Healing From Atrial Fibrillation

Your Guidebook to Symptoms and Treatments

AdventHealth

A Healthier Heartbeat Starts Here

Knowing what atrial fibrillation (AFib) is, how to spot warning signs and when and where to seek help are important factors in diagnosing and treating it. According to the American Heart Association, AFib affects an estimated 2.7 million Americans. It is the single most common abnormal heart rhythm in the United States and the underlying cause in about 15% of all strokes.

AFib is a serious condition, but it's treatable, especially when diagnosed early. This guide will give you information, resources and answers to common questions about AFib so you can take heart health into your hands.

Understanding Atrial Fibrillation

AFib happens when the heart's upper chambers (atria) receive abnormal electrical signals and beat irregularly (quivering). The atrioventricular (AV) node, which electrically connects the atria and the ventricles, becomes overwhelmed with erratic impulses trying to get to the ventricles. The ventricles also pulse faster.

Ultimately, the heart's entire rhythm suffers, beating too fast and irregularly. For adults, a normal resting heart rate ranges from 60 to 100 beats per minute, but during AFib, it could be up to 175 beats per minute.

Causes of Atrial Fibrillation

Anything that damages the heart's structure can cause AFib. There are two main types of AFib causes. For most people, it is tied to heart disease or a heart abnormality. For people without any underlying heart disease, AFib is sometimes called primary AFib or "lone AFib," and a root cause often cannot be found.

AFib usually affects people between the ages of 30 and 60. It could need emergency treatment and can lead to life-threatening complications. Because blood is not being carried through the heart valves correctly, it can collect and form clots in the heart. If one of these clots travels to the brain, it can block blood flow and cause a stroke.

Managing Your Risk of Atrial Fibrillation

A risk factor is anything that increases the likelihood of developing a disease or injury. For AFib, there are some risk factors that you can control and others that you can't. It is important to know these risk factors so that you can talk about them with your doctor.

Controllable Risks

Alcohol or Stimulant Use

Alcohol and stimulant use can interfere with the normal electrical impulses of the heart, causing AFib.

Cholesterol

A 240 mg/dl or higher level for total cholesterol, as well as an HDL (good) cholesterol of less than 40 mg/dl (men) or 50 mg/dl (women), are considered risk factors.

Diabetes

Even if blood sugar is controlled, diabetes increases the risk of heart diseases and stroke.

High Blood Pressure

A blood pressure of 140/90 mm Hg or higher is considered high blood pressure, or hypertension. It is a risk factor for coronary heart disease and the single most important risk factor for stroke.

Obesity

People who are overweight are likely to have stress on their heart and other heart disease risk factors.

Physical Inactivity

Being active is beneficial for your blood pressure, cholesterol, blood sugar levels, blood clotting factors, the health of your blood vessels and reducing inflammation. Even a small increase in activity can reduce heart disease risk, even with existing heart conditions.

Stress

High stress levels can negatively influence other risk factors for heart disease, such as high cholesterol, high blood pressure, smoking, inactivity and body weight.

Tobacco Use

Smoking harms nearly every organ of the body and severely damages your heart and lungs. It has been shown to increase fat in your blood; lower HDL (good) cholesterol; make blood more likely to clot; and cause damage, narrowing and increased plaque buildup in blood vessels.

Unhealthy Diet

Not eating a healthy diet is linked to being overweight or obese, having high cholesterol and developing diabetes, which all increase heart disease risk.

Unontrollable Risks

Age

Aging is the most common reason people develop AFib. With age, certain areas of the heart can lose normal control mechanisms and produce bursts of rapid heart rate. Age can also contribute to fibrosis or scarring in the heart that can cause problems with the electrical impulses.

Heart Disease

Coronary artery disease, heart failure and heart valve disease increase the risk of AFib.

Other Chronic Diseases

Sleep apnea, thyroid diseases and other serious illnesses like metabolic syndrome, chronic kidney disease or lung disease put you at risk of AFib.

Signs and Symptoms to Keep in Mind

Symptoms of AFib can be different for each person. For example, some people with AFib have no symptoms and do not find out about it until a doctor discovers it during a routine exam. Others may feel some of the following symptoms.

