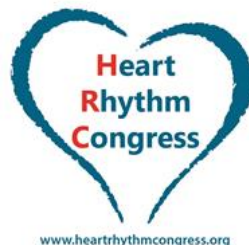


# What are the treatment options?

Dr Gerry Lee,  
King's College London



What are the options?  
Cardioversion  
Medication  
Ablation  
Surgery (for valvular cause of AF)



It's not what we can do for  
your AF, it's what you can  
do for your AF!



[www.hearhythmcongress.org](http://www.hearhythmcongress.org)

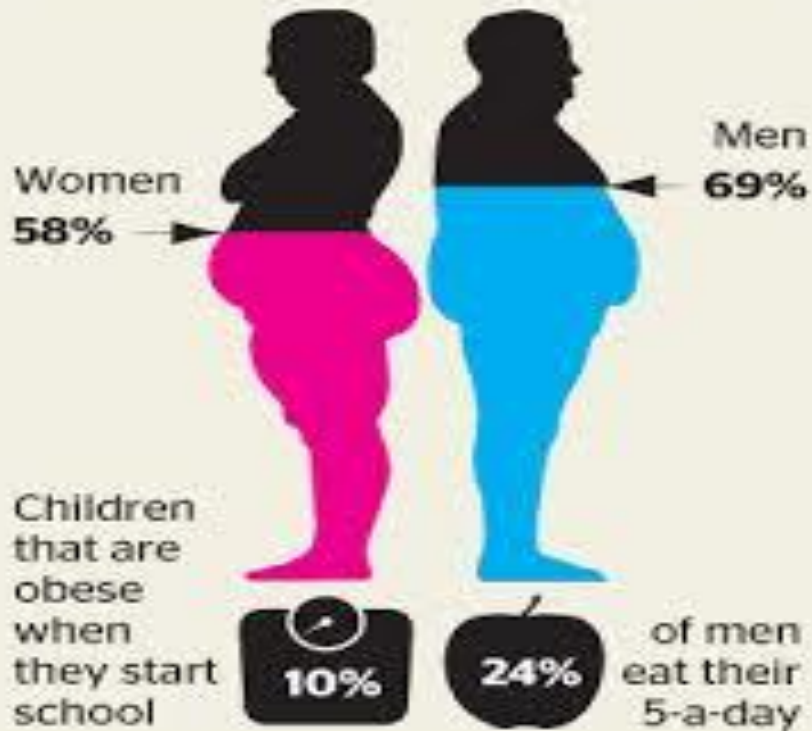
# LIFESTYLE CHANGES



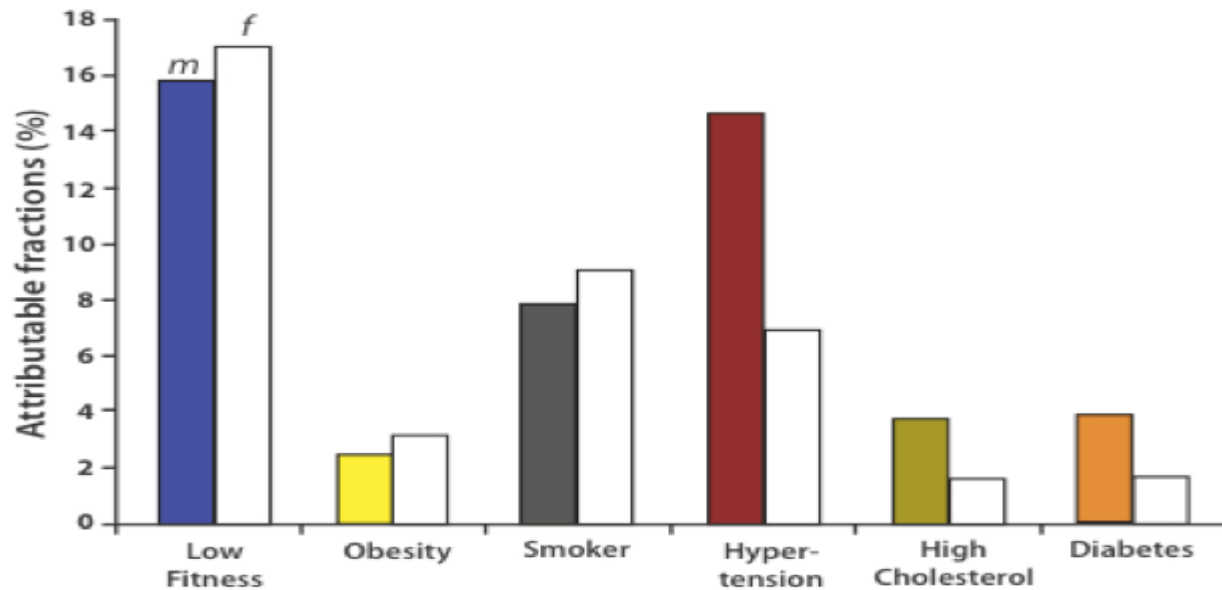
[www.heartrhythmcongress.org](http://www.heartrhythmcongress.org)

