



The Steps and Procedures for an Accurate AFib Diagnosis

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How Does a Doctor Arrive at an AFib Diagnosis?

Is it always easy for doctors to diagnose AFib? Sometimes a person will have no symptoms, but the doctor suspects this condition during a standard physical examination, or from a routine EKG. Other times a person will notice symptoms and see a doctor for further investigations. Finding the correct diagnosis quickly is important, because AFib requires proper treatment.

How is AFib Diagnosed?

The initial appointment with your doctor is the first step. He or she will review your medical and family history by asking you questions about your symptoms, lifestyle habits (diet, exercise, smoking, stress levels) and about medical conditions that you and your family members have.

You physician will also perform a physical examination, focusing on your heart health – listening to your heart beat to determine the rate and rhythm, and listening to your lungs. He will also take your pulse and check your blood pressure.

An electrocardiogram (EKG) will be recommended. EKG helps to diagnose AFib because it shows the electrical activity of your heart, including how fast your heart beats, the rhythm, as well as the strength and the timing of the electrical signals. It is an easy, painless procedure in which several electrodes are placed in different parts of your body.

If your heart is not working properly during the test, the EKG will show the abnormalities. However, the test is short, and an episode of AFib can be easily missed. For this reason, the doctor may order a Holter monitor, where the electrical activity of your heart is recorded over 24-48 hours. Event monitors are similar to a Holter, but record your heart rhythm for as long as 1-2 months – though not continuously. You can turn on the monitor when you experience symptoms like palpitations or dizziness.

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Your doctor may also want to evaluate how your heart works under physical stress. The activity of the heart will be recorded while you are exercising on a treadmill or bike. If your condition limits your ability to exercise, you can take a pill instead.

You may also undergo an ultrasound of the heart, or an echo cardiogram. This study is helpful to evaluate the size and shape of your heart, how the valves work and if there is any problem with the blood flow or how the heart muscles contract. This study helps find possible underlying causes of your AFib.

The heart and lungs can be also evaluated with a chest X-ray. This study is usually performed for complications of AFib – for example, accumulation of fluid in the chest or an enlarged heart. Blood tests may reveal abnormal levels of electrolytes or thyroid hormones, which could also cause heart symptoms.

What you can do to help your doctor find the diagnosis? Make sure you discuss your symptoms in detail during the initial consultation. Keep your appointments (GP, cardiologist, for investigations) as recommended, prepare for the appointment, and follow the instructions you're given carefully (i.e. for a treadmill test you should not eat for four hours prior to the test).

Once the diagnosis is confirmed, you will receive treatment and have regular follow ups with the physician.