This book is intended as a reference volume only, not as a medical manual. The information given here is designed to help you make informed decisions about your health. It is not intended as a substitute for any treatment that may have been prescribed by your doctor. If you suspect that you have a medical problem, we urge you to seek competent medical help.

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Cover and chapter opener illustrations by Hannah Firmin
Medical illustrations by Mark Watkinson
start living well
with afib

Being diagnosed with atrial fibrillation, or any health condition, can be challenging. You might be feeling unsure about exactly what atrial fibrillation, commonly called AFib, is or what it means for your health. Perhaps you’ve already been living with AFib but haven’t yet learned how it increases your risk of stroke or how that risk can best be reduced.

No matter which group you fall into, this book is here to help.

You have the power to live your healthiest life possible, and the valuable information you’ll learn as you read on will allow you to have a better understanding of your condition and options. In addition to helping you gain a better understanding of what AFib is and the stroke risks associated with it, you’ll get useful advice and simple strategies to help you greatly improve your health.

Here, you’ll learn how to find the right doctor and how to build a positive relationship with your physician. You’ll also learn about your treatment options. While AFib can have serious health consequences, you can take comfort in knowing that you may be able to greatly reduce your risk of stroke with medication. Having a healthy lifestyle is an essential part of living your life. Our easy-to-follow guide will show you simple ways to eat better, be more active, and reduce stress.

Finally, you’ll receive a useful action plan that will help you stay motivated as you move forward with your care. And for caregivers reading this book, you’ll find useful information on how to help your loved one stay healthy.

Our hope is that this book will serve as a resource as you begin to take your first steps toward getting healthy and reducing your risk of stroke caused by AFib.
If you’re living with atrial fibrillation, you’re not alone. Currently, more than 2.2 million Americans have the condition, but nearly one third of them don’t even realize it. Atrial fibrillation, also known as AFib, is not uncommon, especially among older adults. But there are serious risks associated with it.
The most significant of those is the fivefold increase in risk of stroke. What’s more, stroke caused by AFib is usually more severe than stroke from other causes. Whether you’ve been newly diagnosed or have been living with AFib for years, gaining a better understanding of your condition and your increased risk of stroke can help you work with your doctor to make informed decisions about your care and treatment.

**How Your Heart Works**

AFib is a heart rhythm problem in which the atria beat too fast and the beat is irregular. This can change the way your heart pumps blood.

Here’s a closer look at how AFib affects your heart. Your heart has four chambers: two atria, or upper chambers, that serve as holding tanks for the blood returning to your heart, and two ventricles, or lower chambers, that circulate blood throughout your body. Your heart’s electrical system directs the four chambers to work together to maintain good blood circulation. With AFib, that electrical signal is irregular, causing the two upper chambers to quiver rather than contract normally. This ultimately causes your heart to work harder, but does not pump the blood completely into the ventricles. The blood that’s left behind can pool and form a clot, which can make its way into the brain and cause a stroke.

**Causes and Risk Factors**

The older you are, the greater your chances of developing AFib. High blood pressure and heart disease are the most common causes of AFib. Those born with heart defects may have a greater risk of developing AFib, too.

**Caregivers’ Guide**

If you’re a caregiver, it’s important for you as well to learn about your loved one’s health conditions. Throughout this book, look for these Caregivers’ Guides for useful tips, then see Chapter 6 for in-depth advice on how to help your loved one get the best care.

By 2050, it’s estimated that 5.6 to 12 million people will have AFib.
Other possible risk factors for AFib include:

- Overactive thyroid.
- Inflammation around the heart caused by a viral or bacterial infection.
- Heart rhythm disorders that make your heart beat too fast or too slow.
- Lung diseases, such as chronic obstructive pulmonary disease (COPD) or emphysema.
- Diabetes.
- Sleep apnea.

While these risk factors may increase the likelihood of developing AFib, sometimes the causes of the condition are unknown.

Signs and Symptoms
Unless actively trying to find their pulse, most people go about their daily lives without thinking about their heartbeat. But if you have AFib, you may experience the sensation that your heart is beating too hard or too fast. You may also feel as though your heart is fluttering, or that your heart has skipped a beat. Other signs of AFib include chest pain, confusion, dizziness or fainting, fatigue, weakness or difficulty walking or exercising, and shortness of breath. Symptoms may come and go, or get worse over time.

