September is AFib Awareness Month

FAQs of Atrial Fibrillation

THE CONDITION

What is AFib and why is it a problem?
Atrial fibrillation, or AFib, is an irregular heartbeat, or a condition in which the atria fail to contract in a strong, rhythmic way. When a heart is in AFib, it may not be pumping enough oxygen-rich blood out to the body.

WHY IS AFIB ASSOCIATED WITH A 5x GREATER RISK FOR STROKE?

When the heart is in AFib, blood can become static and may be left pooling inside the upper chamber (called the left atrium.)

• When blood pools, a clot can form.
• When a clot is pumped out of the heart, it can travel to the brain, block an artery in the brain, and cause a stroke.
• Blocked arteries prevent the tissue "downstream" from getting oxygen-rich blood, and without oxygen the tissue dies.

COMMON SYMPTOMS OF AFIB

RACING HEART, FLUTTERING OR PALPITATIONS
OR NO NOTICABLE SYMPTOMS AT ALL
PEOPLE WITH NO SYMPTOMS
MAY BE DIAGNOSED BY AN EXAM AND AN EKG.

SHORTNESS OF BREATH
LIGHtheadEDNESS

THE RISKS

What are the greatest risks of having AFib?
The greatest risk of AFib is stroke. You are 5 times more likely to have a stroke than someone who doesn’t have atrial fibrillation. You also have a risk of eventual heart failure due to the weakening of the heart muscle.

Warning signs of stroke – F.A.S.T.

F - FACE DROOPING
A - ARM WEAKNESS
S - SPEECH DIFFICULTY
T - TIME TO CALL 9-1-1

Other signs of stroke include:
• Sudden numbness on one side
• Sudden confusion or trouble speaking/understanding
• Sudden trouble seeing in one or both eyes
• Sudden trouble walking, dizziness or loss of balance
• Sudden severe headache with no known cause

Visit heart.org/AFibAwareness
Neurological Disorder Summit

Charu Nagar, MD submitted a SSEEO Stroke Health and Wellbeing Poster at the Neurological Disorder Summit in Los Angeles, CA. The international conference had over 200 attendees with specialties in the area of neurosciences.

As a neurologist and SSEEO Board Member, Dr. Nagar wanted to survey stroke survivors to assess their needs, treatments and services needed after their stroke. Approximately 52 survivors responded to the five question survey with questions that included; "What are your primary needs to maintaining wellness after your stroke?" or "How helpful have your physicians/care providers been with helping improve your wellness after your stroke?"

The poster and results were well received at the Summit and many healthcare professionals would like to see a similar support networks like SSEEO in their community. They also stated more education is needed on prevention and specifically for at-risk populations.

You can visit the SSEEO website at www.sseeo.org to see the full poster and listen to the teleconference by Dr. Nagar sharing the survey results and next steps.

Making a Difference...Stroke Survivor joining the SSEEO Board

Meet Randy Crabtree

On the morning of February 6th, 2014, I was driving to the office after having picked up some food for a company meeting we were having. I parked the car, got out, opened the back door to grab some grocery bags. My brother, who works with me, was grabbing bags out of the opposite door. He looked at me through the doors and asked if I was ok. I told him "my left arm is going numb, my speech is slurred, I am having a stroke, get me to a hospital".

By the time he got to my side of the car the stroke was in full effect. My entire left side was paralyzed, and I could not comprehend what was happening. I was very fortunate my brother was with me. He called an ambulance and I was in the hospital within 20 minutes of the stroke's onset. I credit my being able to recognize I was having a stroke, and my brother's quick response, to my grandma. My grandma had a stroke in 2013 and
we all became well versed in F.A.S.T. Because of that, we knew how to respond to what was happening.

It ends up I had an ischemic stroke. I had no risk factors for stroke, and in all of the tests performed in the days and weeks that followed they could not find a cause—until they looked closely at my heart. While testing my heart they found I had a patent foramen ovale (PFO). A PFO is a hole between the left and right upper chambers of the heart. Everyone is born with this hole, but after birth it closes up in about 75%-80% of the population. Most people living with a PFO will never know it exists and will never have any adverse effects from having the PFO. But, occasionally, the PFO will allow blood clots that normally get filtered out by the lungs to pass through the PFO and go directly to the brain. This is what they believed caused my stroke. While researching my options for managing the PFO, I found out that there were no FDA-approved procedures to close the PFO. I did discover that there was a clinical trial occurring to determine if PFO closure plus antiplatelet therapy was better at reducing the risk of a future stroke than antiplatelet therapy alone. I was one of 664 stroke survivors accepted into the trial and one of 441 survivors randomly selected for the closure procedure. After four years of study, PFO closure proved to be 77% more effective at reducing the risk of having an additional stroke and has now received FDA approval.

I feel very blessed to have been able to recognize I was having a stroke, thus getting quick treatment. I also am very proud to have been able to be part of a trial that will help others reduce their risk of having a stroke. I am passionate about educating others on risks factors and warning signs of stroke and look forward to my role on the Board of Directors of SSEEO.

**SSEEO Toll-free Lunch and Learn Series**

**Caregivers Forum**

*Presented by Caregivers:*
*Fritz Weiss, Teri Boko and Val Van Winkle*

Topics being discussed:

- Stroke caregiver’s stories
- Lessons learned as a caregiver
- Resources for caregivers

*When:* Tuesday, September 14th, Noon - 1:00 pm cst  
*Where:* Right in your home, office, use as a community outreach activity or stroke support meeting.  
*Call Toll Free Number:* 1-800-920-7487 Passcode: 66523867#  
*Teleconference Flyer:* [Caregivers Forum](#)
Stroke Survivor 2 Survivor (SS2S) makes its way to North Dakota

SSEEO and the American Heart Association/American Stroke Association had a Stroke Survivor 2 Survivor (SS2S) training with 21 stroke survivors, caregivers and healthcare professionals participating.

Training sessions in both Fargo and Bismarck included instructions on program implementation and a simulated call with a stroke survivor. The SS2S North Dakota team is ready and prepared to start making support calls to discharged stroke patients.