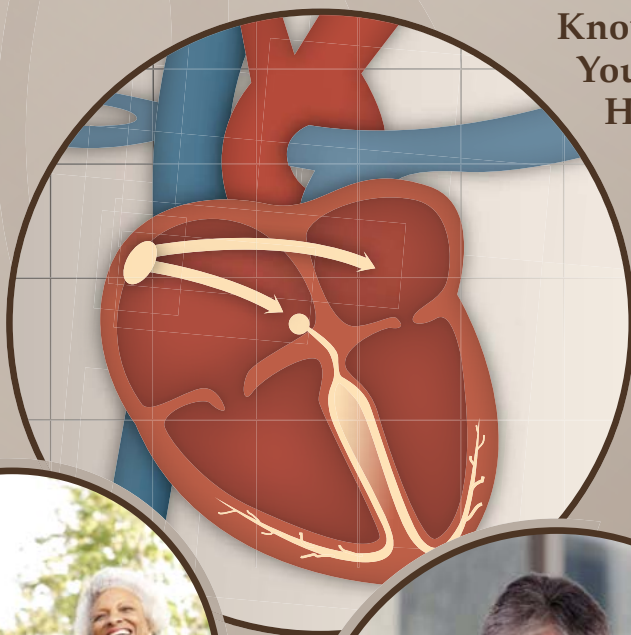


# Atrial Fibrillation

## The Beat Goes On Living with AFib

Know  
Your  
Heart.



Live  
Your Life.



Know  
Your  
Choices.



**PCNA**

Preventive Cardiovascular  
Nurses Association

[www.pcna.net](http://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.

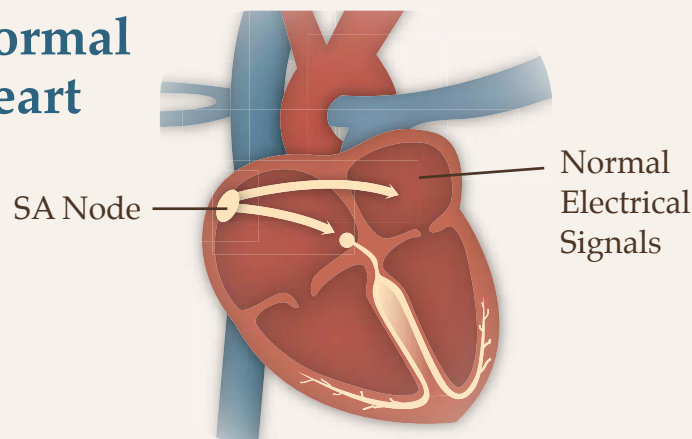
## AFib is short for Atrial Fibrillation

(Ay-tree-yul Fib-ruh-lay-shin)

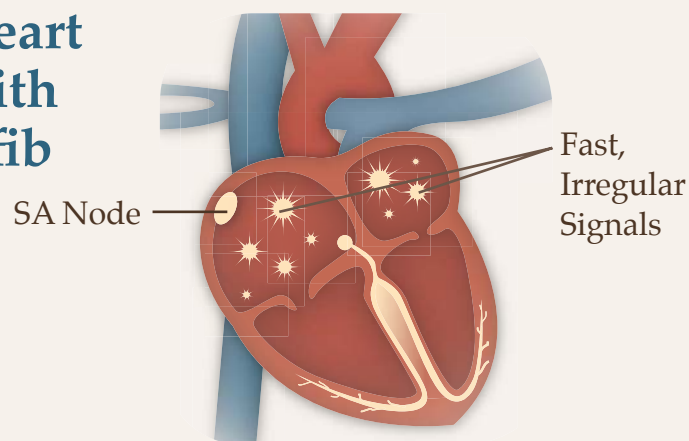
AFib is when your heart flutters, or beats unevenly.

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.