Many people, however, don't experience any symptoms. Often, they don't discover they have AFib until they have a routine physical examination.

Getting Diagnosed
There is no one laboratory test that can detect AFib. Because of this, doctors often rely on family and medical histories, a physical exam, and a series of tests to determine whether you have the condition. These tests will also help determine what the best treatment for you will be. Your primary care doctor will review your symptoms and assess the rate and rhythm of your heartbeat. Your primary care doctor may refer you to a specialist, such as a cardiologist or an electrophysiologist, who is a cardiologist specializing in arrhythmias.

Maintaining a healthy weight can help manage your AFib.
Diagnostic tests that your doctor may request include:

**Blood tests.** Your doctor may order blood tests to check your thyroid levels (as mentioned before, an overactive thyroid can cause AFib) as well as your electrolytes, which are minerals that help maintain the balance of fluids in the body and the pH of the blood, among other essential functions.

**EKG.** An EKG, or an electrocardiogram, records your heart’s electrical activity. Your doctor places electrodes on your skin that record how fast your heart is beating and the strength and timing of the electrical signals. You may be asked to monitor your heart with a portable EKG, which records heart activity for a full 24 or 48 hours.

**Chest X-ray.** A chest X-ray can show the size of your heart, as well as other complications of AFib. An X-ray technician performs the procedure, for which you may be asked to hold still for a short amount of time in order to get the clearest pictures of your chest.

**Echocardiogram.** An echocardiogram uses sound waves to create a moving picture of your heart and record its blood flow. An echocardiogram is also used to assess the functions of the heart chambers and valves. A trained sonographer glides a special probe on your chest, capturing pictures of your heart for your doctor to review.

**Stress test.** A stress test detects how well your heart performs during physical stress. Your doctor may give you an exercise stress test, which usually involves walking on a treadmill or pedaling a stationary bike. How hard the test is will depend on your medical history and how often you exercise—both things your doctor will take into consideration. During the test, a nurse will place electrodes on your arms, legs, and chest that are hooked up to an EKG machine that will record the strength and pace of your heartbeat.

If your doctor thinks an imaging stress test is best for you, you’ll be injected with a radioactive dye before the test. Pictures are taken of your heart before, during, and after your test. This helps your doctor see how hard your heart has to work, whether your heart is getting enough blood flow, and any changes in your heart valves or movement of the heart muscle.

**AFib and Your Health**

It is important to realize that even if you’re asymptomatic, the real danger of AFib is your increased risk of stroke. In the chapters that follow, you’ll learn how you may reduce that risk.

Medicine can reduce your risk of AFib-related stroke.
As you’ve learned, AFib can increase your risk of stroke, but there’s good news concerning that risk: There are steps you can take right now to help reduce your risk of stroke caused by AFib. In fact, research has shown that three out of four AFib-related strokes can be prevented. So just how does AFib cause stroke? Read on to find out.
Think about how you squeeze out ketchup from a small package. If you were to squeeze the package rapidly and haphazardly, just some of the ketchup would dribble out. But if you were to give it one strong squeeze, most of the contents would be released. A heart that’s affected by AFib is often incapable of giving it one strong squeeze. This allows blood to pool in the atria, which can cause blood cells to clump together and form clots. If a blood clot leaves the atria, it can travel to the brain, triggering a stroke.

The irregular heartbeat caused by AFib can allow blood to be trapped in the upper chambers of the heart. This can cause a blood clot to form (see image, above).

If the clot leaves the heart, it can travel to the brain (see image, right) and cause an AFib-related stroke.

A Greater Risk
AFib-related strokes are generally more severe than strokes from other causes. People with AFib are up to seven times more likely to have an ischemic stroke, which is a stroke caused by a blood clot, than those without the condition. AFib is considered a controllable stroke risk factor. That means with medication, you can reduce your risk of AFib-related stroke.

The Signs of Stroke
If you experience any of the following, call 911, as they could be signs of stroke.

