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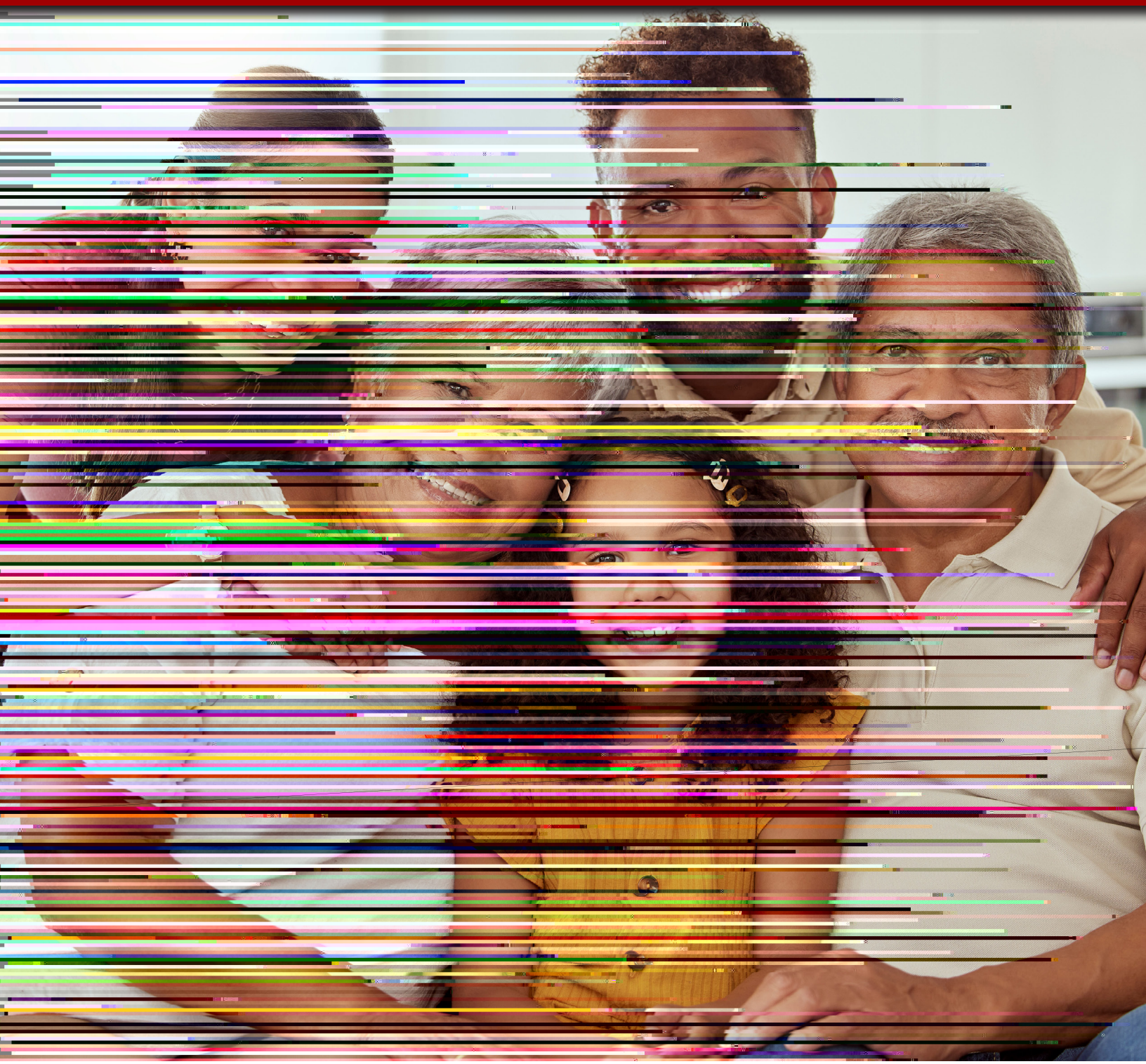
GETTING TO THE

HEART OF STROKE



! °¬s^{ ¾f¬s{{^°s ¡ ~ æ ! 3s f ç is a quivering or irregular heartbeat, also called arrhythmia. It can lead to blood clots, stroke, heart failure and other heart-related complications. People with AFib often i k-g¬s f k s° ^- pkk{s~q {szk ° r ks¬ r k^¬° s- ¿s©ì¿ ¡©©s~q ¡¬ -zs©©s~q f k^°-x Some have said their hearts beat really fast and they feel like they have to gasp for air. Others may have no symptoms.

AFib can take different forms. People with **paroxysmal AFib** have episodes of AFib that come and go, and their heartbeat will naturally change back to a normal rhythm. People with **persistent AFib** have longer durations of AFib and may need medications or surgical procedures to restore their normal heart rhythm.