### Normal Heart



### Heart with Afib



### ✓ 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.

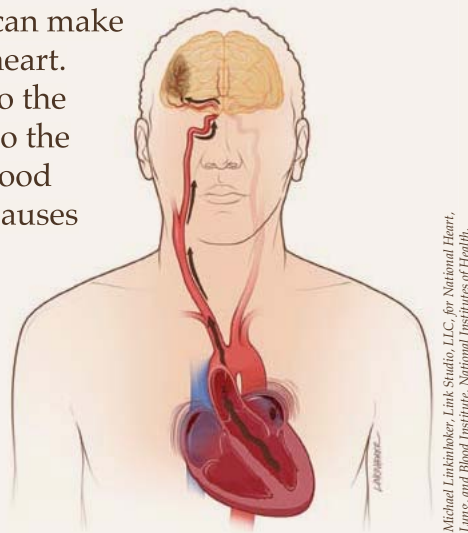
**No matter what risk factors you have, Afib can be controlled. This booklet will tell you about AFib and what you can do.**

# Why is AFib a problem?

## 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.

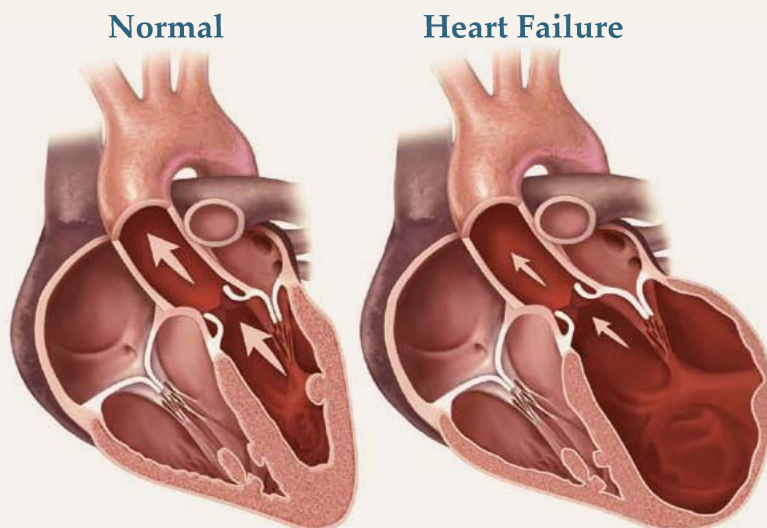
This picture shows how a blood clot can travel from the heart to the brain, causing a stroke.



## 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.



## 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



“Do you know your health history?”

### Physical exam

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

## 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.

Why is AFib a problem?



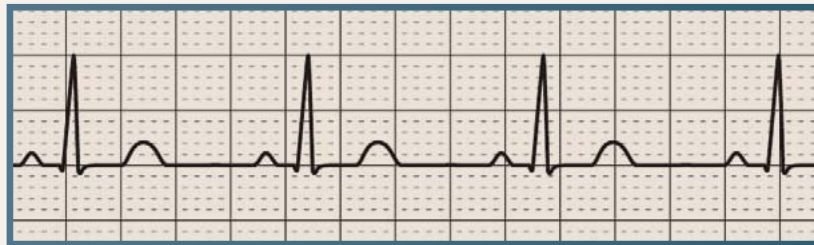
# Tests for AFib

## Monitor & Echo Tests

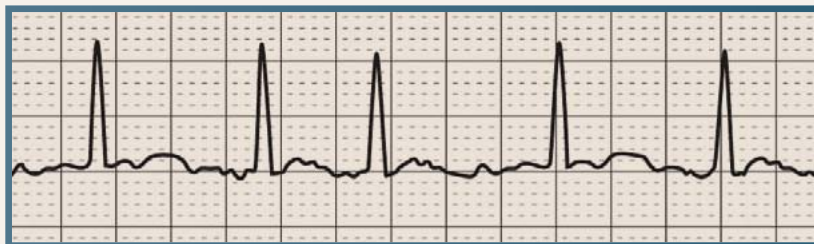
### EKG (Electrocardiogram EKG or ECG)

The EKG records the electrical pattern of your heart. It will show if your heart beat is regular.

#### Normal heart beat (it is regular)



#### AFib heart beat (it is not regular)



Photos reused with permission by EKG CONCEPTS

### 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 <u>OR</u> No |
| 2 | Does an echo test show how strong your heart pumps?  | Yes <u>OR</u> 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)



“How many types of AFib are there?”

Types of AFib

## Quiz

Please circle Yes or No.

