The Beat Goes On
Living with AFib

Know Your Heart.

Live Your Life.

Know Your Choices.

PCNA
Preventive Cardiovascular Nurses Association
www.pcna.net
What is AFib?

This booklet is for you if you have AFib, or if you are at risk for AFib. This booklet is not meant to replace the important information you receive from your doctor or nurse.

The good news is that AFib can be controlled. Millions of people live a full life with AFib.

**AFib is short for Atrial Fibrillation**
(Ay-tree-yul Fib-ruh-lay-shin)

AFib is when your heart flutters, or beats unevenly.

A normal heart beat starts in the upper right chamber of the heart. An electrical signal starts the heart beat at the SA node. The beat travels down through the heart from there. With AFib, signals come from different places in the heart. It’s kind of like a short circuit. It makes your heart beat irregularly. Your heart may beat faster, too.

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### Check off your risk factors

- Angina (chest discomfort)
- Had a heart attack, heart bypass, or heart stents
- Heart valve problems
- High blood pressure
- Heart failure
- Kidney disease
- Diabetes
- Thyroid problems
- A weight problem (obesity)

If you checked any boxes in the above checklist, this increases your chance of having AFib. AFib could lead to stroke or heart failure.

The risk for AFib goes up as we get older:
- 1 in 20 people over the age of 65 has AFib.
- 1 in 10 people over the age of 80 has AFib.

**No matter what risk factors you have, Afib can be controlled. This booklet will tell you about AFib and what you can do.**
How Do I Know if I Have AFib?

Your doctor or nurse can tell you if you have AFib. He or she will take your health history and give you a physical exam. There are also tests for AFib.

Health history

Your doctor or nurse will ask about:
- any symptoms you have
- your history of heart or lung disease, high blood pressure, or thyroid problems
- your health habits, like smoking, drinking coffee or alcohol, and exercise

Physical exam

You will have a complete check-up and other tests for AFib.

AFib can lead to a stroke

The irregular heart beat can make a blood clot form in the heart. The clot can break off into the blood stream and move to the brain. This cuts off the blood supply to the brain and causes 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

AFib sometimes makes the heart weak. This is called heart failure. If you already have heart failure, AFib may make it worse. However, treating your AFib may make your heart failure better.

This picture shows a normal heart and one with heart failure. See how the heart with heart failure is very large. It doesn’t pump as well as the normal heart.

Quiz

Please circle Yes or No.

1. When you have AFib, you are at risk for a stroke.  
   Yes  or  No

2. AFib can cause heart failure.  
   Yes  or  No

Quiz Answers: 1. Yes, 2. Yes

* Nurse is used throughout this brochure. However, your care may be provided by a nurse practitioner or a clinical nurse specialist.
Tests for AFib

Monitor & Echo Tests

EKG (Electrocardiogram EKG or ECG)
The EKG records the electrical pattern of your heart. It will show if your heart beat is regular.

Normal heart beat (it is regular)

[Graph showing a normal heart beat]

AFib heart beat (it is not regular)

[Graph showing an AFib heart beat]

Holter or Event Monitor
This is an EKG recorder you wear on your body for a certain period of time. It records your heart beat. Your nurse or doctor will ask you to write down any symptoms you have while wearing it.

Echo (Echocardiogram)
The Echo Technician gently presses a wand on your chest. The wand takes pictures of your heart’s chambers and valves. The echo also measures how strong your heart pumps.

Blood Tests
Blood tests, such as thyroid and complete blood count, can also help to see why you have AFib.

Stress Tests
Stress tests show if blood flow to your heart is normal during exercise. Most stress tests use a treadmill.

• Basic treadmill test
You walk on a treadmill to stress your heart. It gets faster and steeper every 3 minutes. A nurse or doctor will watch your EKG and your blood pressure. They will ask about any symptoms you have.

• Echo stress test
While you are resting, you will have an echo test. Then you walk on a treadmill to stress your heart. When you finish walking, you will have another echo to see how well your heart pumps blood.

• Nuclear stress test
You walk on a treadmill to stress your heart. Then you will be given a medicine through a vein in your arm that shows the blood flow to your heart.

What if I can’t walk on a treadmill?
If you can’t walk on a treadmill, your doctor can give you a medicine that works like exercise to stress your heart. Your doctor will decide which test is right for you.

Quiz

Please circle Yes or No.

1. Will wearing a monitor help to see if you have AFib? [Yes] [No]
2. Does an echo test show how strong your heart pumps? [Yes] [No]

Quiz Answers: 1. Yes, 2. Yes
Types of AFib

Are there different types of AFib?