WHAT HAPPENS DURING AFIB?

Normally, your heart contracts and relaxes to a regular beat. In AFib, the upper chambers of the heart, or the atria, beat irregularly. *Watch an animation of what happens to the heart during AFib*.

Because not enough blood is being pumped out of the atria, blood pools in the area. The pooled blood can clot — which can be extremely dangerous. If a blood clot forms, it can be pumped out of the heart to the brain. This blocks the blood supply to the brain and causes a stroke.

About 15% to 20% of people who have strokes have this heart arrhythmia. The clot risk is why patients with this condition are prescribed medications, often called blood thinners, that stop clots from forming.

Stage 1: At risk for AFib

ou have not been diagnosed with AFib and can take action to prevent it om developing. You should talk with your health care professional about etecting and treating AFib early, especially if you have **risk factors for AFib**.

tage 2: Pre-AFib

u have not been diagnosed with AFib, but there may be abnormal uctural or electrical functioning in your heart that can lead to it. ur health care professional will closely watch to see if AFib develops. may begin treatment early to **slow or stop the progression**.

age 3: AFib

have been diagnosed with AFib. You and your health care professional discuss how severe your condition is and the **best treatment for you**, h could include medications to control the heart's rhythm or rate, surgery anaging other existing health conditions. You will also learn how to ce your risk of having a stroke. Your stroke risk may change as time goes our health care team can use a risk calculator to determine your risk guide treatment decisions.

ge 4: Permanent AFib

ave permanent AFib that can't be effectively treated with medications lery. You can still talk with your care team about **managing your other conditions**, which may alleviate AFib symptoms, and assessing your stroke risk.


PEOPLE MAY MOVE BETWEEN DIFFERENT SUBSTAGES OF AFIB (3A–3D).

All types of AFib can increase your risk of stroke. **Even if you have no ~¡°sgk^ f{k -¹ } ©°¡ } -∅ ¹ ¡ ±ö¬k ~k^¬{¹ ¾¶k °s } k- } ¡¬k {szk{¹ °¡ r^¶k ^ stroke than someone who doesn't have AFib.**

AFIB SYMPTOMS VERSUS HEART ATTACK SYMPTOMS

Fluttering and palpitations are symptoms of AFib. Those feelings are the key difference between AFib and a heart attack.

! rk^¬° ^°°^gz s- ^ f{¡gz^qk ¡p f{¡¡i ¿¡· °¡ °rk rk^¬°x Prs- ¡p°k~ s- g^±-ki f¹ ^ g{¡° ¡¬ f±s{i±© ¡p©{^«±k{¡iqs~q s~ °rkg¡¬¡~^¬¹ ^¬°k¬¹ ¢^ f{¡¡i ¶k--k{°r^° g^¬¬sk- f{¡¡i °¡ ©^¬° ¡p°rk rk^¬° }±-g{kçx ! rk^¬° ^°°^gz g^~ i^ } ^qk ¡¬ ik-°¬¡¹ ©^¬° ¡p¹¡±¬ rk^¬° muscle. Some heart attacks are sudden and intense. Most start slowly, with mild pain or discomfort.