- |   |   |                  |
|---|---|------------------|
| 1 | Is AFib an irregular heart beat?                          | Yes <u>OR</u> No |
| 2 | Can AFib cause chest discomfort?                          | Yes <u>OR</u> No |
| 3 | Can you feel short of breath when you have AFib?          | Yes <u>OR</u> No |
| 4 | Can some people have <b>no</b> symptoms at all with AFib? | Yes <u>OR</u> No |
| 5 | Does paroxysmal Afib happen all the time?                 | Yes <u>OR</u> No |

Quiz Answers: 1. Yes, 2. Yes, 3. Yes, 4. Yes, 5. No

# 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?

## Track Your Pulse Daily

Monday	_____ per minute
Tuesday	_____ per minute
Wednesday	_____ per minute
Thursday	_____ per minute
Friday	_____ per minute
Saturday	_____ per minute
Sunday	_____ per minute

### 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

What can  
I do?



## 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

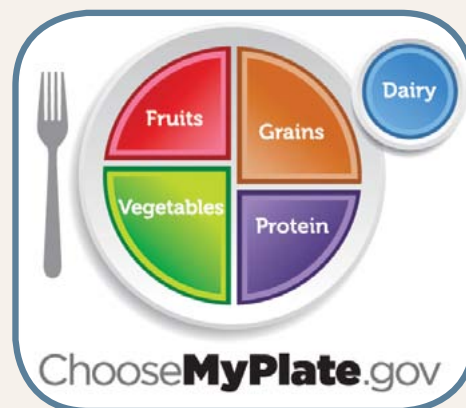
Stress can make any health problem worse, including AFib. Figure out what stresses you and what you can do to relax.

### 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



View tips and sample meal plans on this website.

## 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.

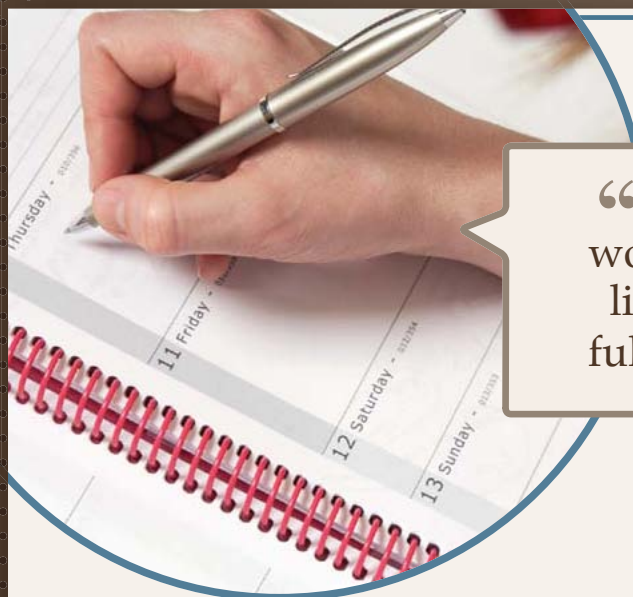
### My Medicines

Name	What is it for?

## 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.

# Make a plan



“I can work on living a full life!”

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.”

Make  
a plan



# Atrial Fibrillation

## The Beat Goes On Living with AFib

This brochure was supported by educational funding from Boehringer Ingelheim & Pfizer, Inc. Disclaimer: This and other PCNA educational materials are for informational purposes only and are not intended to replace medical advice or to diagnose or to treat health problems. Health-related decisions should be made in partnership with a healthcare provider. It is the reader's responsibility to seek out the most current, accurate information. PCNA disclaims all warranties with regard to such educational materials. In no event shall PCNA be liable for any special, indirect, or consequential damages or any damages whatsoever arising out of or in connection with the use of any PCNA educational materials.



**PCNA**  
Preventive Cardiovascular  
Nurses Association  
[www.pcna.net](http://www.pcna.net)

613 Williamson Street, Ste. 200, Madison, WI 53703  
Phone: 608-250-2440 • Email: [info@pcna.net](mailto:info@pcna.net)

### How to get more copies of this brochure

- Patients: Download a free copy at [www.pcna.net/patients](http://www.pcna.net/patients)
- Healthcare providers: Order free printed brochures in packs of 100 by visiting [www.pcna.net/hcp](http://www.pcna.net/hcp)

Product ID 00002000911

Copyright © 2011 Preventive Cardiovascular Nurses Association

