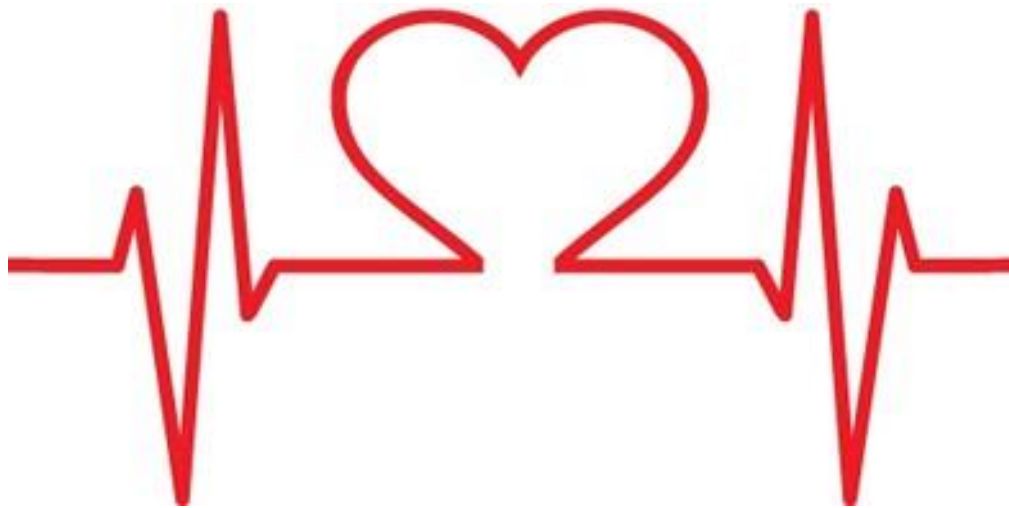


BE WELL

5 Things to Know About A-fib

By Debbie DeAngelo
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A-fib, short for atrial fibrillation, is the most common type of arrhythmia (abnormal heart rhythm). Affecting approximately three million people, the symptoms may be absent, subtle, or mistakenly attributed to other causes. On the other hand, discernable symptoms may be continuous or sporadic and not present during an ECG (also referred to as an EKG).

Normally, the heart's upper (atria) and lower (ventricles) chambers work in tandem to result in a strong, regular heartbeat. With A-fib, a problem in the heart's electrical system causes the upper chambers to quiver and become out of

sync with the lower chambers, resulting in a fast, irregular pulse. This disrupts the coordinated flow of blood between the upper and lower heart chambers. When left untreated, there is a significant increase in the risk of heart failure, blood clots, and stroke.

Since early detection and treatment are essential to stroke prevention, it pays to become familiar with the facts of A-fib.

What are the symptoms? As mentioned, not everyone will feel symptoms. When they do occur, they may come and go. These symptoms include a racing or fluttering heartbeat, dizziness or lightheadedness, fainting, fatigue, feeling like you can't catch your breath, and chest pressure or pain.

What causes A-fib? Changes or damage to the heart's tissue and electrical system are the basis of this arrhythmia. Commonly, heart disease, heart failure, and high blood pressure can cause these changes. Other contributing factors are hyperthyroidism (overactive thyroid), heart valve problems, moderate to heavy alcohol consumption, smoking, obesity, diabetes, sleep apnea, advanced age, and any kind of trauma, injury, surgery, or significant infection.

How is it diagnosed? A-fib can be seen on an ECG if it's occurring at the time of the tracing. This can be tricky if you're flipping in and out of the arrhythmia. Wearing a home monitoring device for several weeks can capture these sporadic episodes. Your health care provider will also inquire about your medical and family history, perform a physical exam, and possibly order bloodwork.

How is A-fib treated? The treatment goals are to manage the heart arrhythmia and decrease stroke risk. Your provider will take into consideration the frequency and severity of symptoms, as well as your overall heart health. Medications can be prescribed to prevent blood clots, slow down the rapid heart rate, and normalize the rhythm. Procedures such as cardioversion, which restores the normal heart rhythm using low-energy shocks, or ablation therapy, which destroys some of the heart tissue causing the abnormality, may be considered. In some cases, other types of surgery may be recommended. Be sure to ask your provider to review and discuss all your options.

Can it be prevented? Healthy lifestyle choices can reduce the risk of heart disease and other medical conditions, making it a less friendly environment for A-fib to occur. Keeping your heart in top condition enables it to function optimally. Target the major modifiable risk factors such as processed food intake, being above a healthy body weight, physical inactivity, tobacco use, and alcohol consumption. Additionally, manage high blood pressure, control diabetes, get seven to nine hours of sleep, and take steps to minimize stressors, as well as find productive outlets for dealing with them.

ABOUT THE AUTHOR

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