# Obesity Britain

Adults who are overweight or obese

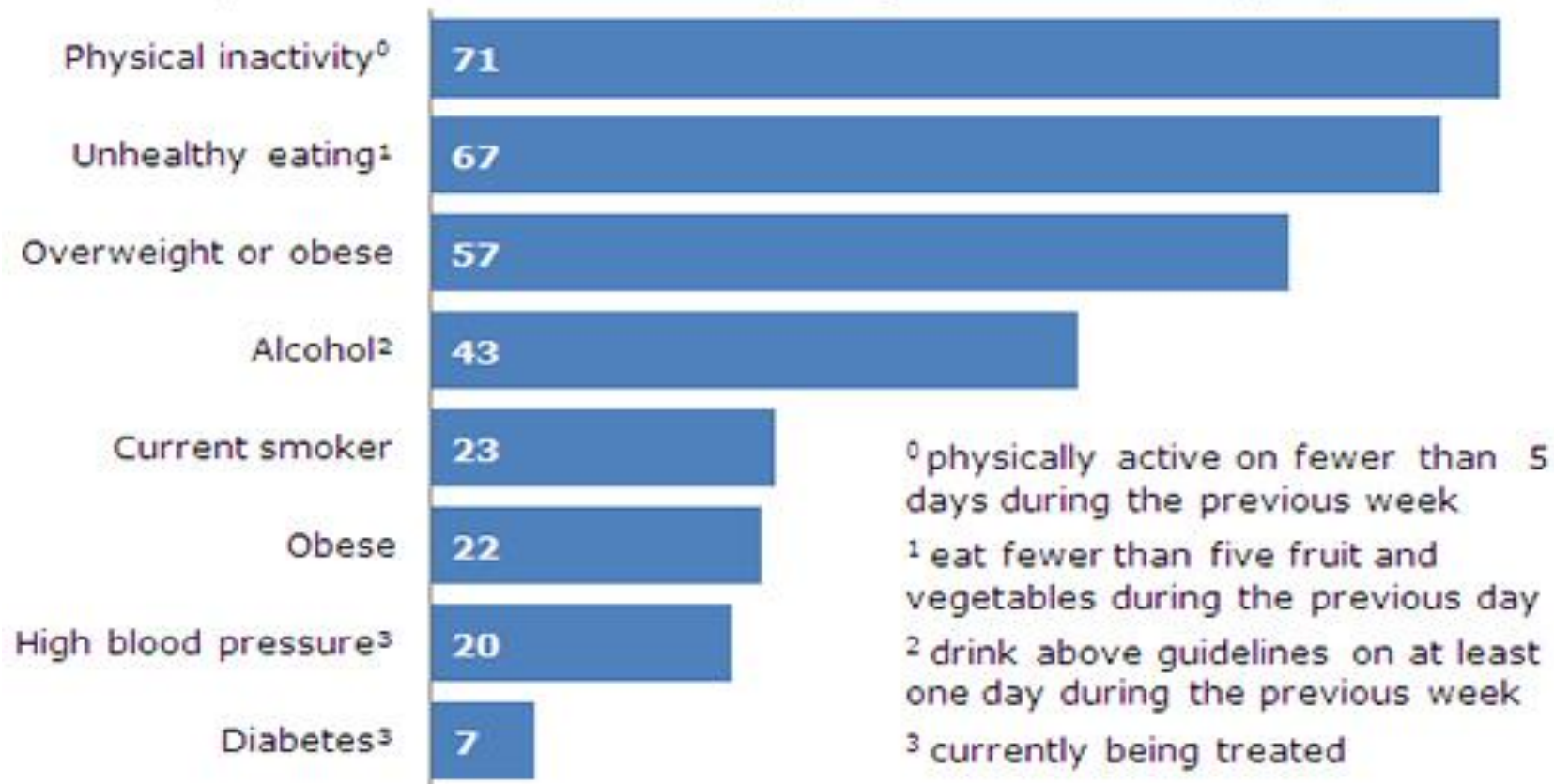


# Which risk factor kills more people?



## Reported risk factors for cardiovascular disease, age-standardised percentage, persons, age 16 and over, Wales, 2011

Produced by Public Health Wales Observatory, using Welsh Health Survey (WG)



