



Hopes, fears and my *heartbeat diary*

A regular heartbeat can be sent haywire by a condition called atrial fibrillation. One sufferer explains to Patsy Westcott what happened to her

Atrial fibrillation (AF) is the most common heart rhythm disorder and the leading risk factor for stroke in the UK. It's on the rise and recent US research reveals women suffer more symptoms and complications than men. Ann Fugler, who is in her sixties, worked as an editorial consultant and now blogs and writes about food. She is divorced with a grown-up son and daughter, and lives in South Milford, North Yorkshire.

September 2004

I wake in the night with what feels like a huge bird fluttering in my chest. I'm faint and breathless, my heart is fast and irregular and my chest tight. There have been no warning signs. I'm terrified I'm having a heart attack. A friend who is staying calls an ambulance and I'm whisked to my local hospital, blue light flashing. There I'm hooked up to



RISK FACTORS

AGE Although AF can occur at any age, prevalence doubles with every decade.

UNDERLYING HEART PROBLEMS eg valve problems or coronary artery disease.

SMOKING AND ALCOHOL especially drinking a lot in one go.

FAMILY HISTORY A third of people have an affected family member.

OBSTRUCTIVE SLEEP APNOEA Temporarily stopping breathing/choking during sleep (a clue is loud snoring).

OVERWEIGHT AF sufferers who shed a tenth of their body weight are six times more likely to be

symptom-free than those who remain overweight.

OTHER CHRONIC CONDITIONS such as overactive thyroid, diabetes, high blood pressure and asthma.

HEART SURGERY 35-50 per cent of patients develop self-limiting AF shortly after a bypass or other heart surgery.

monitors and given intravenous digoxin, a medication to steady the heart. I lie there wondering if I will live or die. To my huge relief it's not a heart attack but AF, atrial fibrillation. Normally the heart's natural pacemaker sends out regular electrical impulses but when those impulses fire off from different places in the upper chambers or atria, the rhythm goes haywire. This makes it hard for blood to circulate and explains why I am so weak and faint. It could be a one-off or I might have more episodes – something known as paroxysmal AF. I'm shocked. Why me? I'm healthy, I go to the gym, swim, eat well. The fluttering continues for four hours but when it stops I can go home.

October 2004

I have a multitude of tests but apart from slight high blood pressure the only thing wrong is my heart's "electrics". I'm prescribed beta-blockers but suffer bad side-effects – tiredness, brain fog and a tight chest. My GP agrees I can stop taking them and I'm OK for nearly a year.

August 2005

I did a 10-mile w/h Ribbon Walk at Chatsworth and felt good but one night, the fluttering starts again. I know what's happening but it's still frightening and I end up in A&E again. This attack lasts four hours. The doctor prescribes flecainide, a drug that slows electrical signals in the heart. Fortunately I experience no side effects

and the medication keeps the AF at bay for seven years.

November 2012

I suddenly have several attacks. Because blood pools in the atria, or heart chambers, during an attack, increasing the risk of clotting and stroke, I'm prescribed warfarin to thin my blood. I have to avoid foods containing vitamin K like kale, spinach and Brussels sprouts, which interact with it, and I have numerous blood tests

It feels like a bird fluttering in my chest

to get the correct balance between bleeding and clotting. I love walking and travel for my job as an editorial consultant as well as to visit my elderly parents in Cumbria. Now I'm afraid of having an attack while out alone. I feel AF is taking over my life. A mindfulness course helps but I can't completely shake my depression and anxiety.

March 2013

Desperate to find out what more I can do, I contact the AF Association, who tell me about radiofrequency ablation, a procedure to destroy tissue near the heart that conducts electrical impulses. It's performed in specialist centres by heart rhythm specialists called electrophysiologists. The NHS waiting list is six months but luckily I have BUPA via work. Under general anaesthetic a thin wire is threaded via a blood vessel in my groin up to my heart and heat used to destroy (ablate) areas >>

Q&A

Barbara Casadei, BHF professor of cardiovascular medicine, Oxford University, and Lee Graham, consultant cardiologist and electrophysiologist, expert in heart rhythm management at Yorkshire Heart Centre, Leeds General Infirmary and the Spire Hospital, Leeds, give the facts:

> What is AF? An irregular, fast heartbeat that happens when the two upper chambers of the heart or atria fire off electrical signals faster than they should, causing the heart to beat erratically and pump less efficiently.

