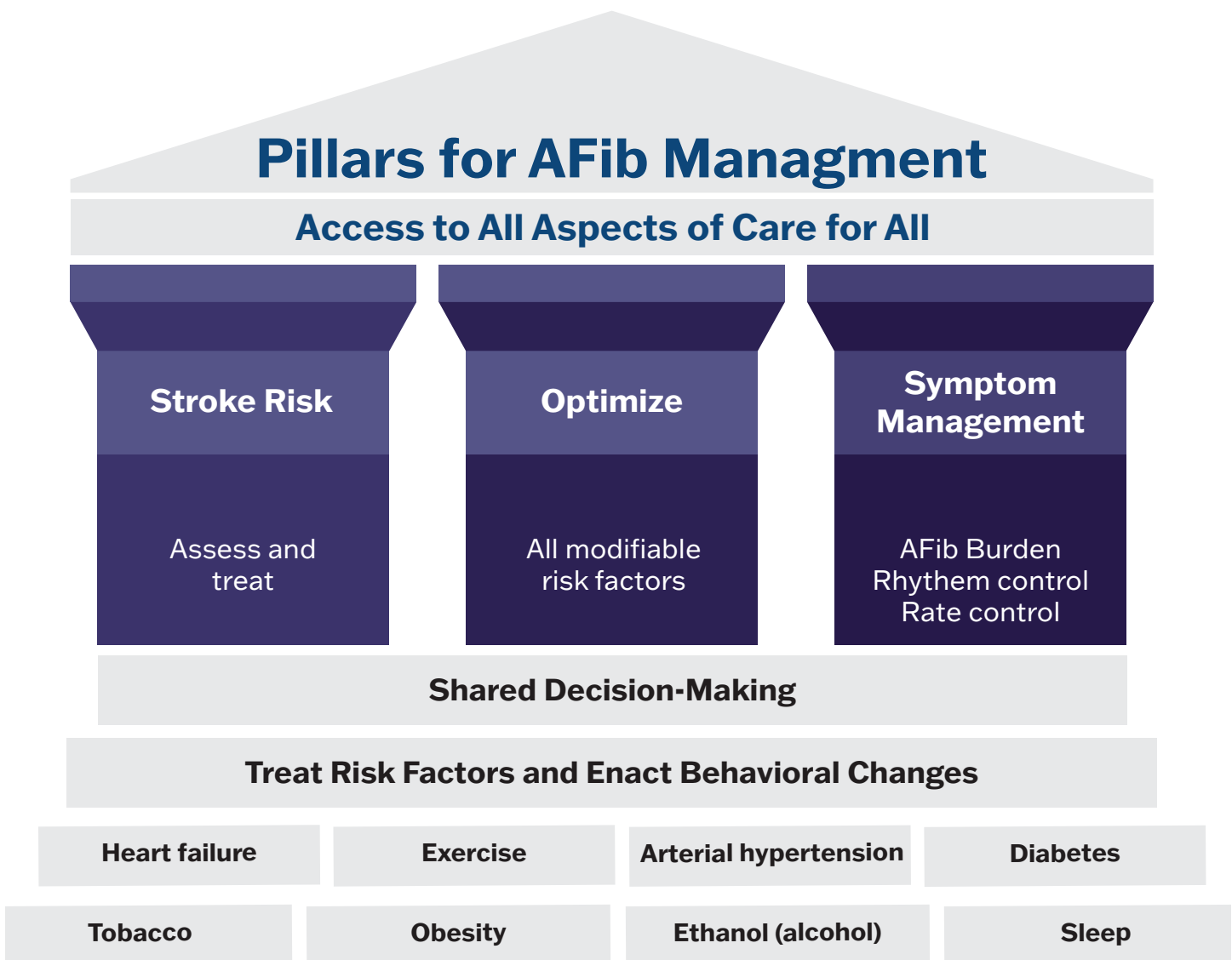
Stress tests show how blood flows to your heart while exercising. Stress tests can be performed on a treadmill or using medication to simulate exercise while technologists are monitoring your electrical rhythms and vital signs.

What can I do if I have AFib?

There are three goals (pillars) for you and your healthcare professional to focus on while managing your AFib.

They include:

1. **Stroke risk:** Assess and treat Stroke Risk (usually with blood thinner medication).
2. **Optimize:** Modify (change) and improve risk factors such as high blood pressure, diabetes, obesity, sleep etc. Notice these risk factors (across the bottom of the picture) are the “foundation” of AFib treatment.
3. **Symptom Management:** Rhythm & rate control to help you feel better.



What Can I Do if I Have AFib?