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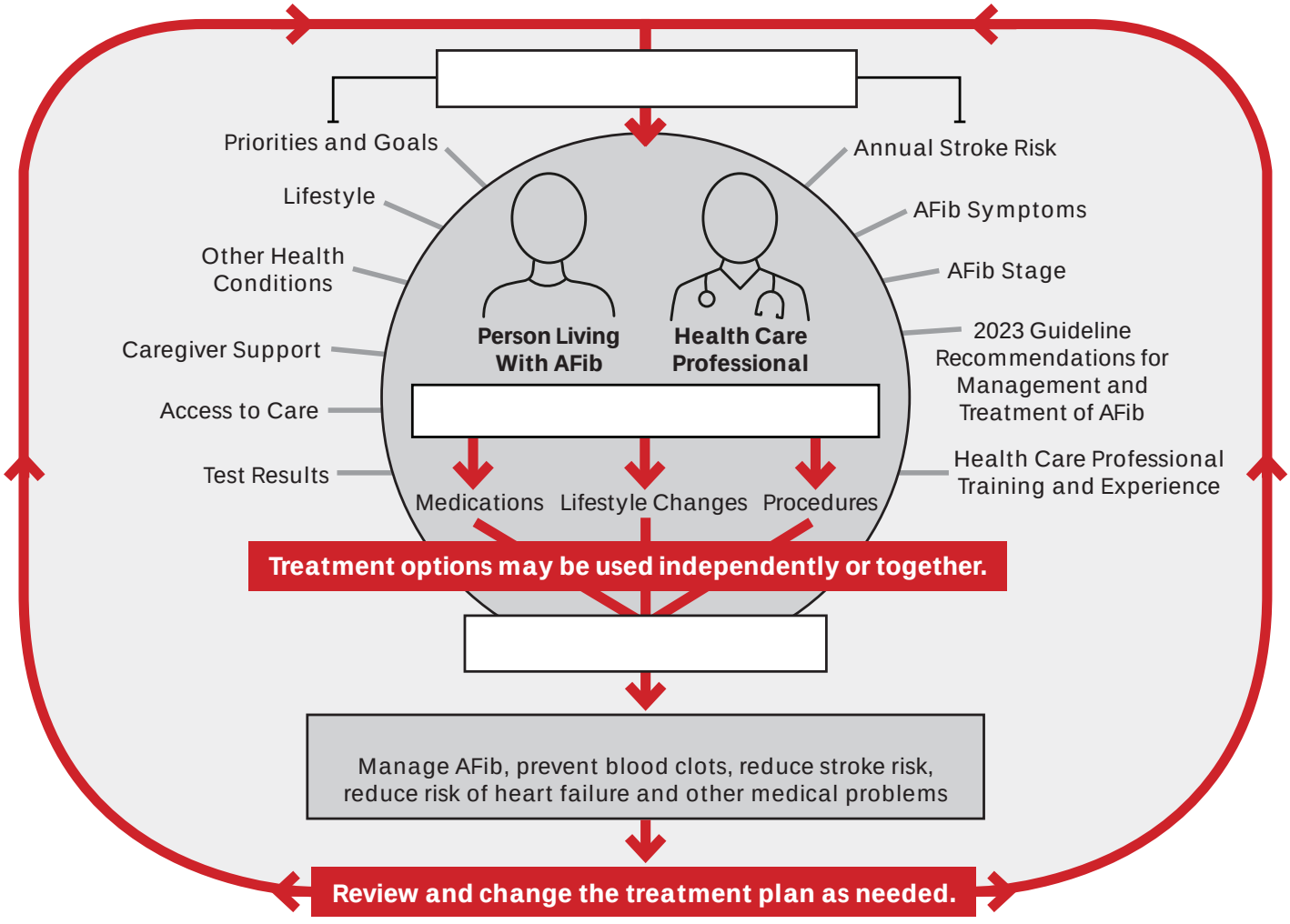
***{s~sg^{ ©¬^g°sgk q±s i k{s~k- ^¬k ¬kg¡ } } k~ i ^°s¡~- p¡¬°¬k^°s~q ^ -©kgs¾g health condition. They assist health care professionals in making informed decisions about your care, and they can help you understand your condition and treatment options. The American Heart Association and other heart health organizations published the clinical practice guidelines p¡¬ is^q~¡-s~q ^~i } ^~^qs~q ^°¬s^{ ¾f¬s{{^°s¡~s~ @¡¶k } fk¬ ÈÆÈÉx**

! q¬¡±© ¡p rk^{°r g^¬k ©¬¡pk--s¡~^{- ^~i -gsk~°s-°- · r¡ -°±i ¹ ^°¬s^{ ¾f¬s{{^°s¡~∅ ^- · k{{ as people living with AFib and their caregivers, spent months reviewing the latest research on AFib. After discussing the studies and ideas together, they wrote a list of recommendations for the best and safest ways to prevent, diagnose and treat this condition. The guidelines include information about AFib's possible causes and symptoms and the ways it affects people and their families.

The guidelines also highlight three important topics for you and your health care professionals to discuss. They can be remembered with the abbreviation "SOS":


Priorities and Goals
Lifestyle
Other Health Conditions
Caregiver Support
Access to Care
Test Results
Annual Stroke Risk
AFib Symptoms
AFib Stage
2023 Guideline Recommendations for Management and Treatment of AFib
Health Care Professional Training and Experience
Person Living With AFib
Health Care Professional
Medications
Lifestyle Changes
Procedures
Treatment options may be used independently or together.
Manage AFib, prevent blood clots, reduce stroke risk, reduce risk of heart failure and other medical problems
Review and change the treatment plan as needed.

There are several ways to diagnose AFib.

N¡ } k°s } k-ø r k^{° r g^¬k ©¬¡pk--s¡~^{- ¾~ i k¶si k~gk ¡p !3sf · rs{k °¬k^°s~q people for other conditions or during surgery. But more often, your health care professional will start with tests to monitor your heart's rhythm. If you wear a smartwatch or other device with a wearable heart rhythm monitor and it alerts you to an abnormal rhythm, be sure to let your health care professional know. This information can be a helpful part of your diagnosis.

