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VIRTUAL LAF CONFERENCE

Proceedings of 61st Session
November 5th 2007 – December 3rd, 2007

SUBJECT: Personal Experiences with Afib Abatement (The List)

The purpose of this Conference Room Session (Session 61) is to provide a means of gathering success stories from afibbers who have managed to materially reduce or eliminate their afib burden through means other than ablation and surgical procedures. All afibbers who have done so are encouraged to post their stories here and I have started the ball rolling with four remarkable "journeys"; those of Erling Waller, Frances Ross, Peggy Merrill and George Newman.

If you post your story, please remember to state when you started your successful protocol and how many episodes you have had while being on it.

Please do not assume that all afibbers whose postings are now in Conference Room 61 are still free of afib - anymore than we should assume that everyone who reported a successful ablation/maze procedure awhile back are still in normal sinus rhythm. The purpose of session 61 is to gather in one place postings of what has worked for some afibbers. Some of these postings may resonate with individual readers and lead them to investigate such approaches as trigger avoidance, dietary changes, supplementation with the magnesium/potassium/taurine combo or to be checked out for GERD, sleep apnea or systemic inflammation. I think session 61 serves this purpose and that Peggy has done a very worthwhile and much appreciated job in compiling all "The List" postings in one easily accessible place.

However, session 61 is definitely not meant to be a "data-driven", scientific study to determine what may or may not work for different groups of afibbers. For that we would need more rigorous and extensive data for each respondent in a standard format; for example:

1. Age and years of afib. Turning around afib one or two years after diagnosis is likely to be easier than eliminating it after 20 years.
2. Type of afib. There are indications that vagal afib is considerably easier to deal with than are mixed and permanent afib.
3. Severity (burden) of afib prior to protocol implementation. Eliminating further afib after having experienced just one or two short episodes in the previous 12-month period is not quite as impressive as eliminating it after having had daily, long-lasting episodes for the last 10 years.
4. Severity of afib after protocol implementation; ie. number and duration of episodes since protocol implementation.
5. Specific details of the successful protocol.

There are no doubt other aspects that would need to be evaluated in order to produce a proper, data-driven, scientific study, but unfortunately I do not have the time to undertake such a study anytime soon. So, until we come up with

something better at least session 61 will serve the purpose of providing ideas for approaches that may possibly work for some readers.

Peggy has very kindly gone back through the archived Bulletin Boards to locate postings, which have been incorporated here. She was about half way through the 4th with the 3rd still to go. Thanks Peggy for your great effort!!

Hans

ERLING WALLER

I am a 74-year-old male enjoying excellent health, free of the afib that used to be my frequent and unwelcome companion. My afib career began about 10 years ago. I was doing some light carpentry at home mid-day, feeling fine, when all of a sudden my heart started racing. Not irregular at all, but a steady rhythm at 155 bpm. When my chest began to hurt I drove to my doctor's office and, in the ER, learned that I had something called atrial flutter. The episode lasted about 3 hours.

In hindsight I now realize that I had experienced PACs (premature atrial complexes) perhaps 3 or 4 years earlier and that starting in 1991 or 1992 I probably had experienced brief runs of atrial fibrillation now and then. The PACs had been dismissed as being of no concern by my cardiologist and I did not pay much attention to them until the autumn of 1995 when I had my first full-blown afib episode at the age of 67 years.

The second episode came about 3 months later, but from this time on they became more frequent, time between episodes varying from a month to a day, with more than 20 per year. The shortest ever was just a few minutes long (not including many very brief runs of a second or two), the longest about 44 hours. I always converted spontaneously. Episodes that would last more than a few minutes were almost always highly symptomatic, making me incapable of anything except lying down with feet up, or sometimes heading off to the ER for intravenous calcium channel blocker, ECG, and companionship. Once I went prepared with an article by an ER doctor who had used intravenous magnesium sulphate to successfully convert a patient. My ER doctor was interested and ordered it, but with no result. We agreed that it probably meant that I was not magnesium deficient to begin with. Later on I converted on my own, as always.

My episodes would almost always begin during the day, only occasionally at night while asleep. I did not discover any triggers as such although I suspect that at least some of my episodes involved a light reactive hypoglycemia following a meal or subsequent to enjoying a beer or two after work. Needless to say, I no longer drink beer. I believe it could precipitate a hypoglycemic reaction or that some substance in the "chemical brew" called beer might have been part of the complicated afib equation, but a direct cause-and-effect relationship was never clear to me.

