Identifying Symptoms and Triggers of AF Attacks

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What Does an AFib Attack Feel Like?

Atrial fibrillation (AF) is a type of abnormal heart rhythm that affects the function of the top two chambers of the heart, called the atria. Several million people worldwide suffer from this condition, which can be acute or chronic. So, what does an AFib attack feel like?

AF happens because of an irregularity within the heart's electrical transmission system. The electrical signals can come from several different sources and cause the atria to contract chaotically.

AF is a treatable disease in most instances. Many people with AF live healthy and enjoyable lives with the right treatment plan.

Signs and Symptoms of AF

AF can occur without warning, and not all people have it experience the same signs and symptoms. Some individuals report severe symptoms, while others are unaware they are having an episode, except for feeling mild fatigue or shortness of breath.

AF can be confusing because some of those severe symptoms, such as chest pain and extreme shortness of breath, are the same as what you can experience with a heart attack.

Additional symptoms people commonly report when they have an AF episode are:

- Fluttering in the chest
- Tightness in your throat
- Dizziness
- Confusion
- Feeling like you are going to faint
- Weakness or difficulty walking
- Sweating with no exertion
- Anxiousness
- A rapid irregular heartbeat that makes it impossible to check your pulse
- Decreased ability to exercise

Some people with AF have had an episode that awakened them from sleep. If you are unsure whether you are having an AFib attack or a heart attack, call 911 immediately.

Your symptom duration depends on what type of AF you have. For people with paroxysmal AF, the symptoms can last less than seven days, and those with persistent AF generally have symptoms for longer than seven days.

Permanent AF does not resolve, and if you have this type, you may reach the point where you rarely notice the symptoms.

AF Causes

People with known heart disease or who have incurred damage to the heart's structure are at a higher risk for developing AF.

Some known causes of AF include:

- Abnormalities in the heart valves or other heart defects that have been present since birth
- Advanced age
- European ancestry
- Chronic kidney disease
- The presence of coronary artery disease
- A condition called sick sinus syndrome, which alters the function of the heart's normal pacemaker
- Consuming caffeine, tobacco, or alcohol
- Family history of AF
- Taking medications that have stimulants in them
- History of a previous heart attack or heart surgery
- High blood pressure
- Some metabolic problem such as hyperthyroidism, obesity, diabetes
- Certain types of lung disease
- Sleep apnea
- Viral infections
- Physical stress resulting from surgery, pneumonia, or other kinds of illnesses

Some people with AF have none of the above underlying conditions and have no other possible risk factors for the disease.

Along with causes, some people have reported certain situations or conditions that trigger an AF episode for them. Some of those triggers are:

- Emotional stress
- Quickly eating frozen foods or drinking cold beverages
- Hormonal changes in women
- Dehydration
- Extreme fatigue

If you know what your triggers are, it is best to make lifestyle modifications to help decrease your risk of them occurring.

Treatment for AF Episodes

If you are having an AF episode, the treatment you receive will depend on several factors. Your treatment plan will depend on how long you have had the AF episode, the severity of your symptoms, and what is causing your AF.

Your medical team will need to determine the best way to control your heart rate and if a procedure to bring your rhythm back to normal is safe. They will also need to decide if you need a blood-thinning medication to prevent blood clots, and if so, which one to use.

Electrical cardioversion is one method to convert AF back to a normal rhythm and heart rate. You will receive sedation before the procedure, and then your physician will use place paddles or patches on your chest to give you and mild electrical shock, which will reset your heart rhythm.

The other option your physician can choose is to administer medications called antiarrhythmics. These drugs can return your heart rhythm and rate to normal and are selected based on your heart condition.

Both procedures generally take place in the hospital so that you can have continuous heart monitoring.

For some people, cardioversion or antiarrhythmic medications do not resolve the AF. When this is the case, your doctor can recommend a surgical procedure such as:

- Catheter ablation, which uses cold or heat to destroy the heart tissue causing the irregular electrical signals
- A maze procedure to create scar tissue that blocks the stray electrical signals
- Atrioventricular node ablation, which destroys a small area of the heart to eliminate the abnormal electrical signals

Of these three, only the maze procedure requires open-heart surgery and takes place during coronary artery bypass grafting or valve repair/replacement.

AF Episode Prevention

Managing and preventing AF episodes starts with lifestyle changes. If you have known causes of AF, it is wise to make the following changes:

- Stop using any tobacco products
- Avoid alcohol use as much as possible
- Minimize caffeine intake
- Follow a heart-healthy diet that includes eating several servings of fresh or frozen produce daily and eliminating high salt, high fat, or high sugar foods
- Make sure you engage in exercise or some form of moderately strenuous physical activity daily
- Achieve and maintain a bodyweight that is healthy for you
- Consistently take your prescription medications as prescribed by your physician
- Understand your triggers
- Learn about your risk level of stroke from your physician and understand what steps to take the manage it

If you have AF, you can still live an active life. It's essential to consult with your healthcare team to determine how to manage your symptoms wisely and learn about what you can do to decrease your risk of future episodes.