YOU are the captain of your health, steering it to success

Follow these below tips to help manage your AFib:

1. Get regular check-ups. Your healthcare professional will advise you how often to be seen and discuss medicines and other treatments with you.
2. Take medicines as prescribed to help regulate your heart rhythm and to prevent strokes.
3. Check your pulse often, and track your numbers using a smartwatch, app, or writing them down to share with your healthcare professional.
4. Take care of yourself. Follow the tips on page 15.
5. Follow tips from the Living with AFib section to improve your overall health.

If you have AFib, it is important to talk to your healthcare professional about what you can do. Keep track of questions you have and bring them to each appointment (see suggested questions on page 16).



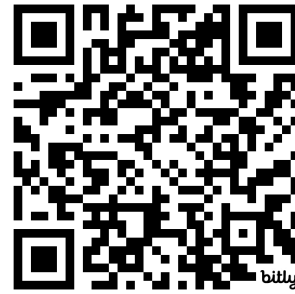
Be SMART with your Heart

Smart Devices and AFib Wearables

There are several smart (electronic) devices & phone apps on the market today that can help detect the presence of AFib or other abnormal heartbeats. To learn more visit these helpful links:



[PDF] pcna.net/AFib-smart-devices



bit.ly/What-Is-AFib

Treatments/Management Strategies

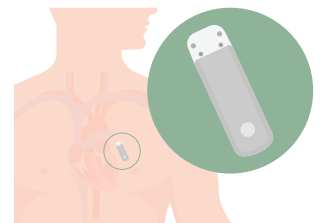
Electrical Cardioversion

To help your heart back to its normal beat, you will be given medicine to make you sleep for a few minutes. Your healthcare professional will give your heart a tiny electric shock that stops the AFib and starts your heart beating regularly.



Implantable Loop Recorders (ILR)

This small rectangular device monitors and records your heart's electrical activity for up to 4.5 years. It is implanted under the skin of the chest, usually to the left of the breastbone. This device allows your healthcare professional to detect any abnormal heart rhythms (including too fast or too slow) and frequency of these occurrences. An ILR may be recommended if you have fainted, have had a stroke without any clear reason, to monitor very slow or fast heartbeats, or to manage your AFib better with your medicines.



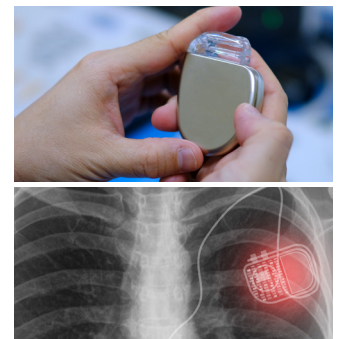
Catheter Ablation

This procedure finds the heart cells that cause your AFib. Then the healthcare professional sends a signal through a thin wire straight to these cells that stops the AFib by cauterizing (burning) these areas with either radiofrequency signals or cryo (freezing).



Pacemaker

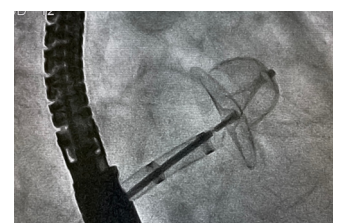
A small device inserted under the skin on your chest and has a wire or lead that goes into a vein to your heart. The pacemaker can tell when your heart is beating too slow or too fast. It helps keep the heartbeat regular and allow you to receive medicines to control any fast beats. The pacemaker will be checked regularly to make sure it is working properly. This can often be done remotely with a wireless transmitter requiring less visits to your healthcare office.



Left Atrial Appendage Closure Devices (LAAC)

A device that can reduce the risk of stroke by closing off the left atrial appendage of the heart. The left atrial appendage is a small pouch of heart tissue that can release blood clots into the arteries which can block blood flow to the brain, causing a stroke.

These devices are often recommended for people with AFib that cannot tolerate side effects of blood thinners such as excessive bleeding.



When you are diagnosed with AFib, you will take some new medicines.

Medicines can help by:

- keeping your heart from beating too fast
- changing your heart to a normal beat
- preventing a blood clot and a stroke

The chart below describe how different AFib medicines work.