I, of course, made the usual rounds of GPs and cardiologists and did learn that my heart was sound. At one time a "silent ischemia" was suspected because of a slight S-T segment depression during a stress test; however, this was disproved with a follow-up thallium stress test. Maximal heart rate exercise (treadmill testing) never provoked arrhythmia or angina. I tried the beta-blocker atenolol (Tenormin) for several weeks. It made me feel very tired and I suspect precipitated a very lengthy afib episode so I stopped using it. Eventually I was prescribed amiodarone (Cordarone), but decided against taking it.

At this point I finally realized that if I were to overcome my afib I would have to find the solution myself. So I began by asking 3 questions:

1. What changed within me to cause afib to arrive in my life at age 67?
2. What would change within me to initiate an episode?
3. What would change within me to terminate an episode?

Having learned that I had no underlying heart disease, I could assume that the chromosomal and mitochondrial DNA codes for the substances and energies required for healing and maintenance of my cells were still intact. Obviously they used to be intact because I was healthy and without full-blown afib up until age 67. If the codes were indeed intact then the answers to my questions could be:

1. Chemical excesses or deficiencies, or both, had compromised the ability of the DNA codes to be actualized thereby making the cardiac tissues vulnerable to fibrillation.
2. Shifts in the amounts or types of internal chemicals would somehow initiate an afib episode.
3. Further chemical shifts would somehow terminate an episode.

After much study about cardiac cells, and the significance of cell membrane integrity and cellular energy in maintaining NSR, I finally focused in on the nutritional requirements of cells and the all important issues of omega-6 to omega-3 ratio, EPA and DHA fish oils, coenzyme Q10, L-carnitine, and magnesium.

Omega-3 (w3) and omega-6 (w6) are families of the essential polyunsaturated fats. They are essential in the diet because they are required and the body can't produce them. Probably everyone consumes too much w6 fats relative to the w3s since they are abundant in our food supply. The task for me was to know the sources and reduce their intake. The principal sources of w6s and w3s in our foods are the vegetable oils such as soybean, safflower, sunflower, canola, etc. If the food label lists polyunsaturated fats it's w6 and w3. The ratio of w6 to w3 in these food oils is too high to be conducive to health, and the methods used in extracting the oils make them unsuitable for consumption. "Virgin" applied to olive oil implies that gentle, low heat, non-destructive methods were used in extracting the oil, I've never seen that word used for other oils in our food. By reducing food oils and other common sources of polyunsaturates, and by adding supplemental w3s in the form of EPA/DHA fish oils I was able to improve my ratio. I have never aimed for a certain daily amount of w6, and would have a hard time doing so – I just watch my step. I figure that if I just stay low on most foods with oils I will still be getting plenty of w6, a required nutrient. But by doing so my intake of w3 is reduced. The most important w3s, EPA/DHA, are not in these oils anyway. They are either made in the body from other w3s in food (which for many is problematic), or they need to be supplemented. I usually take daily 4 capsules of fish oil providing 720 mg EPA and 500 mg DHA, but some days only 2 or 3 capsules. For a long time I was taking more than I am now. I absolutely stay away from hydrogenated oils which seem to be everywhere in processed foods. Hydrogenation produces "trans" fats with a molecular shape that screws up cell membranes. The book "Fats that Heal, Fats that Kill" by Udo Erasmus is powerful knowledge. Some days I only take 2 capsules, some days none, but I'm out of the woods now (in a maintenance mode) and am enjoying being less fussy about these things. I also learned that I could likely improve my situation by ensuring that I had an adequate intake of two nutrients vital to proper cell functioning, L-carnitine and coenzyme Q10. For a long time I took about 2000 mg per day of L-carnitine, but now that I am just maintaining I'm down to about 1000. My doctor kindly wrote a prescription for Carnitor, the only prescription form in the US. Carnitine over-the-counter is a bit expensive, so with insurance I have only a moderate expense. Acetyl-L-carnitine is, by many accounts, superior for reasons having to do with entry into the cells, but the body converts L-carnitine to the acetyl form anyway. So I was never certain that the extra cost was justified. If I was starting over and knew what I know now I am sure I would go all out and buy the acetyl form.