A Skipped or Racing Heartbeat

Feelings of a racing, uncomfortable, irregular heartbeat or a flip-flopping in the chest; or a heart rate above the normal range of 50 to 100 beats per minute.

Chest Pain

Discomfort that presents as pain or a tight ache, pressure, fullness or squeezing in the center of your chest. If you have chest pain, call 911 immediately, because it's also a critical symptom of a heart attack.

Dizziness

Feeling dizzy, lightheaded or fainting.

Fatigue or Weakness

Extreme exhaustion and decreased physical and mental ability.

Shortness of Breath

Having a hard time breathing normally or deeply, without chest comfort.

If you have any of these warning signs, make an appointment with your doctor for an exam. Your doctor may do further testing to see if it's AFib, or some other heart rhythm disorder.

Types of Atrial Fibrillation

The three major types of AFib can have different symptoms and varied persistence.

Occasional

The abnormal heart rate begins suddenly and stops on its own. Symptoms can be mild or severe, but they usually stop in less than 24 hours, or no more than a week. This condition is also called paroxysmal AFib.

Persistent

The abnormal heart rate continues for more than a week. It may stop on its own, or it may need to be resolved with treatment.

Permanent

A normal heart rhythm can't be restored with treatment. Over time, paroxysmal and persistent AFib may become more frequent and result in permanent AFib.

Diagnosing Atrial Fibrillation

If you have any of the warning signs of AFib, it's very important to make an appointment with your doctor, who may review your medical and family history, do a physical exam, and perform an electrocardiogram (ECG or EKG) to test for AFib or another type of arrhythmia.

A Physical Exam

During the physical exam, your doctor may check to see if your heart is enlarged, listen for heart murmurs or fluid in the lungs, feel your thyroid glands or even test your reflexes. Each part of the exam can help your doctor pinpoint the cause of the AFib.

Using Heart Monitors

The most effective tools for diagnosing AFib are the ECG and heart monitors. In a normal heart, the sinus rhythm is a series of bumps and lines that show the contractions of the atria and ventricles. When AFib is present, the bumps in the ECG are replaced by irregular lines.

Echocardiogram Testing

Finally, your doctor may suggest you have an ECG, where sound waves are used to create images of the heart. This imaging can show how well your heart chambers and valves are functioning, places where blood flow is poor and where damage that has already occurred.

Additional Tests

Depending on the results of these tests, your doctor may run more tests, including a thyroid-stimulating hormone (TSH) test to identify an overactive thyroid, or perform imaging on the legs or lungs to find any potential blood clots. Blood tests or heart monitors may also be used to help in the diagnosis.

Getting the Right Treatment for You

AFib treatment can include medications and surgery. Surgical procedures range from minimally invasive to open-heart procedures, radiofrequency ablation, robotic ablation, cryoablation and Maze procedures.

Medications

In mild cases of atrial fibrillation, or in cases where surgery or other treatments are not an option, a doctor may recommend medications like:

- Anti-arrhythmic medications to maintain normal heart rhythm
- Anticoagulants to thin blood and prevent blood clots
- Beta-blockers to slow the heart rate
- Calcium channel blockers to slow the heart rate
- Digoxin to slow the heart rate

Ablation Procedures

If your AFib isn't treatable with medical therapy, you may undergo ablation therapy. Ablation is a nonsurgical, wire-based procedure that uses energy to correct cardiac tissue triggering AFib.

Maze Procedures

The Maze procedure was designed to disrupt the erratic impulse triggers and circuits that cause AFib. It creates carefully placed scar tissue lesions within the atria to stop the faulty electrical impulses from traveling. This creates only one path that the electrical impulse can take, which prevents the atrium from fibrillating. Three variations of the Maze procedure, from most to least invasive, are the Cox-Maze procedure, Modified-Maze procedure and Mini-Maze procedure.

Helping You Face Atrial Fibrillation With Confidence

Serving award-winning cardiac care, AdventHealth offers comprehensive diagnosis and treatment for atrial fibrillation and other arrhythmias. Our physicians employ minimally invasive surgical techniques to promote quicker healing and reduce time spent in the hospital as well. You can count on us for heart care for the whole family, from prevention and diagnosis to leading-edge advancements in AFib and heart arrhythmia treatment and management.

AdventHealth