

## You have Atrial Fibrillation

### What is Atrial Fibrillation?

- ✦ It is an irregular heartbeat. It most often occurs in people with diabetes, high blood pressure, heart disease and in people over 65.

### What Risks Does It Have?

- ✦ There is a greater risk of having a stroke because blood clots can form in the heart when it beats irregularly. Blood clots can travel to the brain and cause a stroke.
- ✦ The risk of a stroke is 3 to 5 times greater for someone with atrial fibrillation than that for someone without it.

### What are the Symptoms of Atrial Fibrillation?

- ✦ Some people do not have any symptoms. Others might feel one or more of the following:
  - palpitations, racing or irregular heart rate, or a fluttering or butterfly feeling in the chest
  - weakness
  - chest pain
  - lightheaded, dizzy, or fainting
  - trouble breathing
- ✦ Call your doctor if there is a change in your condition.

### Medications

- ✦ Some medications help prevent atrial fibrillation, while others control how fast the heart beats. Your doctor will decide which medications are best for you.
- ✦ Take your medications every day as prescribed by your doctor.
- ✦ If you have been prescribed blood thinners, it is important to take them as ordered to help prevent a stroke. Your doctor might prescribe Aspirin, Warfarin (Coumadin) or Dabigatran (Pradax) to thin your blood and reduce the risk of stroke.
- ✦ If you are prescribed Warfarin (Coumadin) or Dabigatran (Pradax), talk to one of our pharmacists before going home.
- ✦ The nurse or pharmacist will review your medications before you leave the hospital.

### Exercise

- ✦ Walk at a comfortable pace most days of the week.
- ✦ If you feel any of the symptoms listed above while exercising, stop and tell your doctor.

### Meals

- ✦ Follow a Heart Healthy Diet: low in saturated fat, trans fat, cholesterol, salt and sugar.

You and your family member can learn more about Atrial Fibrillation by attending the **Trillium Health Centre's Cardiac Wellness and Rehabilitation Centre**. Please talk to your nurse for more details.

Nurse's Signature \_\_\_\_\_ Date \_\_\_\_\_

Patient's Signature \_\_\_\_\_