• Severe headache.
• Slurred speech.
• Facial drooping.
• Numbness, tingling, clumsiness, paralysis, or muscle weakness on one side of the body, or decreased use of a limb.
• Loss of balance or coordination, or difficulty walking.
• Sensory changes, such as in hearing, vision, touch, or taste.
• Trouble swallowing, reading, writing, or understanding others.
• Incontinence.
• Dizziness.

Managing Your Health
Your risk of AFib-related stroke can increase if you have other diseases, such as diabetes or high blood pressure. The good news is, if you address these conditions as directed by your doctor, it may help you manage your condition.

Congestive Heart Failure
Congestive heart failure (CHF) means the heart doesn’t pump enough blood throughout
AFib is a controllable risk factor of stroke—meaning that you have it within yourself to take control of your condition.

LIVING WELL WITH AFIB
UNDERSTANDING YOUR RISK

Coronary Heart Disease
Coronary heart disease occurs when small blood vessels that supply the heart with oxygen and blood are hardened with plaque. This buildup of plaque causes the vessels to narrow and in turn this limits blood flow to your heart and can cause a heart attack. Although some factors that contribute to heart disease can’t be controlled, such as age, gender, and race, there are lifestyle choices that can help lessen your risk, including eating a low-cholesterol diet and not smoking.

Diabetes
More than 25 million Americans have diabetes, which causes your body to either not produce enough insulin or resist the insulin you make. In either case, your body is unable to maintain normal glucose levels. While there is no cure for diabetes, eating a healthy diet and exercising can help you manage the condition. Medications to help control your blood sugar are also available.

High Blood Pressure
More than 76 million Americans have high blood pressure, which is also called hypertension. Often lifestyle changes are enough to control high blood pressure, including eating a diet low in sodium and reducing stress. There are also medications that can help lower blood pressure.

Protecting Yourself From Stroke
Your risk of a stroke caused by AFib is manageable with medical care and medication. The first step in reducing the risk of stroke is to talk to your doctor about your treatment options, which include a type of medication known as an anticoagulant. In the following chapters, you’ll learn about medications that reduce your risk.

Caregivers’ Guide
As a caregiver, it’s important to be aware of the warning signs of stroke. You should consider stroke symptoms to be an emergency and call 911 if you observe any of the warning signs in your loved one.

What Is a CHADS2 Score?
CHADS2 is an assessment test that determines your risk of stroke. It assigns one point for each of the following: you have congestive heart failure, you have high blood pressure, you are age 75 or older, you have diabetes. It assigns two points if you’ve had a previous stroke.
The maximum score you can receive is 6, which is associated with a yearly stroke rate of 18 percent.

Three out of four AFib-related strokes can be prevented.
The information your doctor provides can help you feel more confident about your AFib and reducing your risk of stroke. Creating a good doctor-patient relationship isn’t only in the hands of your healthcare provider, though. You can ensure you get the care you deserve with simple tips that help you find the right doctor and get the most out of every visit.
Finding the Best Doctor for You
After you’ve been diagnosed, your primary care physician will likely refer you to a specialist, such as a cardiologist or electrophysiologist, a cardiologist specializing in the treatment of arrhythmia.

According to a Consumer Reports poll, 31 percent of patients wish they had more information available before choosing a doctor. But you can find the right doctor, as long as you’re willing to put some time into researching your options.

Questions to Ask When Researching a Doctor
• Which hospital is the doctor affiliated with? You’ll want one that’s close to your home in case of an emergency.
• How difficult is it to get an appointment? You’ll want to find a doctor with more availability who is able to see you as needed.
• Is the doctor part of a larger group practice? A group practice is preferable because if you have a problem when your doctor isn’t on call, you can be treated by someone in the same practice with knowledge of your condition.
• Is this doctor open to taking telephone calls or e-mails if you have questions between visits? If you need clarification about your treatment, being able to reach your doctor without making a trip to the office can be a time-saver.
• Does this doctor have a strong and friendly support staff, such as physician assistants or nurses, who can help you if the doctor is unavailable? It’s not just your physician who is treating you. Feeling comfortable from the time you walk into the doctor’s office to the time you leave is as important as what goes on during your one-on-one time with the doctor.

Making the Most of Your Appointment
To ensure you leave each visit with the information you need to feel comfortable and confident about the direction of your health, you should strive to be an active participant in your care.

