



Atrial Fibrillation (AFib): Separating Facts from Fiction

Atrial fibrillation, also called AFib or AF, is the most common type of heart arrhythmia. An arrhythmia is an irregular heartbeat that can be either too fast or too slow.

Blood flows from the two upper chambers of the heart (“atria”) to the two lower chambers of the heart (“ventricles”). With AFib, an irregular heartbeat prevents blood from flowing effectively from the atria to the ventricles, which may lead to blood clots, stroke or heart failure.

Although AFib is a common condition, it is often misunderstood. Memorial Hermann Heart & Vascular is here to separate the facts from the myths, so you can better understand the symptoms and risks of AFib and take steps to help lower your chances of developing the condition.

Myth #1:

AFib cannot be prevented.

Fact: Sometimes AFib is caused by things you cannot control. However, making healthy lifestyle choices can have a significant effect on heart health and can reduce the risk of developing AFib. To lower your chances of developing a heart condition, it is important to quit smoking, exercise daily and control high blood pressure, high cholesterol and diabetes.

Myth #2:

AFib is a life-threatening condition.

Fact: AFib, by itself, usually is not life-threatening. However, AFib is associated with other conditions, including stroke and heart failure, which can be life-threatening. If you are diagnosed with AFib, you should work with your doctor to control your irregular heartbeat and reduce the risk of developing other serious, related conditions.

Myth #3:

People with AFib should not exercise.

Fact: Some people with AFib may be hesitant to exercise because they worry about activity increasing their heart rate. However, if you have AFib, it is important to exercise on a regular basis. Daily activity strengthens your overall health, including heart health, by helping to control weight and blood pressure. You will need to speak with your doctor to determine which types of exercise are safe and appropriate for you.

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Myth #4:

Younger people don't have AFib. It is a condition that only affects older people.

Fact: An irregular heartbeat can appear at any age. The majority of Americans with AFib are older than 65, but younger people may also be affected. Regardless of age, certain conditions can increase the risk of AFib, including high blood pressure, heart disease or lung disease.

Myth #5:

Many people periodically experience a fluttering sensation in the chest. This is normal.

Fact: AFib can result in persistent heart fluttering, periodic heart fluttering or no fluttering at all. If fluttering episodes are present but inconsistent, it is called paroxysmal atrial fibrillation. When a change in heartbeat is caused by AFib, it can result in significant complications, including an increased risk of stroke and heart-related death. If you experience a fluttering or quivering sensation, especially if you also experience fatigue or shortness of breath, it is important to see your doctor to determine the cause.

Myth #6:

You will know if you have AFib because it causes noticeable symptoms.

Fact: Sometimes AFib does not show any symptoms. Different people may experience AFib differently, and while some have symptoms like a quivering or fluttering sensation in the chest, others may not feel anything unusual. When symptoms are present, you may experience any of the following:

- Heart palpitations (quivering or fluttering sensation)
- Irregular heartbeat
- Shortness of breath
- Chest pain
- Fatigue
- Dizziness or lightheadedness

Because some people do not show symptoms, it is important to see your doctor on a regular basis for preventive checkups and screenings.

Myth #7:

The most common complication from AFib is a heart attack.

Fact: AFib may contribute to a heart attack, but one of the biggest risks is stroke. Because AFib disrupts the normal flow of blood through the heart, blood

clots may develop. When a blood clot moves outside the heart it may travel to the brain and restrict blood flow, which can result in stroke.

Myth #8:

Treatment, such as cardioversion, cures AFib.

Fact: AFib cannot be cured, but it can be controlled with consistent treatment. The goals of treatment are to reset the heartbeat to a normal pattern and reduce the risk of blood clots and stroke. Electrical cardioversion is used to restore normal heart rhythm from a specific episode of AFib. However, it does not permanently control arrhythmia. AFib is a lifelong condition that often requires medication to control.

Myth #9:

When medication is working correctly, it prevents all AFib episodes.

Fact: Medication can be highly effective at reducing the number and length of AFib episodes, but it usually does not prevent all episodes. During the course of treatment, your doctor may recommend trying different medications if your AFib episodes are less controlled over time. They may also recommend alternate types of treatment, including minimally invasive procedures like catheter ablation.

Myth #10:

After a successful catheter ablation procedure, medication is no longer needed.

Fact: It is important to not discontinue any medication without speaking with your cardiologist first. Depending on your specific health needs, your doctor may recommend continuing certain medications, including blood thinners, to help with the ongoing risk of stroke.

More Information

To learn more about AFib, visit memorialhermann.org/AFib

To schedule an appointment, please contact us at memorialhermann.org/heart-contact