



ATRIAL FIBRILLATION



BASIC INFORMATION

DESCRIPTION

An abnormal heart rhythm. Fibrillation pertains to a "quivering" of muscles. Atrial pertains to the atria, the upper chambers of the heart. The abnormal rhythm reduces the flow of blood to the brain and other body parts and can cause symptoms. It usually affects older adults and men more than women.

FREQUENT SIGNS AND SYMPTOMS

- There may be no symptoms.
- Irregular and often rapid beating of the heart.
- Weakness, dizziness, shortness of breath, chest pain, or faintness may occur.

CAUSES

The heart has an electrical system that controls the heart rate and the heart's contractions. The average heart beats at a rate of 60 to 100 times per minute. With atrial fibrillation, the electrical system does not function as it should. The atria quiver instead of contracting and heart rate increases (may exceed 350 beats a minute). There are different risk factors that can lead to atrial fibrillation and sometimes no cause is found.

RISK INCREASES WITH

- Increased age.
- Coronary heart disease.
- High blood pressure.
- Abnormal heart muscle.
- Mitral valve disease.
- Hyperthyroidism.
- Lung disease (chronic obstructive pulmonary disease, emphysema).
- Pericarditis (heart lining inflammation).
- Pulmonary embolism.
- Congestive heart failure
- Recent heart or lung surgery.
- Use of stimulant drugs (cocaine, decongestants).
- Excessive alcohol use.
- Congenital (present at birth) heart abnormality.
- Lone atrial fibrillation in young, healthy adults.

PREVENTIVE MEASURES

No specific preventive measures. Avoid risk factors where possible.

EXPECTED OUTCOMES

It can often be controlled with treatment. Atrial fibrillation tends to become a chronic condition.

POSSIBLE COMPLICATIONS

- Stroke.
- Arterial thrombosis or embolus (blood clots).
- Congestive heart failure.
- Other heartbeat irregularities lead to cardiac arrest.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will do a physical exam and ask questions about your symptoms. The rapid and irregular heart rate can be heard with a stethoscope (a device for listening to bodily sounds). Medical tests may include blood studies and heart function tests.
- Treatment is aimed at treating the cause of the atrial fibrillation, slowing the heart rate, converting the abnormal rhythm to normal, preventing a recurrence, and preventing complications.
- Treatment steps may include drug therapy, electrocardioversion, surgery, and other procedures.
- Abnormal heart rhythm may be converted to normal rhythm with drug therapy or with electric shock (electrocardioversion). An electric shock stops the abnormal activity and allows the normal rhythm to take over.
- Recurring atrial fibrillation may be treated with a variety of procedures. These include a pacemaker or atrial defibrillator implantation, AV node ablation, Maze procedure (atrial surgery), and pulmonary vein isolation.
- Some patients may be left in atrial fibrillation long-term if the heart rate is under control.
- To learn more: American Heart Association, local branch listed in telephone directory, or call (800) 242-8721; website: www.americanheart.org.

MEDICATIONS

You may be prescribed drugs for the underlying risk factor, to slow the heart rate, and to prevent blood clots.

ACTIVITY

Activity may depend on general state of health. Get 20 to 30 minutes of aerobic exercise three times a week.

DIET

Eat a low-fat, high-fiber diet that includes fruits and vegetables. Begin a weight loss diet, if overweight.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of atrial fibrillation.
- Any change in heart rate or rhythm, chest pain, sweating, weakness, shortness of breath, or

swollen feet and ankles occurs.

