Calderdale and Huddersfield
NHS Foundation Trust

Patient Information Leaflet

Atrial Fibrillation (AF)

What is Atrial Fibrillation?

Atrial Fibrillation (AF) is a common heart rhythm problem.

Normally, your heart beats in a regular, steady rhythm. In AF, the upper chambers of the heart (atria) beat irregularly and often too fast.

This can make your pulse feel:

- Fast
- Irregular
- Fluttering or "pounding"

Why does AF matter?

AF can:

Make you feel breathless, tired, or dizzy

Reduce how efficiently your heart pumps blood

Increase the risk of blood clots forming in the heart

Blood clots can travel to the brain and cause a stroke.

Symptoms of AF

Some people have no symptoms, but common symptoms include:

- Palpitations (feeling your heart racing or fluttering)
- Breathlessness
- Chest discomfort
- Fatigue or reduced exercise tolerance
- Dizziness or light-headedness

Causes and triggers

AF can be caused or triggered by:

- High blood pressure
- Heart disease
- Chest infections
- Overactive thyroid
- Alcohol (especially binge drinking)
- Stress or illness
- Electrolyte imbalance or dehydration

Sometimes no clear cause is found.

Treatment in SDEC

Your treatment depends on your symptoms and heart rate.

You may have received:

- Medication to slow your heart rate (rate control medicines)
- Medication to restore normal rhythm (in some cases)
- Blood thinners (anticoagulants) to reduce stroke risk
- Fluids or treatment for underlying causes

Some patients may need hospital admission depending on symptoms or test results.

Blood thinners (anticoagulation)

Because AF increases stroke risk, you may be started on a blood thinner such as:

- Direct oral anticoagulants (DOACs)
- Warfarin

These medicines:

- Reduce the risk of stroke
- Do not usually affect how you feel day-to-day

Important:

- Take them exactly as prescribed
- Do not stop without medical advice
- They increase bleeding risk, so seek help if you have unusual bleeding or bruising

What you can do to help

- Take all medications as prescribed
- Avoid excessive alcohol intake

- Stay well hydrated
- Treat infections promptly
- Keep a list of your medications
- Attend follow-up appointments

When to seek urgent help

Call 999 or go to the Emergency Department if you experience:

- Chest pain or pressure
- Severe breathlessness
- Fainting or collapse
- Signs of stroke:
    - Face drooping
    - Arm weakness
    - Speech difficulty
- Very fast heart rate with feeling very unwell

When to seek medical advice

Contact your GP or NHS 111 if:

- Symptoms persist or worsen
- You feel your heart is racing frequently
- You are unsure about your medication
- You experience side effects from blood thinners

Follow-up care

You will usually need:

- Review in cardiology or GP clinic
- ECG monitoring
- Blood tests (including thyroid and kidney function)
- Review of stroke risk and anticoagulation

Long-term management

AF is often a long-term condition, but it can be well controlled. Treatment aims to:

- Control heart rate or rhythm
- Reduce stroke risk
- Improve symptoms and quality of life

Key message

Atrial Fibrillation is a common and treatable heart rhythm condition. With the right medication and follow-up, most people live full and active lives.

Contact information

If you have concerns after leaving SDEC, please contact:

SDEC / Hospital Advice Line: _____

GP: _____

Out of hours: NHS 111

In an emergency, call 999.