> What are the risks? Untreated AF increases stroke risk 4-5-fold and doubles the risk of a heart attack. It also raises the risk of dementia.

> Who gets it? One million people in the UK have AF and while men are slightly more at risk, a US study reveals women have more symptoms and are 40 per cent more likely to suffer a stroke as a result than men – although less likely to die of heart-related complications.

> How is it managed? Beta blockers and if these don't quell symptoms, antiarrhythmia drugs to regularise the heart's rhythm. Anticoagulants reduce clotting and stroke risk. Cardioversion can be successful started soon after onset. Catheter ablation may be offered for persistent symptoms.

One million people in the UK have AF

On the horizon

It is thought that AF changes the electrical structure of the atria – a process called remodelling. Researchers have discovered that people with AF have low levels of a muscle protein called dystrophin. Professor Barbara Casadei and her team are looking to see if turning off the switch in heart cells that leads to dystrophin depletion can reverse remodelling, leading to longer-lasting recovery. The hope is this may lead to new treatments.

heartbeat diary



The latest apps can keep track of a suspicious heartbeat

of tissue where abnormal heartbeats originate. When I wake three hours later my groin, heart and chest feel tender while my throat is sore from the op but my heart feels light and calm. I go home after two days and return to work a month later.

May 2014

I know ablation doesn't always work first time, nevertheless, I'm hopeful. To my dismay, however, I have another attack while cat-sitting for my daughter Kirsty in Sheffield. This time it lasts non-stop for four days. After three days in hospital the doctors suggest cardioversion, in which a controlled electric shock restores the heart's rhythm either under short-acting general anaesthetic or heavy sedation. I agree, but just as suddenly as it started, it stops. A second ablation sorts things out – at least for a while.

A new drug and rehab restores my confidence

July 2016

I retire and move to North Yorkshire. I'm an honorary Yorkshire woman! My daughter lives close by and I have friends there. I join a book group and by luck one of the members is a nurse specialist in AF. I'd hoped my more relaxed life might enable me to wave goodbye to AF. But after another attack my book group friend recommends an electrophysiologist at Leeds Spire Hospital where I have ablation number three. I'm prescribed a different anticoagulant drug – rivaroxaban – which suits me better and, after an online cardiac rehab course, begin to regain confidence.

Today

I hardly dare say it but I'm AF-free, though there is still a risk it could return. I avoid triggers, which are both not eating enough and getting overfull,

Check your heart rhythm

If your pulse is irregular or you feel breathless, dizzy or faint, make an appointment to see your GP. You can also check your own heart rhythm in these ways:

► **TAKE YOUR PULSE** Place the second and third fingers of your right hand on your left wrist. Check for a steady, regular pulse rhythm. Most adults have a heart rate of 60 to 100 beats per minute.



► USE AN APP

AliveCor's Kardia mobile (RRP £99, pictured left) is a pocket-sized device you attach to your mobile. You place your fingers on two small metal sensors to produce an ECG reading, which links to an app. AliveCor's Kardia Band – a wriststrap with a small integrated ECG sensor that attaches to an Apple Watch – works similarly (RRP £199). Results can be relayed to the doctor via the app if your heartbeat looks suspicious (shop.gb.alivecor.com).

► TRY A MONITOR

Boots Pharmaceuticals Advanced Blood Pressure Monitor With Breakthrough Atrial Fibrillation Alert features an in-built AF detector as part of the monitor (RRP £129.99) in store or boots.com



alcohol, getting overtired or stressed. My daughter, Kirsty, and son, Robbie, are understanding and supportive. I belong to a great online forum run by the Atrial Fibrillation Association (heartrhythmalliance.org/afa/uk) and meet up with local members – it's good to have people around who understand. It has been a long journey but I feel more in control and wake up each day determined to make the most of it.

Make a difference

JOIN THE BRITISH HEART FOUNDATION CAMPAIGN

► Give up chocolate for March and raise money to fund life-saving BHF research. Sign up at bhf.org.uk/dechox

► The Hey You Campaign aims to increase awareness of AF-related stroke risk and encourage anyone with uncontrolled AF to talk to their doctor to ensure they are doing all they can to reduce this. Visit heyyou.org.uk w&h