Be prepared. Before your appointment, call the office to go over any requirements that may be asked of you. If you are seeing a specialist for the first time, be sure to bring the following:
• Your insurance or Medicare cards.
• A copy of your primary care physician’s medical records that pertain to your diagnosis.
• The results of your most recent blood tests, EKG, or stress test, if you’ve already had one.
• Symptom records; if you have kept notes on your symptoms leading up to the appointment, bring those along as well.
• A list of three or four key questions you want to ask your doctor about your AFib.
Know your health history. Make a note of any family history, particularly any immediate relatives who suffer, or have suffered, from AFib, arrhythmias, or sudden cardiac death. Also, make a list of major medical procedures or surgeries you have undergone, allergies you have, and any medications you’re taking, including over-the-counter (nonprescription) medications, herbal remedies, vitamins, and supplements.

Write it down. In the days leading up to your appointment, jot down how you’re feeling and any symptoms you may have. Make a note of questions as they pop into your head in the days before your appointment, so you won’t draw a blank during the visit. Be sure to limit your questions to three or four important ones, as most doctors have a certain amount of time scheduled for each patient. And don’t forget to bring a pen and notepad, so you can write down the doctor’s answers. If you still need more face time with a medical professional, ask if a physician assistant or a nurse at the office would be able to help you with any concerns.

Bring a friend. If you have problems remembering things, or feel nervous during appointments, bring a friend or relative with you. Another person means another set of eyes and ears. That person can also take notes on what the doctor says if you feel too distracted to do so.

Speak up. One of the most important things you can do is communicate effectively with your doctor. If your doctor prescribes a medication and you experience negative side effects, it is crucial to let your doctor know, as opposed to stopping the medication without consultation, which could increase your risk for complications. Be specific when you talk to your doctor so he or she can make the best decision for your care.

Review your game plan. At the end of the appointment, recap any directions that your doctor has given you. It may seem repetitive, but doing so will give your doctor a chance to correct any misconceptions you may have about next steps. Topics to cover include: new prescription information, future tests your doctor has ordered, when test results will be back, and when you should make your next appointment.

Caregivers’ Guide
As a caregiver, you have the right to information about your loved one’s condition and to be involved in helping her or him make decisions about care. For tips on how to ask questions during doctor appointments and advice on being an effective patient advocate, see page 40.
Even if you don’t experience symptoms of AFib, your doctor may recommend that you take medicine to reduce your risk of stroke. Most patients do need some sort of therapy to treat symptoms, or medication to reduce the risk of stroke. Here, you’ll learn what your options are for reducing your risk of AFib-related stroke.
Reducing Your Risk of Stroke

The heart normally beats at a steady rate, which helps pump blood throughout the body. In people with AFib, the beat is erratic. This can cause blood to pool in the heart’s upper chambers. When this happens, a clot can form and travel to the brain, which could lead to a stroke. Medications that prevent these clots from forming can lower the risk of AFib-related stroke.

A type of drug called an anticoagulant is the most commonly prescribed method to reduce the risk of stroke caused by AFib. Anticoagulants, also known as blood thinners, work by reducing the possibility of blood clot formation. This reduces the risk of stroke by preventing clots from forming and traveling to the brain. Studies have shown that certain anticoagulants can lower your risk of AFib-related stroke.

Your doctor will decide if you need to take an anticoagulant depending on how you score on the CHADS₂, which you learned about in Chapter 2. If you score 2 or higher, your doctor will likely recommend anticoagulants. If you need to take an anticoagulant, ask your doctor which one is best for you. Several anticoagulants are available. While each works slightly differently, they all slow the rate at which your blood clots. Depending on your age, overall health, and lifestyle, one medication may be a better choice for you than another.

To work best, anticoagulants need to be taken as prescribed. Taking the medicine inconsistently can increase your stroke risk.

Treating Your AFib Symptoms

While anticoagulants can reduce your risk of stroke, other treatments can improve the symptoms of AFib, such as palpitations. Your doctor may suggest trying to control your heart’s irregular rhythm with medications or procedures—or a combination of both. Your doctor will decide which is best based on your overall heart function.
and whether you have other health conditions, such as high blood pressure.

Some drugs, like beta-blockers and calcium channel blockers, can help control your heart rate and make you feel better. Beta-blockers work by interfering with the effects of adrenaline, which speeds up your heartbeat. Calcium channel blockers work by slowing down the passage of calcium into the heart’s walls and blood vessels.