Yes, there are several types of AFib.

The main ones are:
- paroxysmal
- persistent
- permanent

Paroxysmal (pair-rock-siz-mul)
- This type of AFib starts and stops suddenly. You may have symptoms for only seconds or minutes. Or the symptoms may last hours or days at a time.
- Your doctor will decide what treatment is best for you.

Persistent
- This type of AFib comes back and doesn’t stop on its own.
- With Persistent AFib, you need treatment to return the heart to a normal heart beat.

Permanent
- Permanent AFib continues even with treatment.
- The heart won’t return to a normal heart beat.
- The goal of treatment is to control the heart rate to protect you from having a stroke.

Do you know what type of AFib you have?
Talk to your doctor or nurse about the types of AFib.

What does AFib feel like?

Some people do not feel anything or have any problems with AFib. But problems 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)

Quiz

What can I do if I have AFib?

1. Get regular check-ups. Learn about medicines and other treatments. (See below)
2. Check your pulse daily.
3. Be good to your body. Follow the tips under “Live a Full Life With AFib” on the following tab.

Treatments

Electrical cardioversion
This treatment can put your heart back into its normal beat. Your doctor will give you medicine to make you sleep for a few minutes. Then the doctor gives your heart a tiny electric shock. The electric shock stops the AFib and starts regular heart beats.

Catheter ablation
The doctor does a test to find the heart cells that cause your AFib. Then the doctor sends a signal through a tube straight to these cells that stops the AFib.

Pacemaker
A pacemaker is a small device that can tell when your heart is beating too slow or too fast. It helps keep the heart beat regular. The doctor usually puts it under the skin on the chest.

Medicines
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

Check your pulse daily
Check your heart beat or pulse, every day. Also, 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

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!

Look for:
• Is your pulse regular?
• How many beats do you have in a minute?

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Call your nurse or doctor:
• if your pulse has been regular, and now it isn’t
• if your pulse is over 100 beats a minute
Live a full life with AFib

Follow these tips:
• If you smoke, quit.
• Don’t drink alcohol.
• Exercise. Walking 20–30 minutes a day is great exercise.
• Eat lots of fruits, fiber, and vegetables.
• Eat very little saturated fat and salt.
• Learn about your medicines.
• Get rid of some stress.

Get rid of some stress
Stress can make any health problem worse, including AFib. Figure out what stresses you and what you can do to relax.

Try these tips:
1. Think positive. Focus on what you can do, not on what you can’t do.
2. Talk about your feelings and needs.
3. Meditate, read, listen to music, write in a journal.
4. Exercise daily.
5. Try massage, yoga, or tai-chi.
6. Spend time with family & friends.
7. Volunteer to help others.

Create a healthy plate

Learn about your medicines
• Keep an up-to-date list of ALL your medicines and supplements. Always keep the list with you.
• Tell all your health care providers that you have AFib. Be sure to tell them that you are on medicine. This is really important if your medicine is to prevent blood clots.
• If you have questions about your medicine, talk to your nurse, doctor or pharmacist.

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Tips for taking medicines
• Talk with your nurse or doctor about making your medicine schedule simple and cheap.
• 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 nurse or doctor.
• Never stop taking your medicine unless your nurse or doctor tells you to.
• Write on your calendar when you need to refill your medicines. Refill at least 1–2 weeks before you run out.

View tips and sample meal plans on this website.

ChooseMyPlate.gov
Now it is time to make a plan, so you can live a full life with Afib.

Top 10 Actions You Can Take

1. Learn what AFib is and how to prevent a stroke.
2. Know your risk factors.
3. Ask your doctor or nurse what tests you might need.
4. Know what type of AFib you have.
5. Learn about your medicines.
6. Check your pulse daily.
7. Eat healthy foods like vegetables, fruit, whole grains, and healthy fats.
8. Stop smoking.
9. Get active.
10. Ask questions. Use the list on the next page when you visit your nurse or doctor.

Questions for your doctor or nurse

- Why did I get AFib?
- Will I have this all of my life?
- How can you treat my AFib?
- How do these medicines work? How do these new medicines work with my other medicines?
- Do I need to change my diet?
- Can I drink alcohol or caffeinated beverages?
- Can I exercise?
- Is there anything that I should avoid? What about having sex?
- When should I call you?
- When should I call 9-1-1?

Make it a goal to ask your nurse or doctor all these questions. Check each one off once you understand the answer.

“We are learning to control our AFib.”