# WHO Classification

Associated risks



BMI between 18.5 and 25 : normal weight

**Normal**



BMI between 25 and 30 : overweight

**Average**



BMI between 30 and 40 : obesity

**Important**



BMI above 40 : morbid obesity

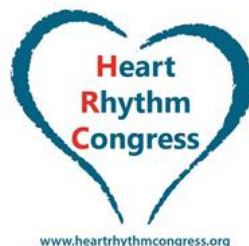
**Severe**



[www.heartrhythmcongress.org](http://www.heartrhythmcongress.org)



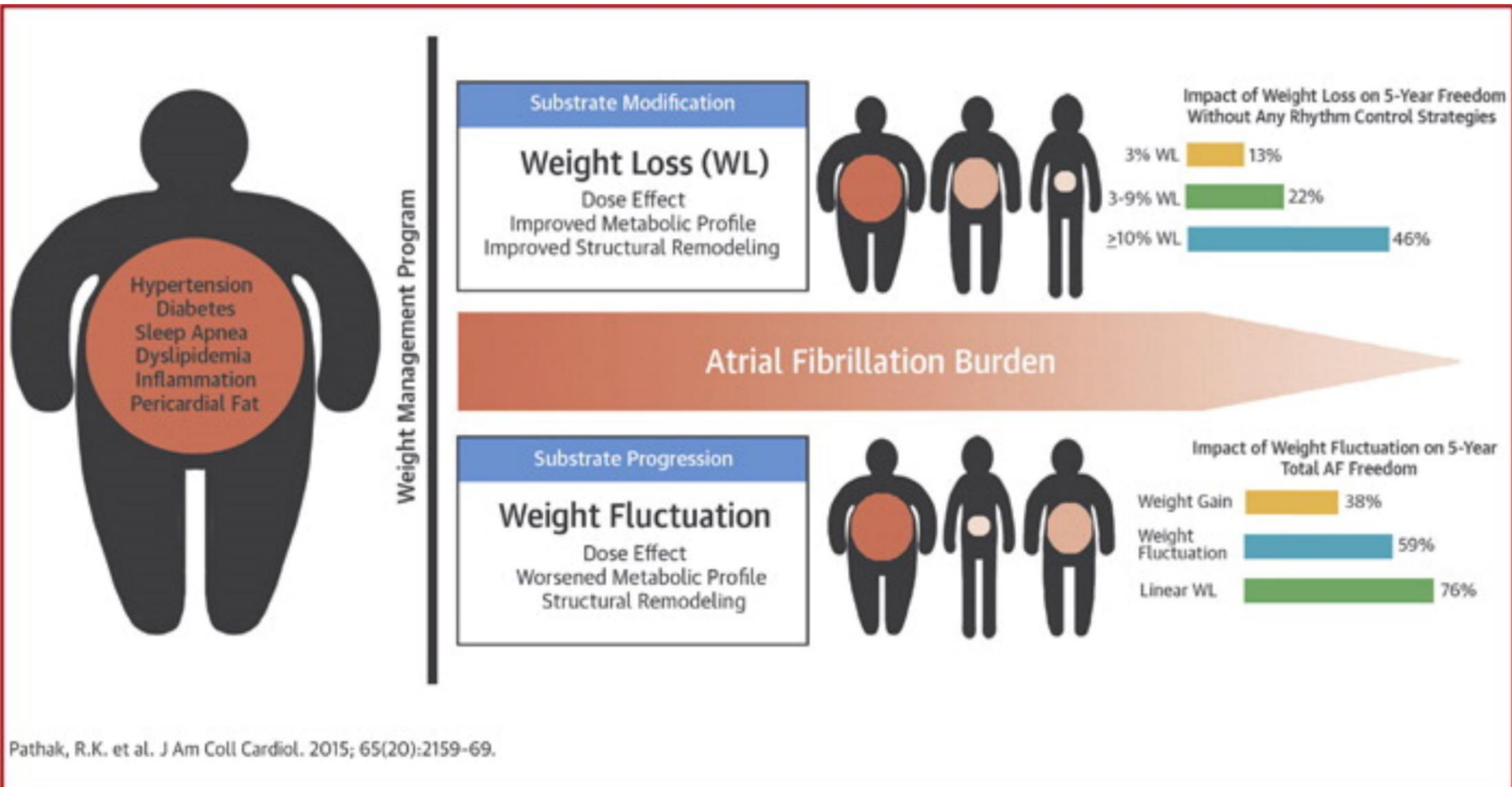
- 3.5 to 5.3% excess risk of Atrial Fibrillation for every one unit of Body Mass Index increase
- Risk of incident AF rises proportionally & patients who move from one weight category to the next increased or decreased the risk of incident
- In other words: **Weight loss helps AF symptoms as well as other cardiac risk factors**