ELECTROCARDIOGRAM (ECG OR EKG)

An electrocardiogram measures the heart's electrical activity, which controls heart rhythm. Electricity is not sent into your body. This test usually happens s~ ^ i ¡g°¡¬ö- ¡p¾gk ^~i °^zk- ¡~{¹ ^ pk · } s~±°k-x

For this noninvasive test, a technician will put sticky plastic sensors on your chest and limbs. The sensors have wires attached to a computer. They pick up your heart's electrical signals and send the information to the computer, which turns the signals into a graph. Health care professionals review the graph for any abnormal rhythms that might indicate AFib.

HEART RHYTHM MONITOR

A health care professional may send you home with a wearable heart rhythm monitor, sometimes called a Holter monitor, that can track your heart's electrical activity for a longer period.The device can monitor and detect abnormal rhythms that come and go, which may not show up during the short ECG test. You may be instructed to wear it for 24 or 48 hours or longer.

A Holter monitor has three or four sensors that attach to your chest and

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In most cases, health care professionals treat AFib with drugs that manage the heart's rhythm and/or slow heart rate. If medications don't improve these symptoms enough, there are other methods for managing AFib.

Your health care professional will use a risk calculation tool, such as the CHA_2DS_2îV!Ng -g^{k∅°¡ ik°k¬}s~k · rk°rk¬¹¡± }^¹ fk~k¾°p¬¡ } medication to reduce your risk of stroke.

The components of the CHA_2DS_2–VASc scale are:

ongestive heart failure:	1 point
ypertension (the medical term for high blood pressure):	1 point
ge (75 or older):	2 points
iabetes:	1 point
troke (prior episode):	2 points
ascular disease (such as prior heart attack, peripheral artery disease or aortic plaque):	1 point
ge (65-74):	1 point
ex (female):	1 point

The more components you have, the higher your **CHA_2DS_2–VASc** score will be. You may need more medication to control your AFib.

MEDICATIONS THAT PREVENT OR TREAT BLOOD CLOTS

The biggest health concern for people living with AFib is stroke. During AFib, your heart pumps blood abnormally. Because the blood isn't circulating properly, it may pool in the heart and form clots. These clots can travel through your blood vessels into the brain and cause a blockage that leads to a stroke.

Two types of medications, called anticoagulants and antiplatelets, help reduce your chance of having a stroke by preventing blood clots from forming or growing larger. Anticoagulants are sometimes called "blood thinners," but they don't actually thin your blood. Rather, they make it harder for clots to form in your heart, arteries and veins.

They include:

- **Direct oral anticoagulants (DOACs).** DOACs are a newer class of medications for preventing blood clots. They are more commonly prescribed over older medications like Warfarin, but ~¡ ° ^{{ ©k ¡ ©{k · ˢ° r ! 3ˢ f ±-k ° r k } ˣ , B ! * - ^¬k °^zk~ f ¹ - · ^{{ ¡ · ˢ~q ^ ©ˢ{{ ^~ i i ¡ ~⁰ ¬k«±ˢ¬k regular blood tests or dietary restrictions like Warfarin does.
- **Heparin.**

IMPLANTED DEVICES TO RESTORE NORMAL HEART RHYTHM

These small, battery-operated devices can be implanted in your chest to detect irregular heartbeats and restore their regular rhythm. They include:

- **á ß } ©{^~°^ f{k g^¬ i s ¡ ¶k¬°k¬ i k¾ f¬§{{^° ¡ ¬-** æß* , -çˣ ! ~ ß* , Ø -±¬qsg^{{¹ s } ©{^~°k i in your chest, delivers small electric shocks when your heart beats abnormally to restore a normal rhythm. An ICD can also function as a ©^gk } ^zk¬ ¡ ¬ i k¾ f¬§{{^° ¡ ¬ˣ
- **Pacemakers.** Surgically placed in the abdomen or chest, a pacemaker has wire leads connected to your heart that help it beat in a normal rhythm.

LIFESTYLE AND OTHER CHANGES

Lifestyle choices you make can affect how quickly and how severely your AFib progresses. Your care team may recommend changes you can make in your daily life that will reduce

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Remember, you are your best advocate. You should never be afraid to ask your health care ©¬¡pk--s¡~^{ «±k-°s¡~- ¡¬ ^-z p¡¬ ^~ k¸©{^~^°s¡~ p¡¬ ^~¹ ^-©kg° ¡p ¹ ¡±¬ g^¬kx 3s~ i ^~- · k¬- to some common concerns about AFib below.

AFib Fact Sheets

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The AFib 5 Video Series

- Learn about AFib and your heart
- Identify your potential AFib risks
- AFib treatment options and goals
- Work with your health care team for the best outcome
- Create healthy habits for life

AFib Risk Factors: Information and Checklists

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- Let's Talk About Risk Factors for Stroke | N©^~s- r æJ , 3ç
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Tools for Living With AFib

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People Living with AFib Share Their Stories

- Listen to Your Heart: Gregg's Story
- Watch Maricela's AFib Story