

- Your primary health care provider may ask you to:
  - › See a cardiologist
  - › Have more tests
  - › Visit the Heart Rhythm Clinic

**For more information, visit:**

- › [www.heartandstroke.ca/heart-disease/conditions/atrial-fibrillation](http://www.heartandstroke.ca/heart-disease/conditions/atrial-fibrillation)

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:  
[www.nshealth.ca/patient-education-resources](http://www.nshealth.ca/patient-education-resources)

Connect with a registered nurse in Nova Scotia any time:  
Call 811 or visit: <https://811.novascotia.ca>

*Prepared by:* Heart Rhythm Service  
*Designed and Managed by:* Library Services

WG85-1230 © June 2026 Nova Scotia Health Authority  
To be reviewed June 2029 or sooner, if needed.  
Learn more:  
<https://library.nshealth.ca/patient-education-resources>

- › **Drink less alcohol.** Alcohol raises your risk of stroke and heart attack. Drinking less or no alcohol has a positive impact on your health.
- › **Stop smoking.** Stopping smoking may lower your risk of stroke or heart attack. Support is available. Ask your primary health care provider for help, if needed.
- › **Get tested for sleep apnea.** Get and wear a CPAP (continuous positive airway pressure) machine as directed, if suggested.
- › **If you have hypertension (high blood pressure):** Check your blood pressure regularly and take your medications as directed.
- › **If you have diabetes:** Check your blood sugar levels regularly and take your medications as directed.
- › **Exercise regularly.** Regular physical activity can improve your overall health and quality of life.

### **If you have been diagnosed with atrial fibrillation:**

- If you are feeling well, you can keep doing your usual activities while making lifestyle changes to improve your overall health and reduce the impact of atrial fibrillation.

- **Anti-arrhythmic medications:** These medications try to restore and keep your heart in a normal rhythm. 2 types of these medications are:
  - › Sodium channel blockers (like propafenone or flecainide)
  - › Potassium channel blockers (like amiodarone or sotalol)
- Before you start taking these medications, it is important to talk to your primary health care provider, cardiologist, or heart rhythm specialist about possible side effects.

### Cardioversion

- A procedure to restore normal heart rhythm and allow time for medications and lifestyle changes to take effect. Your cardiologist or heart rhythm specialist will talk to you about this if it is the right treatment for you.

### Catheter ablation

- Your heart rhythm specialist will talk to you about this if it is the right treatment for you.

### What can I do to help my condition?

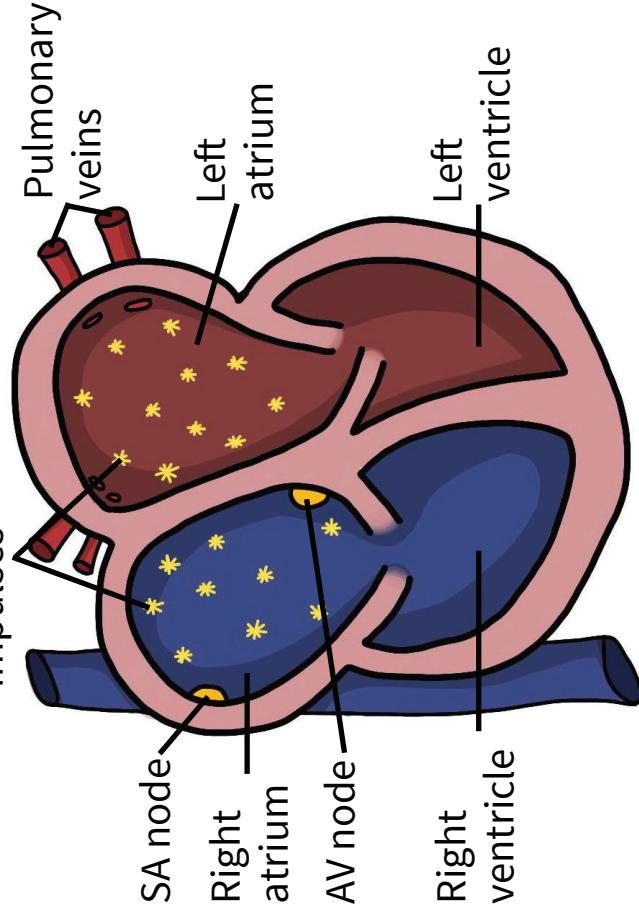
- To help lower the effects of atrial fibrillation:
  - › **Keep a healthy weight.** Ask your primary health care provider for tips on managing your weight, if needed.

## Atrial Fibrillation

### What is atrial fibrillation?

- Atrial fibrillation is an abnormal (not usual) heart rhythm. The right and left atriums (upper chambers of the heart) beat chaotically and out of sync with the right and left ventricles (lower chambers of the heart). This causes an irregular and sometimes very fast heartbeat. This rhythm may come and go, or it can last for a long time. Atrial fibrillation is a common condition.

Chaotic electrical impulses



## What are the symptoms?

- › Your heart may race or pound, or skip beats
- › Shortness of breath or trouble breathing
- › A change in how much activity you can do
- › Feeling lightheaded or dizzy
- › Overall weakness or fatigue (tiredness)
- › Mild chest discomfort
- Some people with atrial fibrillation do not have any symptoms and some people have symptoms that are not listed above.

## Is the condition life threatening?

- Atrial fibrillation is not life threatening, but it is a serious medical condition that you and your health care team must manage.
- Some people live for years with atrial fibrillation without any problems.
- If you have atrial fibrillation, talk with your primary health care provider (family doctor or nurse practitioner) or cardiologist (heart doctor) about your risk of a stroke. You may need a blood-thinning medication to lower the risk of a blood clot forming in your heart that could lead to a stroke.
- Over time, a fast heart rate may cause your heart to get weaker.

## How is atrial fibrillation diagnosed?

- Atrial fibrillation is diagnosed using:
  - › **Electrocardiogram (ECG or EKG):** measures your heart's electrical activity
  - › **Holter monitor:** measures your heart's rhythm
- If you have an implanted pacemaker or defibrillator, the recorded heart rhythm on these devices can be used for diagnosis.

## How is atrial fibrillation treated?

- Treatment for atrial fibrillation focuses on heart rate control and/or heart rhythm control and lifestyle changes.

## Medications

- **Beta blocker or calcium channel blockers:** These medications slow your heart rate, so your heart does not have to work as hard.
- **Blood thinners:** These prevent a blood clot from forming. They can be mild (like Aspirin<sup>®</sup>) or stronger, like:
  - › Warfarin (Coumadin<sup>®</sup>)
  - › Rivaroxaban (Xarelto<sup>®</sup>)
  - › Apixaban (Eliquis<sup>®</sup>)
  - › Edoxaban (Lixiana<sup>®</sup>)
  - › Dabigatran (Pradaxa<sup>®</sup>)