Long-term sustained weight loss is associated with **significant reduction of AF burden and maintenance of sinus rhythm**. (Long-Term Effect of Goal directed weight management on Atrial Fibrillation Cohort: A 5 Year follow-up study [LEGACY Study])



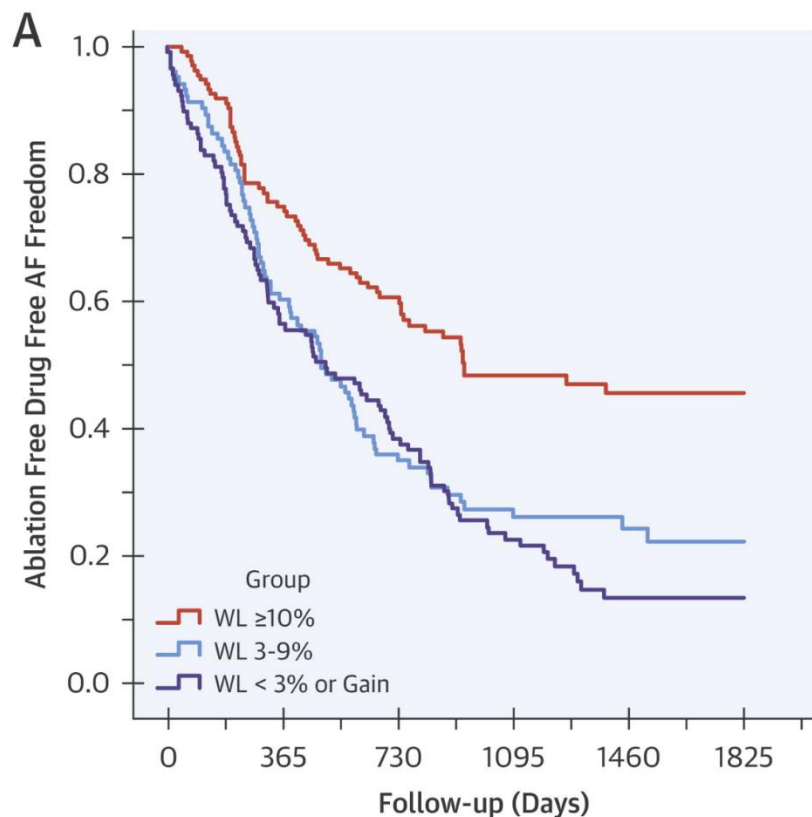


### Figure Legend:

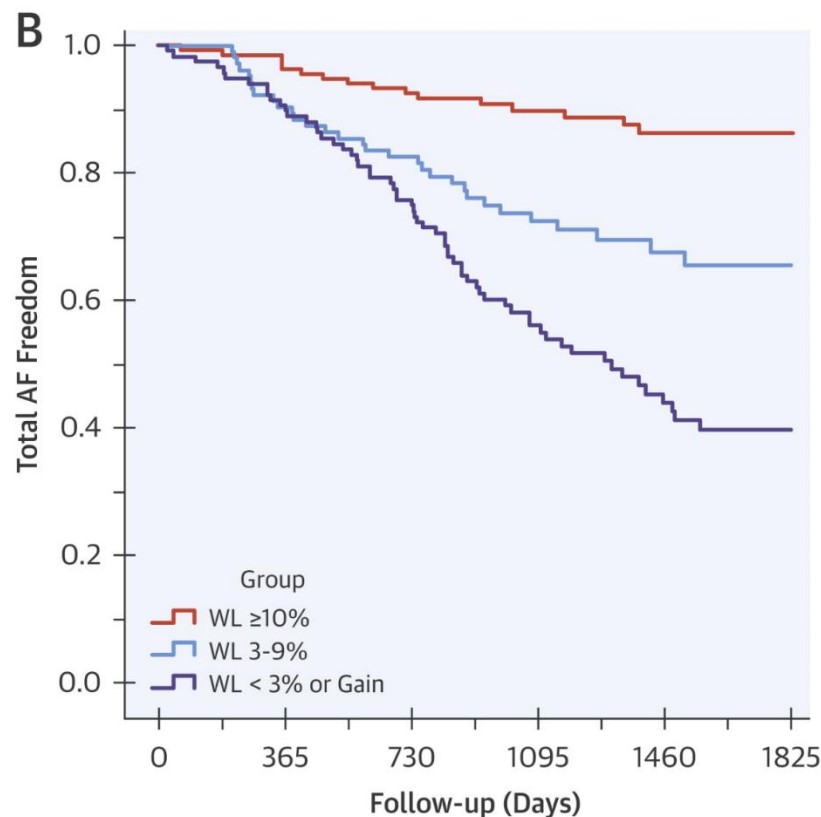
#### Weight Management and Atrial Fibrillation

(Left) Obesity is associated with a variety of associated comorbidities. These are all associated with progression of the atrial substrate and the development of atrial fibrillation (AF). (Top) A dedicated weight management program with weight loss (WL) is associated with reverse remodeling of the atrial substrate and a dose-dependent reduction in the AF burden, which is sustained in the long term. (Bottom) The consequence of weight fluctuation, which somewhat curtails the beneficial effects of WL.





Time (Days)	0	365	730	1095	1460	1825
$\geq 10$ WL	135	101	72	42	31	18
3-9% WL	103	62	36	22	13	7
<3% WL or gain	117	66	44	22	11	9



	0	365	730	1095	1460	1825
$\geq 10$ WL	135	130	114	86	67	36
3-9% WL	103	93	83	57	35	22
<3% WL or gain	117	105	85	53	32	22

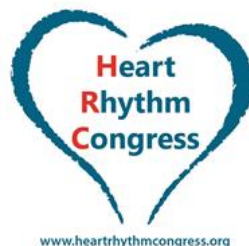
### Figure Legend:

#### Atrial Fibrillation Freedom Outcome According to Group

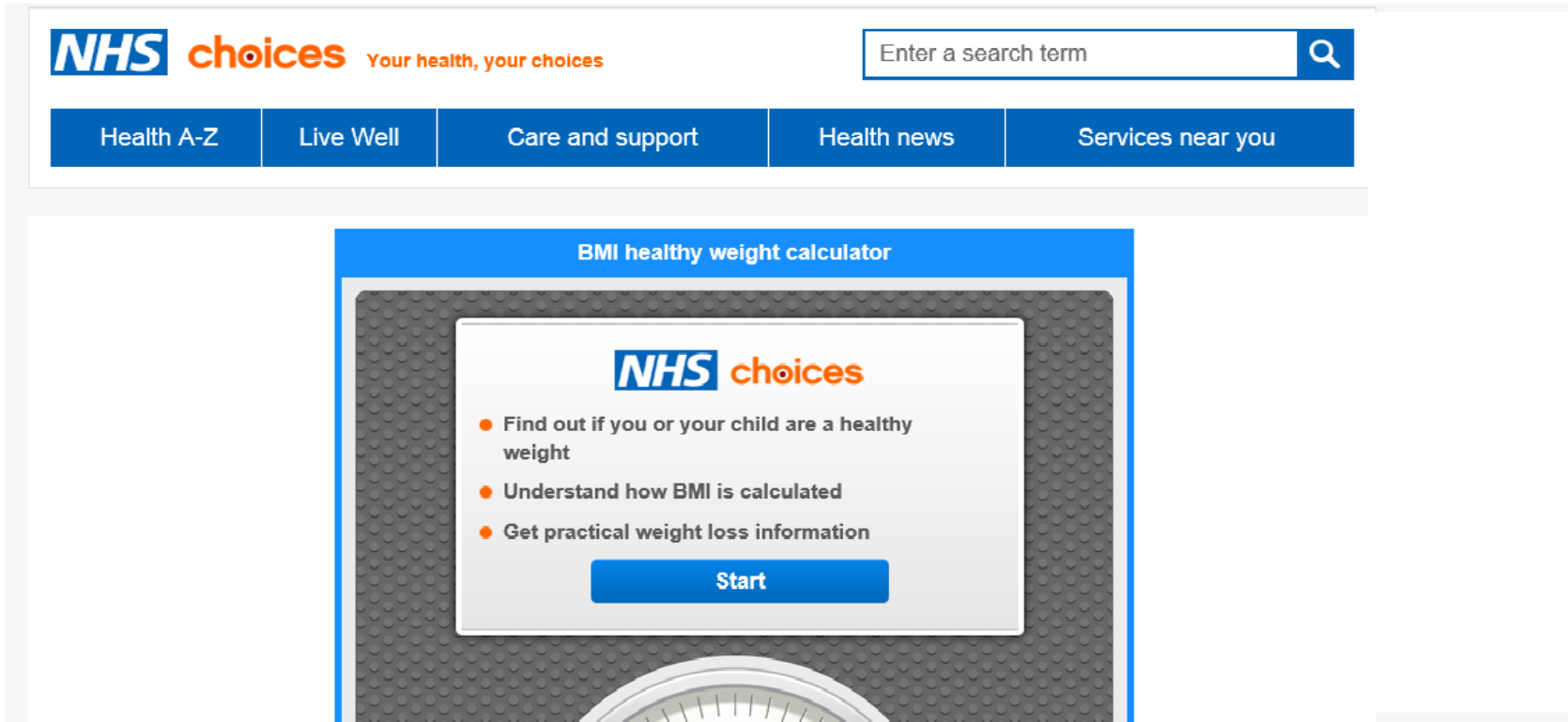
(A) Kaplan-Meier curve for AF-free survival without the use of rhythm control strategies. (B) Kaplan-Meier curve for AF-free survival for total AF-free survival (multiple ablation procedures with and without drugs). Abbreviations as in Figure 1.



- Identify your risk factors
- Set collaborative goals with GP/practice nurse/AF nurse
- Modify the behaviour: Diet high in saturated fat, physical inactivity/sedentary, smoking, excess alcohol
- Take your medication
- Ask questions if in doubt: Health education leads to self-mastery