Type of medicine	What does this medicine do?	Examples of this type of medicine
Rate Controlling Medicines	Block the effects of adrenaline and other hormones on the heart to slow your heart rate down	Beta blockers: metoprolol, propranolol
	Slows your heart rate and relaxes the heart muscle so it doesn't have to work too hard	Calcium channel blockers: diltiazem, verapamil
Rhythm Controlling Medicines	Blocks certain electrical signals in the heart that can cause an irregular heartbeat	Antiarrhythmics: sotalol, dofetilide, dronedarone, amiodarone, flecainide, propafenone
Anticoagulants or Blood Thinners	These medications prevent blood clots from forming in people with certain types AFib to prevent stroke	Oral Anticoagulants (OACS): warfarin, apixaban, rivaroxaban, dabigatran, edoxaban

Helpful links and resources to learn more about these medications:

Rate Control Medicines



bit.ly/StopAFib-Rate-Control-Medication

Rhythm Control Medicines



bit.ly/StopAFib-Rhythm-Control-Medication

Anticoagulants Medicines



bit.ly/StopAFib-prevent-strokes



Learn about your medicines

- It is very important that you know the exact names of the medicines and supplements you are taking. Keep an up-to-date list of all of them with you at all times (see the medicines list at the end of this tool).
- Tell all your healthcare professionals that you have AFib. Tell them exactly which medicines you are taking. This is very important if you are taking medicines to lower your risk of blood clots and strokes.
- Consider a medical alert bracelet or other identification that includes the specific name of the medicines you take.
- Often medicines for AFib are a lifetime treatment plan.

If you have questions about your medicine, talk to a healthcare professional.

Tips for taking medicines

Talk with your healthcare professional about making your medicine schedule simple.

- Use a weekly pillbox.
- Use a timer or alarm to help you take your medicine at the same time each day.
- If you don't feel well after taking a medicine, call your healthcare professional.
- Never stop taking your medicine unless your healthcare professional tells you to.
- Write on your calendar when you need to refill your medicines. Refill at least 1–2 weeks before you run out.
- Talk with your healthcare professional if the cost of your medications is a challenge.
- Know what to do in case you miss one of your doses.



Staying healthy with AFib includes healthy behaviors as well as working with your healthcare team, tracking your symptoms, and taking your medicines. But creating and maintaining a healthy lifestyle will improve your quality of life and is just as important in managing your AFib.

Some healthy habits are:



Avoid alcohol: Alcohol irritates your heart. Just one drink can cause you to go into AFib. Speak with your healthcare professional about what is best for your body.



Stop all nicotine: Nicotine (cigarettes, vape, dip, pouches) puts stress on your heart by raising your blood pressure and heart rate, in addition to all the other negative effects on the rest of your body. If you need help to stop smoking, please ask!



Choose heart healthy foods: Choose lean meats, fruits and vegetables, whole grains and healthy fats. Limit saturated fats and monitor your salt intake. Reduce your caffeine intake to one cup of coffee/tea/soda per day.



Maintain a healthy weight: Being overweight increases your chances of having AFib. Getting to and staying at a healthy weight will help reduce your chances of having future AFib episodes.



bit.ly/AHA-lifes-essential-8



Be active: Aim for 150 minutes of moderate-intensity activity each week. This can be a 30 minute walk 5 times a week. Don't be scared to use your heart, working it out helps keep it healthy!



Prevent infections: When you get sick, your body is under a lot of stress which can lead to AFib. Avoid people who are sick, wash your hands, and keep your vaccines up to date.



Reduce stress: Stress raises your blood pressure and weakens your immune system. Finding healthy ways to manage your stress, like physical exercise, mindfulness exercises, and connecting with your friends, family, and community, can all help lower your stress levels.



Get good sleep: Good sleep is vital to making sure your body has the recovery time it needs every day. If you are struggling to sleep, please notify your healthcare professional.

Lifestyle modifications are hard to start and maintain. Start by making small goals that you can accomplish and build on them. Small changes make a big difference!

Many people live long, healthy lives while managing their AFib. Making a plan can help you feel empowered and know what to do if something doesn't feel right.

