



Calming Hearts

Living Well with Atrial Fibrillation

MaineHealth

www.mainehealth.org



For provider and patient to do during the visit:

- Review this guide together.
- Fill in the yellow spaces on this page.

Name: _____

With your provider, fill in all the yellow areas below:

MY WEIGHT

My weight is _____ My goal weight is _____

My heart pumps at _____ % (>55% is normal)

MY MEDICINES

My anti-arrhythmic is _____ and I take it _____

My rate-control drug is _____ and I take it _____

_____ and I take it _____

My blood thinner is _____ and I take it _____

Afib rehab may be offered at my local hospital. I will ask my provider if afib rehab is available to help me lower my risk factors: *(Circle all that apply)*

High Blood Pressure Obesity Stress Sleep Apnea
High Cholesterol Alcohol Tobacco

CONTACT NUMBERS

Primary Care Doctor

Name _____

Phone _____

Electrophysiologist (EP)

Name _____

Phone _____

Cardiologist

Name _____

Phone _____

Specialist

Name _____

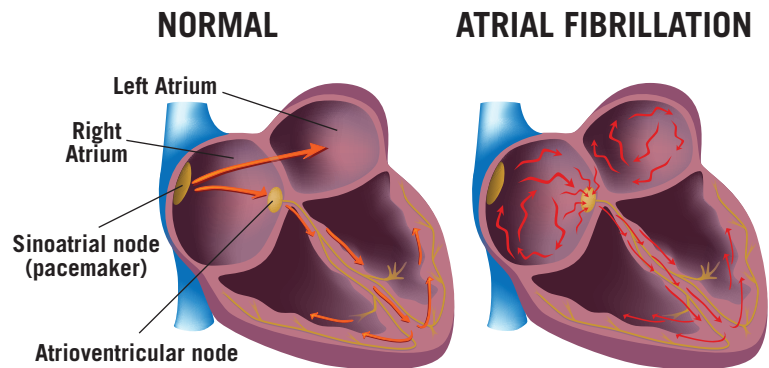
Phone _____

What is Atrial Fibrillation (afib)?



Atrial fibrillation (a·tri·al fi·bril·la·tion), often called “afib,” is the most common heart rhythm problem. Around 6 million Americans have afib.

It is when the electrical system of your heart does not work correctly. Afib causes the top chambers of your heart, called the atria, to beat out of rhythm. This keeps the atria from pumping normally.

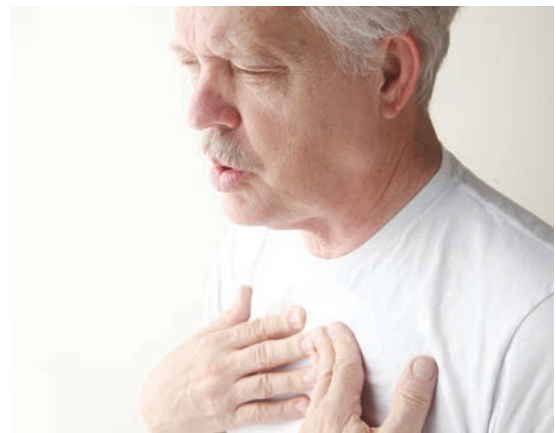


What does afib feel like?

Afib can make your heart beat feel irregular and faster than normal. Some patients feel very tired or out of breath while in afib. Some patients with afib have no symptoms at all.

Afib may cause you to feel:

- Like your heart is racing
- Dizzy or lightheaded
- Short of breath
- Tired or fatigued
- Chest pain or pressure



What is Atrial Flutter?

Atrial flutter is a heart rhythm problem that often comes with afib. Atrial flutter usually is from the right atrium and feels similar to afib. It is common to have both afib and atrial flutter and the treatments for both are similar.

Why is afib a problem?

Afib can lead to a few problems if not treated including heart failure, stroke, and other blood clots.