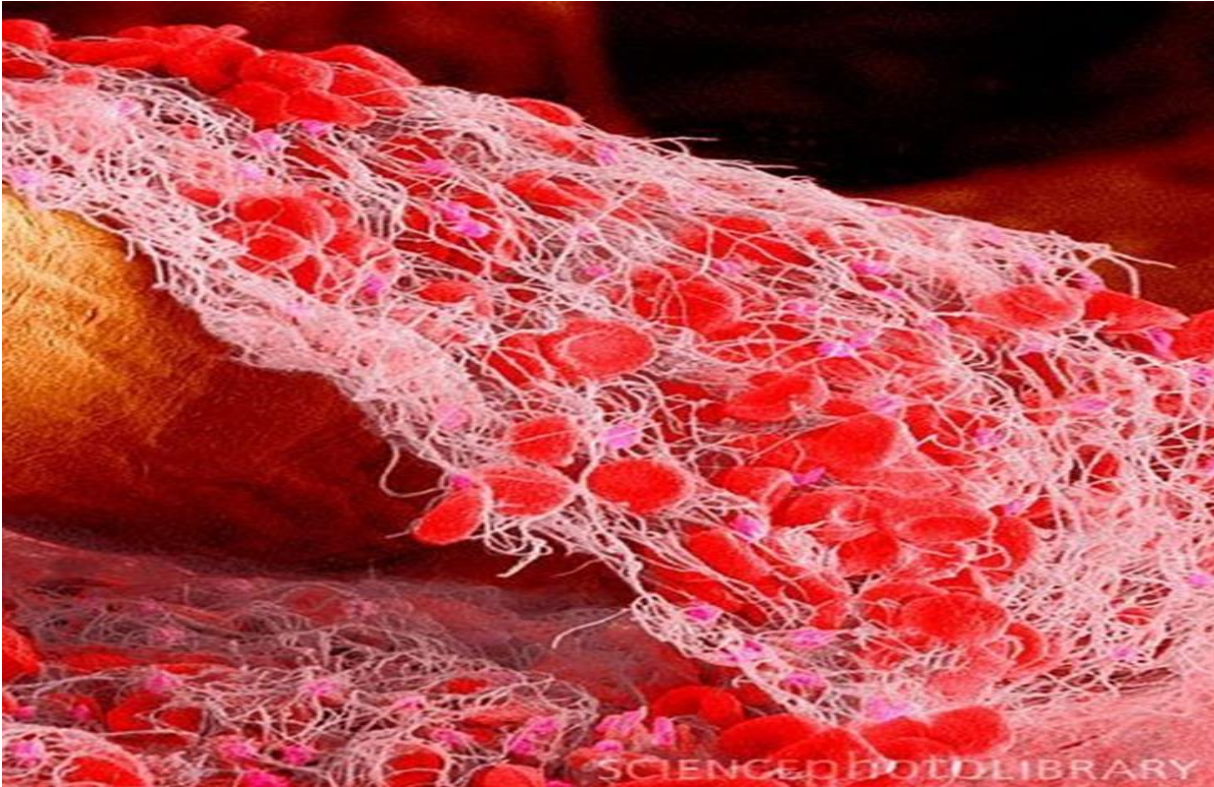


- How to calculate your Body Mass Index:
- <http://www.nhs.uk/tools/pages/healthyweightcalculator.aspx>





# Take your medication:





# Physical activity benefits for adults and older adults



BENEFITS HEALTH



IMPROVES SLEEP



MAINTAINS HEALTHY WEIGHT



MANAGES STRESS



IMPROVES QUALITY OF LIFE

REDUCES YOUR CHANCE OF

Type II Diabetes	-40%
Cardiovascular Disease	-35%
Falls, Depression and Dementia	-30%
Joint and Back Pain	-25%
Cancers (Colon and Breast)	-20%

## What should you do?

For a healthy heart and mind

To keep your muscles, bones and joints strong

To reduce your chance of falls