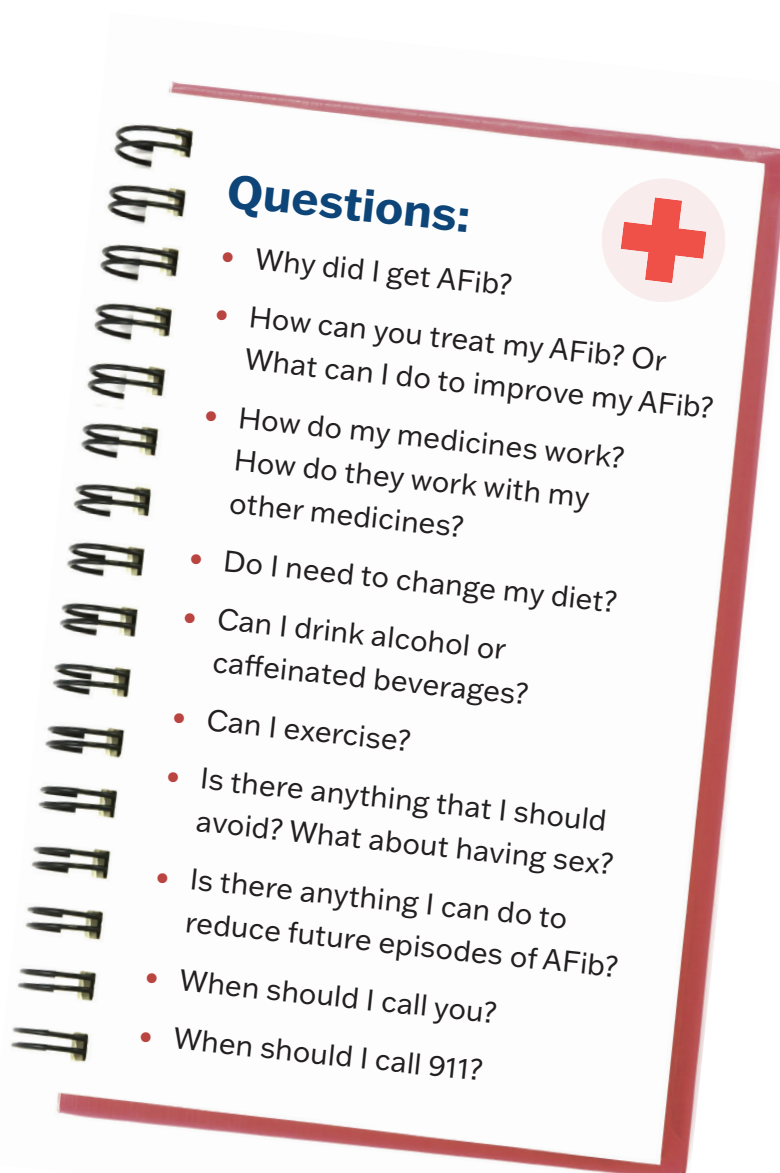
Some suggestions:

1. Learn about AFib and how to prevent a stroke.
2. Know your risk factors and how to lower your risk, such as taking medicines and managing other chronic conditions.
3. Ask your healthcare professional what tests you might need.
4. Know what type of AFib you have and what treatments are best for you.
5. Take your medicines. Know their names and why they are important. Use the Medicine Log at the back of this booklet to keep track.
6. Check your pulse and blood pressure daily and keep a record. Use the Vital Sign Log at the back of this booklet to get started!
7. See your healthcare professional regularly and get your questions answered.

Questions for your healthcare professional

You are the most important part of your healthcare team. Please ask questions and speak up if something doesn't feel right or isn't working for you. Your healthcare professional can't fix something if they don't know it's not working!





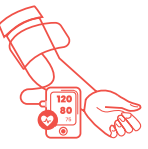



See below for some questions about AFib you may want to ask your healthcare team.



Managing AFib Zones

Managing your AFib helps to keep your symptoms from getting worse, and helps you stay out of the hospital.

Know when to call 911 or your healthcare team using the chart below. You may want to post this in a spot such as on your fridge.

	Green Light 	Yellow Light 	Red Light 
Medicines 	Taking medicine as directed	You have side effects from your medicine but are stable and do not have any chest pain, fainting, or swelling/shortness of breath.	You have side effects from your medicines and do not feel good.
Blood pressure/heart rate 	Blood pressure and heart rate are stable	Blood pressure and/or heart rate are outside of the limits your healthcare professional wants, but you are experiencing mild symptoms.	Blood pressure and/or heart rate are outside of the limits your healthcare professional wants and you are having severe symptoms/do not feel good.
Activity 	You are able to stay active without feeling tired or short of breath	You feel tired even with enough sleep or are not able to do the things you normally like to do (exercise, activities).	You cannot stay active, you have a hard time walking, or cannot sleep flat because of trouble breathing.
Symptoms 	No side effects or symptoms of AFib	You have mild symptoms. You may feel an irregular or skipped heartbeats (palpitations) in your chest, or fatigue. You are having mild leg or abdominal swelling or unexplained weight gain.	You have severe leg or abdominal swelling or unexplained weight gain.
Action Plan 	Continue taking medicine as directed and seeing your healthcare professional when scheduled. Call with any questions you might have. Maintain healthy lifestyle.	Call your healthcare professional for further instructions.	Call 911 or seek medical attention.

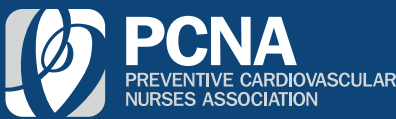
Medicine Log

Medicine	How much of this medicine do you take?	When do you take this?	Why do you take this?
My rate control medicine is:			
My rhythm control medicine is:			
My anticoagulant is:			
Other medicines I take are:			

Vital Signs Log

Date	Time	Heart Rate	Blood Pressure	Symptoms

Procedure Log



Date	Procedure	Performed by	Location (hospital/center)