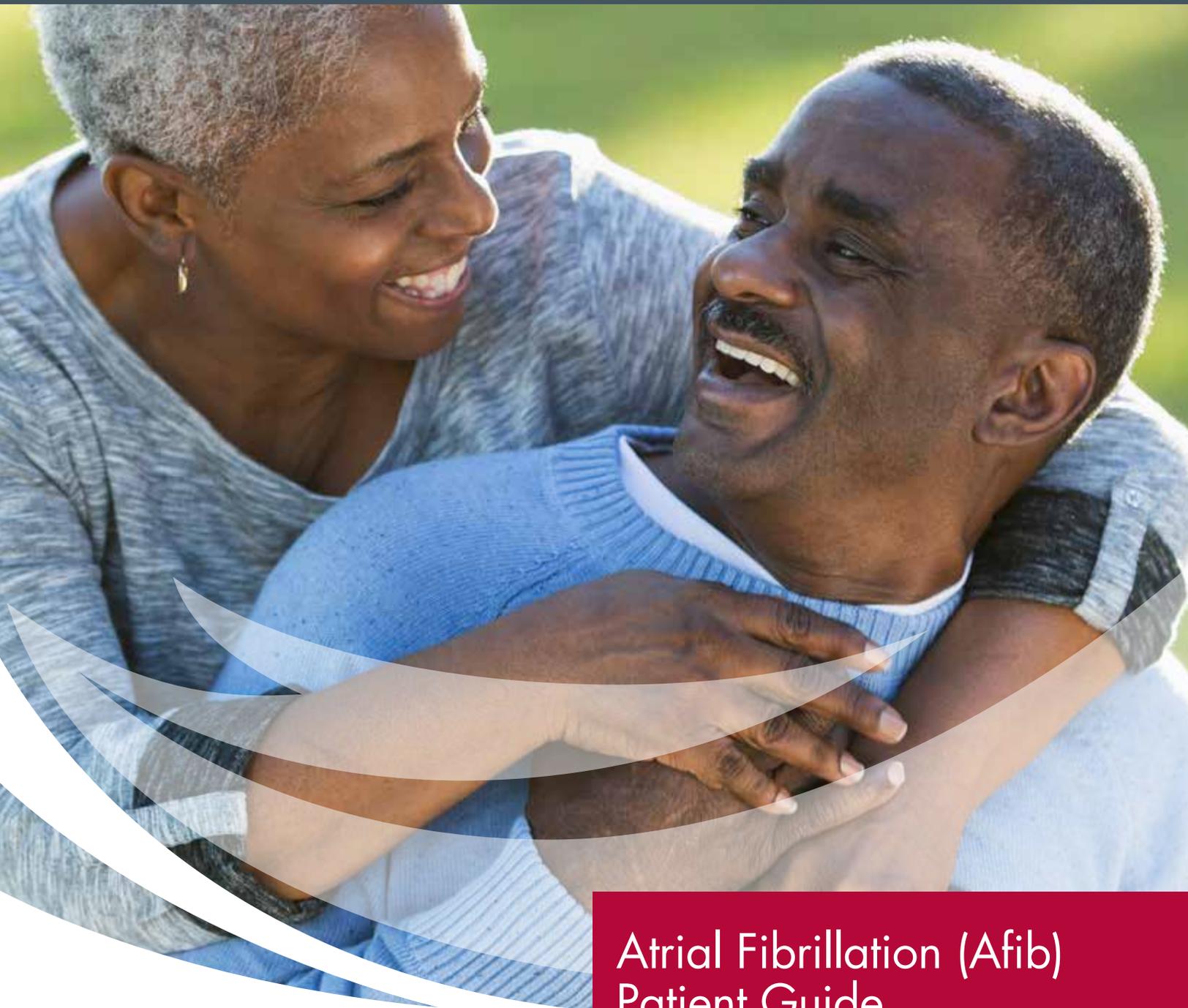


**Guide contents:**

- 2** What Is Atrial Fibrillation (Afib)?
- 3** What Happens During Afib?

- 4** For Your Appointment
- 5** For Your Future

- 6** Symptom Tracker Form
- 7** Your Team at Orlando Health



# Atrial Fibrillation (Afib) Patient Guide

**ORLANDO**  
**HEALTH**<sup>®</sup>

Heart Institute

## What Is Atrial Fibrillation?

**There are several ways people** speak about atrial fibrillation. Most commonly, the term is shortened to Afib or AF. But what's underneath those abbreviations? A lot actually.

Afib is a condition where your heart beats irregularly. This irregularity is known as an arrhythmia. The reason this can be a big deal is because your heart's rhythm can create a chain reaction that affects other parts of your body in a major way. Afib is the most common cardiac arrhythmia and by 2050 more than 12 million people will require care for Afib.

For example, did you know an irregular heartbeat can cause blood clots, heart failure, stroke or other complications? It's true. But that doesn't mean Afib isn't manageable. After all, more than 2.7 million Americans are living with the condition.

### How It Feels

Because the heart is such a crucial part of the body, there is a wealth of information regarding the symptoms of common conditions such as arrhythmias. While everyone is unique, there are several overlapping symptoms people with Afib may experience:

- Quivering heart sensation
- Irregular or rapid heartbeat
- Heart palpitations or banging against chest wall
- Feeling of nausea, dizziness, weakness or chest pain
- Shortness of breath, gasping for air or fainting

However, some people never experience symptoms at all and discover the condition during a general checkup or when a serious issue arises.



## What Happens During Afib?

### The Biology of Afib

Your heart is like a clock, ticking in succinct beats to a rhythm. The only difference? The timing can speed up or slow down based on a range of factors, like emotion or activity. With Afib, the heart gets off that rhythm and contracts and relaxes irregularly.

When this happens, the upper chambers of the heart (aka: the atria) beat in a way that does not allow blood to move into the lower chambers of the heart (ventricles) correctly. This can cause the blood to slow down in the heart or pool in places it should not.

### A Risky Proposition

If left untreated, an arrhythmia can become serious, with the potential to become fatal. That's because the heart is fragile. When blood is pumped ineffectively through the heart — and body — it can encourage clotting and increase stroke risk.



The danger escalates if a clot breaks from its origin point and blocks an artery leading to the brain. Then a serious — and potentially life-threatening — stroke can occur.

### By the Numbers

At this point, you may be thinking, “Wow, this sounds like a serious issue!” If so, you're right. And the statistics surrounding Afib are even more convincing:

- Thirty-three percent of people don't think Afib is a serious condition
- More than 50 percent of Afib patients do not realize they have an increased risk for stroke, hospitalization or death
- Afib can double the chances of dying from a heart-related issue
- People with Afib are 5 times more likely to have a stroke





## For Your Future

### Practicing Good Habits

**A wide variety of influencers can help** or hinder your health and wellness. That's why, if you live with Afib, it's important to understand that your everyday habits and choices play a major role in your heart health. Discuss each of the following with your physician — then practice these common wellness boosters to promote positive change for yourself and your Afib:

- Avoid overindulging in alcohol consumption (no more than two drinks a day for men, one drink a day for women).
- The same goes for sugar (no more than 37.5 grams a day for men, 25 grams a day for women).
- Ask your physician if you need to avoid caffeine completely.
- Create an appropriate exercise regimen with your doctor.
- Find whatever your zen is — and aim to live a less stressful life.
- Kick smoking or drug use to the curb! Ask your doctor about medication or aids that can help.

**Practice these common wellness boosters to promote positive changes for yourself and your Afib.**





## Your Electrophysiology Team



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