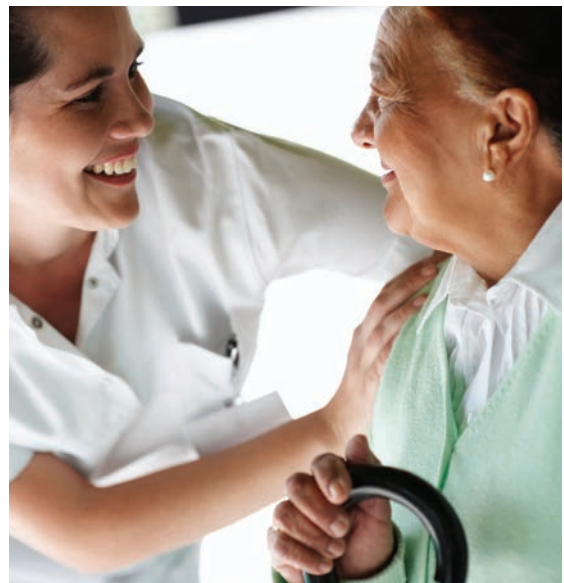
Heart Failure

This is when the heart can't pump enough blood to meet the body's needs. The heart does not pump as well if afib is not well controlled. This is called heart failure.

Symptoms of heart failure may include:

- Rapid weight gain
- Swelling in your feet or ankles
- Trouble breathing with activity and when lying flat

Please speak with your doctor if any of these occur.





Stroke

Afib can also cause blood to pool and form a blood clot in the heart. This clot can move through the blood stream to the brain and cut off the blood supply. This is called a stroke. Even when your heart is beating normally, if you have afib you are at least 5 times more likely to have a stroke than a person without afib. Other risk factors like diabetes, heart disease, and your age can further increase your risk of having a stroke.

Since the greatest risk of afib is stroke, you need to know the signs to look for. The faster a stroke is identified and treated, the more likely you are to have a good outcome.

F.A.S.T. is an easy way to remember the sudden signs of a stroke:

FACE DROOPING

ARM WEAKNESS

SPEECH DIFFICULTY

TIME TO CALL 9-1-1

Some other common signs of stroke include:

- **Sudden** numbness or weakness of face, arm, or leg especially on one side of the body
- **Sudden** confusion, trouble speaking, or understanding
- **Sudden** trouble seeing in one or both eyes
- **Sudden** trouble walking, dizziness, loss of balance or coordination
- **Sudden** severe headache with no known cause

If these symptoms occur, call 9-1-1 immediately!

Other blood clots

Blood clots can also go to parts of the body other than the brain. They can go to the intestine and cause severe abdominal pain. They can go to the arms or legs and cause pain and numbness. If you have any of these problems, call your doctor.

How can we treat my afib?

Our goal is to reduce the effects afib has on your life, so that you can live well. The first step in managing afib is often to treat it with medicines.

Medicines can help by:

- Keeping your heart from beating too fast (rate control)
- Changing your heart to a normal beat (rhythm control)
- Preventing a blood clot and stroke (blood thinners)





Rate control

When your heart starts beating too fast for too long, your heart may become weaker. This can make you short of breath, dizzy, tired, and cause chest pain. Some medicines control your heart rate while in afib to avoid these symptoms. Medicines such as beta blockers, calcium channel blockers, and digoxin are often used. If you cannot tell that you are in afib, controlling the heart rate with medicines is a good plan.

Rhythm control

Another option is to try to get the heart into a regular rhythm. This can be done with medicines called anti-arrhythmics. You and your doctor may have to try several different drugs to find the one that works best for you.

Blood thinners (*Anticoagulants*)

Taking a blood thinner (anticoagulant) makes your risk of having a stroke much lower. It is important to take the dose your doctor tells you to take at the same time every day. People with afib who are not taking their blood thinning medicine properly are more likely to have a stroke or dangerous bleeding. Your doctor will determine which medicine is best for you, anticoagulants, aspirin, or both.

Do not take NSAID painkillers like Advil® (ibuprofen) and Aleve® (naproxen), unless your doctor tells you to. Taking these with your blood thinner can lead to dangerous bleeding. Please talk to your provider about pain medicines if you need them.

Avoid alcohol and grapefruit juice while on blood thinners. Your blood thinner may require a change in the foods you eat. Please ask your doctor or nurse what you can eat so your blood thinner works best for you.

What if the medicines don't work?

If medicines aren't working well enough and your afib is interfering with your life, there are other treatments your doctor may recommend.

Electrical Cardioversion

This treatment “resets” the heart back into a normal rhythm, sort of like “resetting” a breaker on your electrical panel in your home.

This reset to your heart rhythm stops afib quickly, but is not a permanent fix. Stopping afib in this way gives you a chance to make changes to prevent it from coming back.

These changes include:

- Healthy eating
- Exercise
- Quitting smoking and alcohol
- Losing weight

If medicines and cardioversion aren't enough to control your afib, other treatments may help. These treatments include ablation, convergent, or surgical MAZE. Please talk to your cardiologist for more information.



