

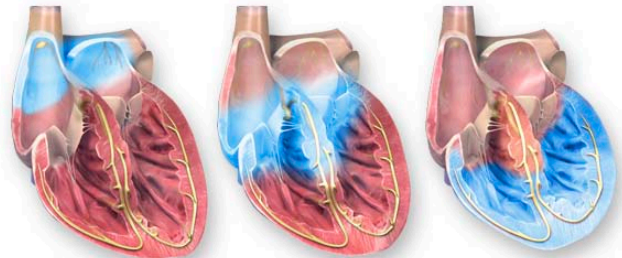


What Is Atrial Fibrillation?

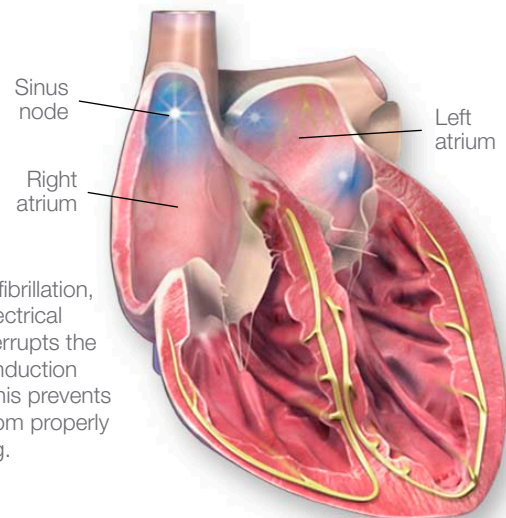
Normally, your heart contracts and relaxes to a regular beat. Certain cells in your heart make electric signals that cause the heart to contract and pump blood. These electrical signals show up on an electrocardiogram (ECG) recording. Your doctor can read your ECG to find out if the electric signals are normal.

In atrial fibrillation (AFib), the heart's two small upper chambers (atria) don't beat the way they should. Instead of beating in a normal pattern, the atria beat irregularly and too fast, quivering like a bowl of gelatin. It's important for the heart to pump properly so your body gets the oxygen and food it needs.

Your heart has a natural pacemaker, called the "sinus node," that makes electrical signals. These signals cause the heart to contract and pump blood.



The illustrations above show normal conduction and contraction.



With atrial fibrillation, random electrical activity interrupts the normal conduction rhythm. This prevents the atria from properly contracting.

How do I know I have atrial fibrillation?

Here are some of the symptoms you may have:

- Irregular and rapid heartbeat
- Heart palpitations or rapid thumping inside the chest
- Dizziness, sweating and chest pain or pressure
- Shortness of breath or anxiety
- Tiring more easily when exercising
- Fainting (syncope)

Can AFib lead to other problems?

Yes. You can live with AFib, but it can lead to other medical problems including:

- Stroke
- Heart failure
- Chronic fatigue

- Additional heart rhythm problems
- Inconsistent blood supply

The risk of stroke is about five times higher in people with AFib. This is because with AFib blood can pool in the atria and blood clots can form.

What can be done to correct it?

Treatment options may include one or more of the following:

- Medicines, such as beta blockers or antiarrhythmics, to help return your heart rate to a normal rhythm.
- Medicines, such as digitalis, calcium channel blockers or amiodarone to help slow your heart rate.
- Blood thinners to keep blood clots from forming.
- Electrical cardioversion (an electric shock) to change the beat of your heart back to normal.

(continued)



- Surgery, a pacemaker or other procedures may be needed.

Your treatment will depend on the underlying cause of your AFib and your level of disability.

How can I lower my risk of stroke?

To reduce your stroke risk, your doctor may prescribe you drugs to keep blood clots from forming. Two examples are anticoagulants and antiplatelets such as warfarin and aspirin.

Anticoagulants include warfarin and three other more recently FDA approved drugs referred to as novel oral anticoagulants or NOACs — dabigatran, rivoraxaban and apixaban.

- Always tell your doctor, dentist and pharmacist if you take any of these medications.
- If you have any unusual bleeding or bruising or other problems, tell your doctor right away.



If you have AFib, your doctor may prescribe medications to help prevent clots from forming in your arteries.

HOW CAN I LEARN MORE?

- 1 Call **1-800-AHA-USA1** (1-800-242-8721), or visit **heart.org** to learn more about heart disease and stroke.
- 2 Sign up to get *Heart Insight*, a free magazine for heart patients and their families, at **heartinsight.org**.
- 3 Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at **heart.org/supportnetwork**.

Do you have questions for the doctor or nurse?

Take a few minutes to write your questions for the next time you see your healthcare provider.

For example:

What should my pulse be?

How do I take my pulse?

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We have many other fact sheets to help you make healthier choices to reduce your risk, manage disease or care for a loved one. Visit **heart.org/answersbyheart** to learn more.



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