**Be Active**

**Sit Less**

**Build Strength**

**Improve Balance**

VIGOROUS

MODERATE



RUN



WALK



SPORT



CYCLE



STAIRS



SWIM



TV



SOFA



COMPUTER



GYM



YOGA



CARRY BAGS



DANCE



TAI CHI



BOWLS

MINUTES PER WEEK

**75 OR 150**

VIGOROUS INTENSITY

(BREATHING FAST  
DIFFICULTY TALKING)

MODERATE INTENSITY

(INCREASED BREATHING  
ABLE TO TALK)

**OR A COMBINATION OF BOTH**

**BREAK UP SITTING TIME**

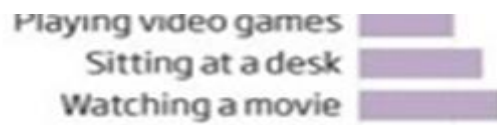


**2 DAYS PER WEEK**

Something is better than nothing.

Start small and build up gradually:  
just 10 minutes at a time provides benefit.

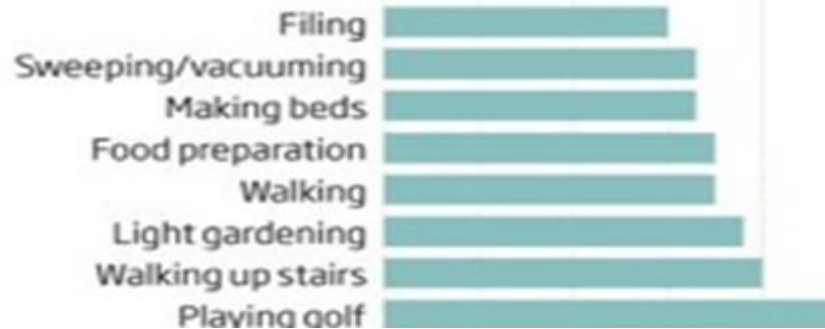
**MAKE A START TODAY: it's never too late!**