I now take 100 mg per day of coenzyme Q10 in the form of an oil-based capsule, but for a long time it was 180 to 200 mg. There has been some discussion about taking CoQ10 while being on warfarin. For a period of time some years ago I was on warfarin and about 180 mg of CoQ10 daily, and there was never a problem with my INR nor was a question ever raised about the combination by my cardiologist or my other doctor. There is nothing in any of the voluminous scientific literature today that proscribes the combination. It's true that, because of its molecular similarity to vitamin K, CoQ10 does have a similar effect on clotting, but I was never told to limit my intake of spinach or other high vitamin K foods. A young person will perhaps not benefit from CoQ10 supplementation because the body normally produces sufficient quantities. Later in life (during the 30s) CoQ10 production falls off markedly. I was in my 60s when afib began and anyone with afib is probably not "normal" as regards to cellular energy and antioxidant protection, another important CoQ10 function.

I endeavoured to learn everything that I could about the minerals magnesium and potassium, because I learned that they are intimately linked to normal heart rhythm, and deficiencies can lead to arrhythmias. I read that magnesium is required in over 300 enzymatic reactions, including ones involved in the production of cellular energy. I also learned that magnesium is called "nature's physiologic calcium blocker". Since it is known that some 80% of people in our culture are magnesium deficient, I take 400 mg or so per day as a supplement. For some time I was using magnesium aspartate, but avoid it now because it seemed that it actually increased the frequency of a-fib events, probably due to the known "excitatory" effect of aspartic acid (aspartate). There are many other excellent supplement forms available. I don't supplement with potassium since there is a huge amount in common foods.

My other supplements include a mixed vitamin E supplement and about 1 to 2 grams per day of vitamin C. I also try to keep my calcium/magnesium ratio at about 2:1 versus the recommended 4:1. I believe this and eliminating most dairy products have also contributed to my healing.

Am I healed? I certainly believe so. I have been in normal sinus rhythm since January 2002, after experiencing a great reduction in frequency and intensity of afib events during the fall of 2001. I am experiencing the health and vitality of 30 years ago. I take no medications, my PACs have essentially ceased, and the fear of experiencing another afib episode has completely disappeared. Looking back, I now believe that the most important steps that I took to achieve this were to begin taking fish oils (EPA and DHA), reducing my intake of omega-6 fats, completely eliminating my intake of hydrogenated oils, and supplementing with CoQ10, L-carnitine, and magnesium.

Another very important contribution was to stop putting into my body suspicious chemical ingredients and additives in processed foods. Besides avoiding like the plague MSG and aspartame in all of their guises, my general rule is, if I cannot pronounce it I probably should not eat it. I believe that dietary indiscretions resulting from an ignorance of sound nutritional principles had caused a gradual decline in my health over a period of many years, finally resulting in afib, a blessing in disguise. I deplore that having been given a good body, I let it deteriorate out of ignorance and blind obedience to false cultural dietary norms. I wish everyone with the nasty afib affliction could be as fortunate as I have been in finding a way out.

Protocol started: January 2002

Protocol Effectiveness: Not known, but was effective for at least 3 years

Source: The AFIB Report, November, 2002

FRAN ROSS

In hindsight my diet had been very refined which led to leaky gut (with no digestive symptoms) so that my body was very low on all nutrients. My take on this is thus. The paleo diet cut out the problem foods helped heal the gut and didn't feed bad bacteria and allowed good bacteria to flourish thus allowing absorption of all the major nutrients (obviously very simplified). Excitatory neuro-transmitters such as MSG aspartame etc played havoc as there were not enough minerals vitamins etc to make inhibitory neurotransmitters, hormones etc and the liver was under undue stress and not able to break down and eliminate toxins. Starchy foods such as grains and potatoes played havoc with blood sugar levels as there were no glycogen stores in liver or muscle to fall back on. This can be verified by recent hair tissue analysis (reputable) which has shown that I was still low on all minerals except for K which was very high (and had an inverse ratio with Na - very low) meaning that K is not readily available for use in the body. The lack of available K meant it was difficult for insulin to be delivered into cell walls for storage and also couldn't polarize nerve impulses. As mineral levels increased the problems subsided. Obviously the whole scenario is a lot more complex than above; however, it is my opinion that my AF was a culmination of long term malnutrition that could not be sorted by taking supplements as they could not be metabolized and the underlying reasons had to be sorted first.