A handful of procedures are used to reset the heart’s rhythm. Electrocardioversion, which is successful in three quarters of patients who get the treatment, works by giving your heart a quick shock while you’re under anesthesia. If electrocardioversion or medications don’t restore your heart to a normal rhythm, your doctor may want to try a procedure known as catheter ablation. This procedure utilizes radio wave energy sent through a wire to destroy the heart tissue that is causing the abnormal rhythm. A third procedure, known as maze surgery, involves making small cuts or burns in the heart’s upper chambers. This produces scar tissue that disrupts the electrical signals that cause the heart to beat abnormally. However, it’s still unproven whether rhythm-control techniques are helpful in the long term.

While these procedures may improve your symptoms, in order to reduce the risk of stroke caused by AFib, anticoagulant medication will be your likeliest course of treatment.

Taking Anticoagulants Safely

Anticoagulants can help reduce the risk of stroke caused by AFib by slowing the amount of time it takes for blood to clot. They can also increase your risk of problems with bleeding and bruising. That’s why it’s important to take these precautions while taking medication to lower your risk of AFib-related stroke:

- Ask your doctor or pharmacist if your anticoagulant is safe to take with your other medicines.
- Never take aspirin with anticoagulants unless your doctor tells you to.
- Let your doctor know about other medicines you’re taking, including vitamins or herbal products.
- Tell other doctors, your dentist, and other healthcare professionals that you’re taking an anticoagulant.
- Before starting the anticoagulant, let your doctor know if you’ve had unusual bruising or bleeding.

To ensure effectiveness, take your anticoagulant medication exactly as your doctor prescribes.

Caregivers’ Guide

Taking anticoagulants as prescribed by the doctor plays an important part in protecting your loved one from stroke risk. To encourage your loved one to stick with his or her medication, make sure he or she understands the health consequences of stopping medication without talking to a doctor first.
The small choices we make every day can have a big impact on our health. A healthy lifestyle is an important part of managing other health conditions you may have. Because of this, your doctor may recommend you make lifestyle changes, such as eating a nutritious diet, being active, and reducing stress.
Eating Right

What you eat can make a tremendous difference in your health. Research has shown that a nutritious diet can lower your blood pressure and reduce your risk of type 2 diabetes. As you learned earlier, having another health condition, such as high blood pressure, can increase your risk of AFib-related stroke. Maintaining a healthy diet can help you manage these other conditions.

Following an eating plan based on the principles of the DASH diet (Dietary Approaches to Stop Hypertension) can help you eat more nutritiously. Based on low amounts of saturated fat, cholesterol, and total fat, it emphasizes fruits and vegetables, low-fat dairy, whole grains, fish, poultry, beans, seeds, and nuts. The diet also limits sugar and red meat.

Based on a total intake of 2,000 calories per day, you’ll get approximately half your calories from healthy carbohydrates, like whole grains, about 20 percent will come from lean proteins, and 30 percent from fat. You should aim to get less than 7 percent of your total calories from saturated fats, and to limit daily cholesterol intake to 150 mg, and sodium to no more than 2,300 mg (1,500 mg for people 51 and older, African Americans of any age, and those with hypertension, diabetes, or chronic kidney disease).

Being More Active

Physical activity can have a big impact on your health as well. Moving your body for as few as 30 minutes a day can reduce your risk of heart disease, lower stress levels, and help you lose weight, according to the Centers for Disease Control and Prevention. If you don’t have a 30-minute window, 10- or 15-minute spurts are also effective.

What kind of exercise will make a positive difference? Anything aerobic. Jogging, swimming, and cycling are all aerobic activities. But so are everyday activities such as walking and climbing stairs.

Exercise will also boost the effects of a heart-healthy eating plan. A recent study found that people on the DASH diet who lost weight and exercised had greater drops in blood pressure than those who only stuck to the diet and did not increase their physical activity.

Before you begin any exercise program, it’s important to talk to your doctor first. While you and your doctor may have to work together to adjust your medication as you become more active, if you’re exercising and comfortable doing so, there’s no reason for you not to be as active as you want to be.