#### LOW-INTENSITY PHYSICAL ACTIVITIES









#### MODERATE-TO-VIGOROUS PHYSICAL ACTIVITIES



THE AVERAGE WESTERNER SPENDS MOST OF THEIR WAKING HOURS SITTING STILL



FOOD TYPE	CALORIES APROX.	 WALK OFF KCAL (medium walk 3-5mph)	 RUN OFF KCAL (slow running 5mph)
 Sugary soft drink (330ml can)	138	26 min	13 min
 Standard chocolate bar	229	42 min	22 min
 Sandwich (chicken & bacon)	445	1 hr 22 min	42 min
 Large Pizza (1/4 pizza)	449	1 hr 23 min	43 min

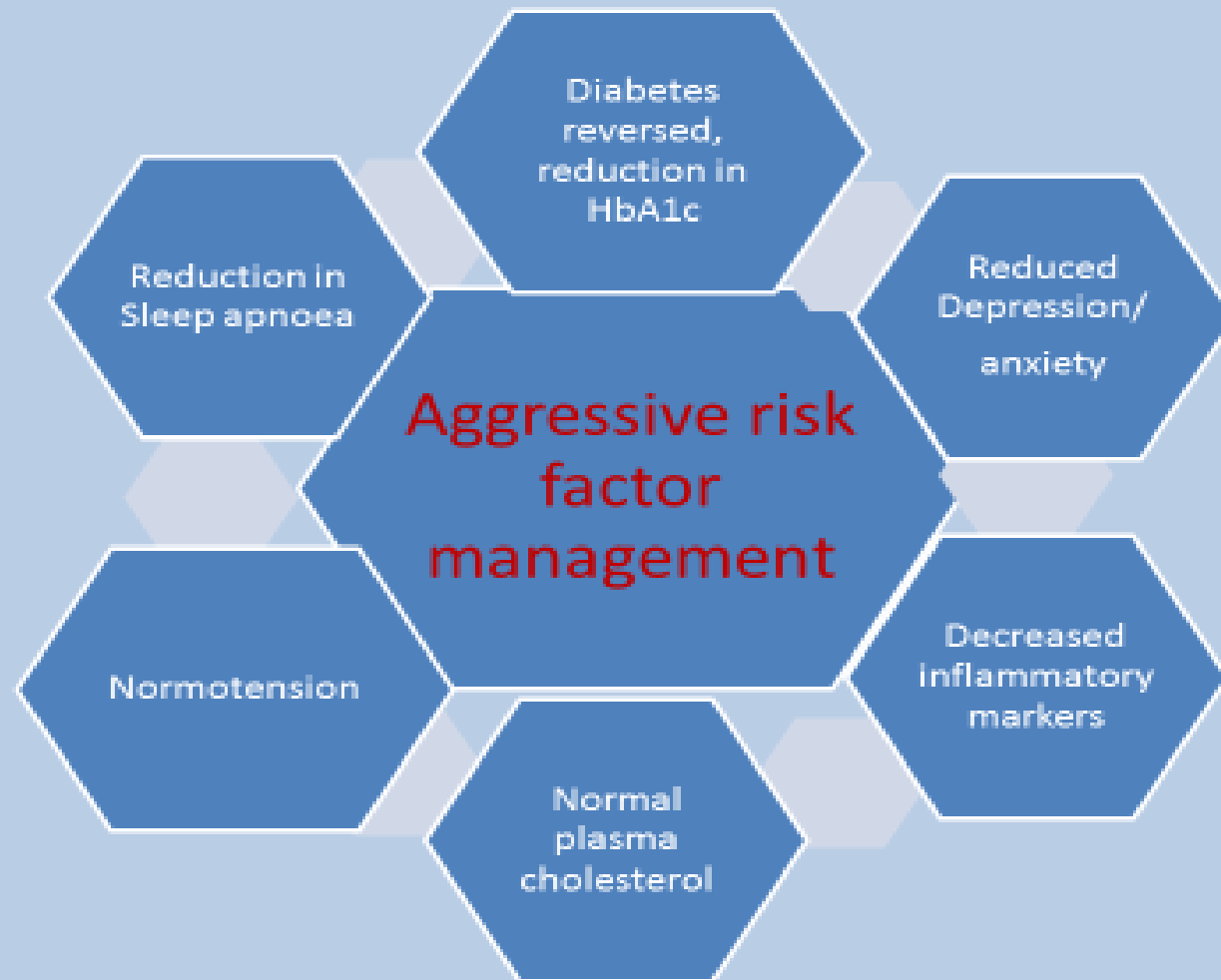


Figure 1: 12 lead ECG of Atrial Fibrillation (rate 96 bpm)