Protocol started: October 2000

Protocol Effectiveness: 3 episodes during 85 months (early on in program)

SOURCE: LAFS-14 Survey (November 2007)

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FRAN ROSS (Original submission to The AFIB Report, April 2003)

I got AF at 22 years of age. It came out the blue after the birth of my first son. Unfortunately, sometimes when it happened I would pass out. Witnesses said I convulsed. So the diagnosis came as epilepsy. I was put on anticonvulsants. They never worked. In the beginning my AF was maybe twice or three times a week. Always at rest. It was short-lived, well the really fast racing part was short lived. Maybe 2 to 4 hours (in the end it could go on for days then became permanent). Every so often I would go to my GP and complain about it, but he told me it was just palpitations and I was being over anxious. So I decided they must be panic attacks and gave up with the doctors.

Nine years later, when I was having a prenatal for child number 3 I went into AF sitting in the doctor's waiting room for

two hours. I could not think why I was having a panic attack. Nothing was scaring me. But there was a Calor gas heater on and I thought that must be taking the oxygen out of the atmosphere. I have always needed lots of fresh air, especially in AF as I was prone to passing out. When I got to see the doctor he started with blood pressure. He told me something was wrong with my heart (helloooah!!!). Silly me said, oh I'm just having a panic attack. He said that's not a panic attack it's coming from your heart. Was I frightened?! I told him that I had asked him about it before, but they said it was normal and I was just being anxious, so I decided it must be panic attacks. He told me he thought it was AF, but as I had had it such a long time and was pregnant there was nothing they could do until after the baby was born. After the baby was born I was sent to the cardio. Got the Holter and a few tests. It was AF and they put me on digoxin. Then I got on with my life.

Years later I read about cardioversion and asked why I had never been sent. They told me my AF was too long standing and it wouldn't work. I stayed on the digoxin for ten years. I got worse and worse (what I would have done to know about the long term effects of digoxin then, and also the Mg depletion). Also the digoxin had changed my eating habits. I could not tolerate food in the day. I would maybe have a bag of crisps and a bag of sweets mid afternoon. So just ate a big evening meal to make sure I got nutrition. I always cooked so a lot of what I ate was semi fresh, but not organic and I was known to cut corners and buy ready made meals a lot. AF became unbearable. I seemed to be in it permanently. I read about ablation and went back to the doctor to ask about getting one. He told me that there was no way as my heart was far too healthy and I could end up with a lot more problems. I felt that things could not get worse. Little did I know!

My GP sent me to a new cardio in 2000. He had a fit and said I should never have been put on digoxin - he must have read the digoxin literature. I was upset because I had obviously been put on the wrong drug. He prescribed me arhythmol. Did more tests, 24-hour urine analysis, treadmill, echo, things I never got the first time round. I asked him if it was possible that my AF and 'epilepsy' were linked as both were electrical faults (my GP always said there was no connection). He said absolutely no. But I did get a referral to a neurologist, something I had never had despite 18 odd years on anticonvulsants.

Around this time, on the digoxin, I started getting terrible pain in my shoulder and back. I went to my GP who told me that because of the tender spots that I had a form of ME (fibromyalgia). He said it was my immune system attacking my muscles, and would be interested to know if my AF got worse when I was fighting a virus (well we all know the answer to that). I even started suspecting I had a form of MS as areas of me would become very painful - felt like patches of skin had been burnt or all the skin grazed off. But there was nothing to see. At other times they were totally numb and I could have burnt myself and not felt a thing. I also had developed terrible startle reactions. When I passed out now it was at night or early morning on waking up. But I never lost full consciousness. I was not aware of what was going on around me, but stayed conscious in a tunnel in my brain (and my husband said I was convulsing). I knew I was fighting for my life. I had near death experiences. When I got back my heart was very, very slow. I could hear it in my head. It would take me ages to be able to move after, hours to recover the feeling in my body, and my brain would not send words to my mouth. The rest of the day was in a confused mess with sound being muffled, distant and loud at the same time.

Just after stopping digoxin I read about MSG and aspartame and also preservatives and sulphites, etc. They were linked with seizures and arrhythmia, so I cut them out. It got difficult reading labels so I decided to cook from scratch. This was difficult as my health was so bad and even standing cooking or doing the dishes made me faint. But I developed a dance to keep my legs moving and kept the door open. It helped and I knew I had to persevere.

The new cardio put me on arhythmol. I didn't get on with arhythmol. So was put on sotalol. This made breathing difficult and a new diagnosis became imminent. I was told that I now had central sleep apnoea. The neurologist would suss it out. However after long EEGs and other tests I was declared fit. There was absolutely nothing wrong with my nervous system and I never had epilepsy. I started weaning my self of tegretol now. I was sent on to the respiratorist. I was put on the waiting list for a sleep study, but it would take about a year. Things kept getting worse and the passing out worse. I went back to my GP and said I thought it was the sotalol. He said no, that breathing difficulties were not a side effect of sotalol. GGRRRRRRRR. It was probably that I had narcolepsy. My near death experiences were hypnogogic hallucinations and the fact I could not move after was sleep paralysis. There was a syndrome called sleep epilepsy. It was unfortunate that I experienced them all at the same time. AAAaaaaaaaaggggghhhhhh.