What can I do to help my afib?



Manage your weight

People who are obese are much more likely to have afib. Overweight and obese patients who reach and keep a healthy weight will reduce their afib. People who keep a healthy weight have less afib, the episodes don't last as long, and their symptoms may be less severe. Obesity can also lead to high blood pressure, diabetes, and sleep apnea—all of these can make afib worse.

Eat healthy

Reduce the amount of saturated fat, trans fat, salt, sugar, and cholesterol you eat.

Here are some tips:

- Choose fruits, vegetables, whole grains, low-fat or non-fat dairy products, fish, poultry without the skin, and small amounts of lean meats.
- Increase the amount of soluble fiber you eat. Good sources of soluble fiber are oats, lentils, beans, and nuts.
- **Limit salt** intake to no more than 1 teaspoon of salt a day (2,300 milligrams). That includes all of the salt you eat in cooking, at the table, or already there in the food you buy. *Most salt eaten by Americans comes from processed packaged foods.*
- When you look at your plate half of it should be covered by vegetables and fruits, the other half should be split between lean meat and a whole grain like brown rice.

Take your medicines exactly as your doctor tells you to

Keep your prescriptions filled and take medicines at the same time every day. If you don't feel well after taking a medicine, please call your doctor. Never stop taking your medicine without first talking with your doctor.

Tips to help you take your medicines correctly:

- Keep an up-to-date list of **all** your medicines and supplements.
Always keep the list with you
- Use a weekly pill box to keep your pills organized
- Use an alarm to help you remember to take your medicine at the same time each day
- Take your medicines with a daily activity, such as brushing your teeth, to help you remember to take them
- Fill your prescriptions before they run out

Manage your risk factors to decrease your afib:

- If you're overweight, exercise and diet (after getting your doctor's ok) to work toward a healthy weight
- Exercise. Walking 20-30 minutes a day is great heart-healthy exercise
- Don't drink alcohol. Alcohol increases your risk of afib and may cause dangerous bleeding
- If you smoke, quit

1-800-207-1230

THE MAINE TOBACCO HELPLINE
It's free, confidential, and it really works.





- Don't use any illicit drugs such as cocaine or marijuana
- If you have sleep apnea, see your doctor. Signs of this are loud snoring, daytime sleepiness, a sore throat when you wake up, or if you stop breathing in your sleep.
- Decrease your stress level — Yoga and other exercise routines may help decrease your afib!
- Talk to your doctor before taking any over-the-counter supplements. Some of them may interact with your medicines and can be dangerous

Take ACTION based on signs and symptoms!

- If you have any signs of stroke, *call 9-1-1 immediately!*
- Check your blood pressure. If it's more than 140/90 two times in a row, call your nurse or doctor. Also call your doctor if you are feeling lightheaded and your blood pressure is lower than usual.
- If your pulse has been regular and now it isn't, call your nurse or doctor
- If your pulse is over 110 beats per minute when you are resting, call your nurse or doctor

A team approach

Caregivers

Afib is life-changing and you will find that you may need emotional and physical support at times. Involving other caregivers, such as family members, will help you succeed in managing your afib. A caregiver can help at doctor visits by asking questions and writing down answers or instructions. You may simply need help around the house, help managing your pills, or for someone to be your eyes, ears, and hands when having a treatment. A caregiver needs to be patient, understanding, and emotionally supportive.

Your healthcare team

You need to tell all of your doctors and your dentist that you have afib and that you take medicines for this. **ALWAYS** tell them about any blood thinners you take. It is important to share this information before any treatments, like vaccinations and routine dental cleanings. Many medicines, vitamins, and herbal supplements interfere with blood thinners and can be dangerous. Any changes to your medicines should come only from the doctor who prescribed them.



For more information



American Heart Association: Afib Town

<http://myafibexperience.org/home>

Afib Alliance: AlittleFIB

<http://www.alittlefib.org>

StopAfib.org

<http://www.stopafib.org>

Heart Rhythm Society: Afib

<http://www.hrsonline.org/Patient-Resources/Heart-Diseases-Disorders/Atrial-Fibrillation-AFib>

This guide is designed to help you and your family better manage atrial fibrillation. Thank you to the MaineHealth Atrial Fibrillation Education workgroup and the Maine Medical Center Atrial Fibrillation Clinical Transformation Project Team in the making of this booklet.

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