The DASH eating plan has been proven to lower blood pressure in just 14 days.
Reducing Stress

Living with a chronic condition, like AFib, can be stressful. While everyone experiences some level of stress, how you manage that stress can help you protect yourself against its harmful effects.

Managing your stress can improve your overall health. Stress affects both your physical and mental health. Hormones produced when you’re under stress, such as adrenaline, elevate your heart rate, blood pressure, and blood sugar levels. Over time, the stress hormones can reduce your ability to fight infection, contribute to obesity, and increase your risk of certain diseases.

Here are simple ways to combat stress each day:

**Breathing exercises**
Begin by observing your breath without changing it in any way. Do this by placing your hands over your belly and letting it expand into your hands as you inhale and deflate as you exhale. Once you’re aware of your breath, it may naturally deepen. Inhale for one beat, pause, then exhale for another. Gradually lengthen your inhalation and exhalation to a comfortable pace. These breathing exercises are also a good introduction to meditation.

**Meditation**
Meditation involves focusing your attention on an object, sound, or your own breath. Find a quiet place where you can sit or lie down for 10 to 15 minutes without being disturbed.

**Yoga**
Yoga is a form of meditation through movement. It combines poses with breathing exercises and has been shown to reduce stress.

For a taste of yoga, try performing the seated spinal twist.

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**Everyday Activities That Boost Your Cardiovascular Health**

Try some of these activities to reach your goal of 30 minutes a day.

- Take the stairs instead of the elevator.
- Park farther away from your destination than necessary.
- Walk instead of drive.
- Clean your home.
- Garden or mow the lawn.
- Go for a walk after dinner.
- Exercise at home while watching TV – move your legs, or march in place.
- Walk around while you talk on the phone.
- Use a pedometer to monitor your daily activity.
Begin by sitting sideways in a chair. Keep your knees together and your ankles directly below them. Inhale and lift through the top of your chest to lengthen your core. Then exhale and twist to the right.

Remember to lengthen your lower back and soften your belly. You can turn your head in the direction of the twist, or you can turn it the other way, looking over your shoulder and toward the floor. Hold this pose for 30 seconds to one minute, or three to six breaths, then repeat on the other side. Every time you inhale, lift through your chest. When you inhale, twist deeper; release when you exhale.

**Guided imagery**

In this technique, you focus on pleasant images to replace negative or stressful feelings, and to relax. Pick an image that is soothing and calming to you—a day at the beach, a beautiful garden—and bring to mind the senses you associate with it. What are you hearing? Seeing? Smelling?

Guided imagery can be directed by you or a practitioner through storytelling or descriptions designed to suggest mental images. This is also known as visualization. You may want to practice guided imagery for approximately 15 minutes at a time when you first begin to learn the skill. Try doing so daily, or four to five times a week.

**Exercise**

Physical activity is an effective form of stress management in part because it gives you a break from the rest of your life; it’s also been proven to reduce emotional distress in cardiac patients. Aim for 30 minutes of cardiovascular exercise every day, either in one fell swoop or broken into 10-minute increments.

**Sleep**

You should aim to get six to eight hours of sleep each night. Why? Sleep affects your ability to focus and to perform tasks, as well as your energy level. It’s also linked to mood.

**Spend time with loved ones**

Social support—whether in the form of friends or family—is linked to lower stress levels. Make a point of carving a social life into your calendar: Join an organization or hobby group, and make an effort to call or visit friends.
Caregivers can play an important role in reducing the risk of stroke in their loved ones. Becoming a caregiver can feel overwhelming, but you aren't alone. More than 65 million Americans are family caregivers. Here, you'll find practical tips for improving your loved one’s care, as well as useful advice on how to handle your role.
Becoming a Caregiver

Many caregivers don’t think of themselves that way, or recognize that caregiving is what they’re doing. But it’s important that you do. Acknowledging your caregiver role will benefit your loved one’s care and boost your own sense of ability.

Once you recognize that you’re a caregiver—which can mean anything from taking a parent to doctor appointments, to providing a spouse with full-time care—one of the most important things you can do is learn about your loved one’s condition.

Being a Patient Advocate

As a caregiver, you have the right to information about your loved one’s condition. You’ll also be involved in helping him or her make decisions about care. Knowing how to get the information you need from the healthcare team will help you get the best care possible for your loved one.