They upped my sotalol and my GP agreed that I was in chronic AF. See if a bigger dosage helps. Breathing got worse, it was as if I had to breathe through water and I kept forgetting. I found AF support groups and was mortified to learn that sotalol should be monitored by ECG before starting and every time the dose was upped. I had never been given one.

Went back to my GP and asked why I was not being monitored. Brought up my concerns about long QT. My GP did an ECG. I asked him about my QT wave. He said it looked slightly long but various factors had to be taken into consideration such as height, weight, age etc. He faxed the ECG to the cardio. He wrote back by fax and that it was just AF and nothing was abnormal and something about the T wave. My dose was to be upped again.

By this time I was more or less an invalid. I was in chronic AF. Life had no quality. All I knew was I had to eat correctly and healthily. It was my only hope to keep myself going. Kept going back to the GP with research on AF. Somehow or other they managed to convince me I just needed a higher dose of sotalol. Up it went again. I was now on 160 mg twice daily!! After about a year of sotalol, I went back with something that showed breathing difficulties to be a side effect. They relented and gave me flecainide. I thought great, as I knew I was vagal and this might just do it. However my GP and cardio would never accept vagal.

The flecainide worked for a couple of days. My breathing became better and my high level of anxiety abated. But on the third day I woke up with tremors all over. Light was pulsating in my eyes. I felt better than on sotalol but did not like my new found really fast heart rate (I had got used to the slower rates on sotalol). It happened to be the day the doctor brings his surgery to where I live. I went up and he took my pulse. He said he was taking me through personally to the Health Centre as he did not like what was happening. He told me in the car that my cardio had told them to keep me on sotalol and not change my meds. I said I would never touch it again and would not take it. By the time we got there my heart rate had dropped and all it showed was sinus tachycardia of 100 and something. I was over the moon. I was in sinus!

However, the GP told me I had an allergic reaction and had to stop the flecainide. He gave me atenolol. He told me to go back and see him the following week and they would up my dose of atenolol. He had only put me on 50 mg. However, I had already decided that I was not going to keep taking tablets. On the atenolol my breathing difficulties came back though not so severe. Also my anxiety level rose again so I took half my dose. When I went back to see the GP it was his partner on duty. I told him I wanted to stop taking tablets. I asked him if he could give me atenolol 25 mg with a score down the middle. He tried to talk me out of it, but I was insistent. He said he shouldn't, but if I insisted I wanted to cut down he would give me a smaller dosage – one with a score through the middle so my dosage could be better monitored. He then told me about one of the first patients he had treated with AF who refused to take his meds and he seemed fine. This is the only GP I have a soft spot for now. All the others had treated me like an anxious girl who could be fobbed off with their medical jargon. And they got scared as they could never back up their claims and theories with the "trust me I'm the expert" scenarios as I had been reading and reading. I had learned to trust myself and listen to my body. Only I knew what was happening. They twisted the way I presented it and even told me I was not suffering anxiety but depression. But I do know the difference. They wanted to put me on SSRIs. I realised that doctors only looked for easy solutions. Give it a diagnosis and then some more pills.

On Dec 28, 2001 I stopped taking my meds. I had been additive-free for about a year. About a week later I was cooking in the kitchen and I realised how happy I was. I was not dizzy or feeling faint. Then I realised my heart was beating normally. Only twice since then have I had AF. Once after eating chicken with MSG by mistake and the other time after taking Mg citrate (go figure). I will not touch supplements or any pills now.

Sometimes I wonder if it is the supplements that keep everyone in AF. Loads of people try diet, but everyone seems to rely on supplements (apart from Erling who is AF free but does take a couple of supplements).

I eventually got my sleep study through last April after stopping meds and getting rid of my AF and side effects. Guess what? No, I didn't have narcolepsy either (although I do have the genetic HLA DR7 typing code on two accounts).

If I come across as anti-doctor it is because of my experience. But I would rather not see one again if I can help it.

