ECG
NORMAL HEARTBEAT
Flow of electrical signals in a normal heartbeat.

ECG
ATRIAL FIBRILLATION
Atrial fibrillation with abnormal signals originating in the atria.

GOALS IN TREATING ATRIAL FIBRILLATION
- Relieve AF symptoms and improve patient’s quality of life
- Prevent blood clots to decrease the risk of stroke
- Control the heart rate to allow the ventricles (lower heart chambers) enough time to fill with blood
- Restore the heart rhythm to allow the atria (upper heart chambers) and ventricles to work together more efficiently

TREATMENTS FOR AF INCLUDE:
- Medication to control the heart rate or rhythm
- Electrical cardioversion to restore normal heart rhythm
- Pacemakers and defibrillators may be used in conjunction with medication or catheter ablation
- Surgery to create lines of scar tissue to block abnormal electrical circuits causing AF
- Radiofrequency or cryoablation to help keep the heart in a normal rhythm

WHAT IS AF?
- Atrial fibrillation (AF or AFib) is the most common heart rhythm disorder in America.1
- AF occurs when the upper chambers of the heart (atria) beat out of rhythm; blood is not pumped efficiently to the rest of the body, causing an unusually fast heart rate, quivering, or thumping sensations in the heart.

WHY TREAT AF?
If left untreated, AF may increase the risk of heart failure, stroke, and death.2,3 In fact, AF increases the likelihood of having a stroke by 5 times.4

WHAT ARE THE THREE TYPES OF AF?
If left untreated, AF as a disease continues to progress. There are three types of AF:
- Paroxysmal (occasional) — AF occurs from a few seconds to days, then stops on its own.
- Persistent — AF will last for more than seven days and will not correct on its own.
- Permanent — AF is a consistently high, erratic heartbeat that cannot be corrected.

WHAT ARE THE CAUSES OF AF?
The causes of AF are often unclear. In some cases, AF may be the result of:
- Heart abnormality from birth
- Damage to the heart structure from a heart attack
- Heart valve problem

People with otherwise normal hearts may also develop AF.

WHAT ARE THE SYMPTOMS OF AF?
While some people may have no symptoms and are still diagnosed with AF at a doctor’s appointment, some people experience these symptoms of AF.
- Heart sensations (or palpitations) that include an irregular, rapid, fluttering, or pounding heartbeat
- Chest discomfort or pain
- Dizziness
- Fatigue, shortness of breath, or weakness

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Controllable Risk Factors:
- High cholesterol
- High blood pressure
- Heart disease
- Smoking
- Excess weight
- Caffeine
- Alcohol abuse
- Lack of exercise
- Some medications
- Sleep apnea

Non-controllable Risk Factors:
- Family history
- Advancing age
- Heart disorders from birth

ABLATION
There are two primary forms of ablation:
- Cryoablation freezes the tissue and disables unwanted electrical signals by creating a line of scar tissue
- RF ablation uses heat at the tip of a catheter to disable unwanted signals through several point-by-point applications around the pulmonary vein

KEEP IN MIND
Although many patients benefit from catheter ablation, results may vary. As with any medical procedure, there are benefits and risks. Your doctor can help you decide if catheter ablation is right for you.