Go with your loved one to doctor appointments. You’ll serve as a second pair of eyes and ears during these visits. Bring a pen and notepad so you can write down important information the doctor shares, including upcoming tests and treatment changes.

Ask questions. If the doctor uses a word you don’t understand, or if what he or she is describing is unclear, ask for an explanation. If the doctor doesn’t have time, find out who does. Physician assistants, nurses, and office staff are resources for you, and they may be able to help.

Talk to the pharmacist about medications. This includes the name of the drug your loved one is taking, the correct way to take it, the time of day the drug should be taken, and whether it should be taken with or without food or drink. You can also ask about what to do if your loved one misses a dose or takes the wrong amount. If possible, fill all of your loved one’s prescriptions at the same pharmacy. If you’re unable to, be sure to keep a list of every medication your loved one is taking and share it with each pharmacist to protect against harmful drug interactions.

Talking to Your Loved One

Opening lines of communication is a great way to minimize stress in your relationship with your loved one. The best way to do this is to look at yourselves as a team. If you’re caring for a spouse, you already have a good sense of yourselves as partners. If you’re caring...
for a parent, it’s important to remember to treat your parent with respect and dignity. When talking about his or her care, let your parent know you’re looking to him or her for guidance, rather than dictating the next steps of care.

**Staying Organized**

One of the biggest challenges in keeping your loved one’s care in order is often medication management. Medication-management forms are available from a variety of organizations, but you can create one yourself, too. The information you’ll want to include is the name of each medication and its purpose, the dosage, when and how often it should be taken, the doctor who prescribed it, and the date it should be refilled. Update the form whenever there’s a change, and be sure to share a copy with your loved one.

If you and your loved one do not live together, you may want to schedule a weekly date for filling up your loved one’s pillbox with the necessary medications. This is also a good time to make sure all his or her medications from the previous week have been taken. It also creates an opportunity to check which prescriptions might need refilling.

**Encouraging Adherence**

Most likely, your loved one’s risk of AFib-related stroke is being treated with a type of medication known as an anticoagulant. Taking this kind of medication exactly as prescribed by the doctor is an important part of your loved one reducing the risk of AFib-related stroke.

However, if your loved one isn’t taking her or his medication as directed, find out what’s preventing her or him from doing so—whether it’s uncomfortable side effects, or a matter of simply not wanting to have to take another pill. Then have a frank discussion with your loved one about the health risks of not following the treatment, and schedule an appointment with the doctor to discuss how best to manage side effects, if necessary.

While your loved one is taking an anticoagulant, be on the lookout for bleeding and bruising, which can increase while taking this kind of medication. And always let doctors and other healthcare professionals know which drugs your loved one is taking to avoid harmful interactions.
As you’ve learned, AFib is a lifelong condition that can cause a certain type of stroke if left unmanaged. That’s why it’s so important to get the care you need and adhere to your treatment. Here, we’ve designed an easy-to-follow action plan that will help you stay motivated and on track, so you can live your healthiest life.
Step 1: Arm Yourself With Knowledge
By reading this book, you’ve already taken the first step toward reducing your risk of stroke caused by AFib. Schedule an appointment with your doctor to learn more.

Step 2: Find the Right Doctor for You
Your physician plays an important role in the treatment of your AFib, but you’re in control when it comes to finding the right doctor for you. For tips on how to find the best match, see our guide on page 20.

Step 3: Be a Proactive Patient
Being an active participant in your health care will ensure that you leave each doctor’s appointment with the information you need to move forward with confidence. See page 21 for helpful advice.

Step 4: Follow the Prescribed Treatment
The most effective way to reduce your risk of stroke caused by AFib is with anticoagulation therapy as determined by your doctor. But to work best, anticoagulants need to be taken as prescribed by your doctor.

Step 5: Make Healthy Lifestyle Choices
A healthy lifestyle will help you manage other health conditions you may have.

Now that you know the simple steps you can take that may improve your health and reduce your risk of stroke caused by AFib, you’re well on your way to living your healthiest life possible. Hopefully, the valuable information you’ve learned in this book will serve as a guide as you and your doctor work toward finding the right treatment to reduce your risk of AFib-related stroke.