I don't know the real reason why. All I know is that, after 20 years of AF, I am free. And this is not the usual story. This is how I did it. Since then I have played more with diet as after curing my AF I became aware of reactive hypoglycemia. And have now got this out of the way too. But of course I have to stick to my diet. But I prefer it this way as all my health is back. I have cured more than just AF and don't have fibromyalgia or burning spots, no headaches, no tremors, no startle reaction, no seizures, no fainting. The only thing I have not cured is low blood pressure, but I can

live with that.

SOURCE: THE AFIB REPORT, April 2003

PEGGY MERRILL

My first brush with afib was in late '99 while working a grim, low-wage cashier job involving a lot of overtime and too few days off to recuperate. I was 57 years old, seriously overweight, had that year gone through a lot of stressful life changes, was eating poorly [whatever I could pick up in the convenience store I worked in], it was hot weather and I had no air conditioning, and I was surviving on coffee. I had a couple of short episodes that went away before I could get to a doctor, and of course when I did get to the doctor he found nothing wrong. Then I had one that did not go away, and ended up in the hospital for 3 days. I changed jobs after that, and worked more normal hours, dropped the coffee and ate better [more vegetables, less junk], and had no more afib until August 2000, when I was hospitalized again with another "just-won't-go-away" episode. This again was associated with caffeine [green tea this time, dozens of cups of it, trying to stay awake at work] and hot weather, compounded by lack of sleep. After that I dropped caffeine altogether, and got an air conditioner.

For the next several years I had short episodes occasionally, but they always went away by themselves, and in any case, I was getting turned off by hospital emergency rooms. I had learned a little about using computers by that time, and was researching better nutrition. I retired and moved back to Maine, and eventually got my own computer, and found Hans' site. Here I found there were a lot of people taking various drugs, and none of these drugs seemed to be curing their afib. They were still getting afib attacks, trading drug advice, going on different drugs, and still getting afib. Some of them were talking about, and some even resorting to, heart surgery. I couldn't blame them for doing this, because their afib had started small and gradually increased until it ruled their lives. I was afraid mine would do that too.

Worse yet, by no means all of those ablation patients had gotten rid of their afib either. Two of them had had near-death experiences, and I was pretty sure that the reason there were not more stories like that was because most ablations that went bad had resulted in death, and of course, we are not very likely to hear from those people. And then there were 2 people posting who claimed to have gotten rid of their afib by diet and supplements. These were Fran and Erling.

Well, I thought, if these 2 people so different from one another can do that, maybe I can too. Food choices are something I can control. So I changed to a mostly paleo diet, and sent away for some Carlson's magnesium glycinate. At first I still did get some short, mild afib episodes, but then I began seeing posts about low sodium V8 juice, 850 mg potassium per 8 oz. glass. I was having trouble consuming enough vegetables and fruits to get in 3-5 grams K a day, and this seemed like just what I needed, and sure enough it was. I haven't had any more afib from that day forth, and that was December 2003.

The Paleo Diet

The paleo diet is based on the premise that the human body thrives best on the diet of our hunter/gatherer forebears of 10,000 years ago, ie. before the introduction of agriculture. The proponents of the diet point out that the human genomic make-up is very slow to change and has not had a chance to adjust to the very major changes in diet that have occurred since the Stone Age.

The Stone Age hunter/gatherers consumed a diet based on fish and meat from wild animals, vegetables, berries, fruits and nuts. Grains and dairy products were not available. The paleo diet thus emphasizes the above food sources and excludes dairy products, grains, starchy vegetables, sugar and legumes, and of course, chemical food additives.

The paleo diet is described in detail in the book "The Paleo Diet" by Loren Cordain, PhD or at www.paleodiet.com

Concerning those few short, mild episodes, I think a lot of what paleo did for me was eliminate postprandial hypoglycemia. A paleo diet pretty much prohibits high glycemic load foods. Jackie and others had called my attention to the fact that a lot of my afib symptoms were the same symptoms as those of reactive hypoglycemia - shaky, lightheaded, cold sweat, panic - and sure enough, the minor episodes I got soon after converting to paleo lacked just those features. I wasn't sorry to see them go.

Also, I need to mention that those last episodes, mild though they were, appeared right after use of a seasoning containing MSG. I had never had an afib episode that I could tie to MSG before, but then I had never been without it for any period of time before either. For all I really know, they could have all had to do with MSG, in combination with stress, hypoglycemia, dehydration, electrolyte deficiency, caffeine, and any of the other myriad stressors of modern life.

Any paleo diet purist will point out that I ingest a lot of stuff that isn't paleo. The V8 certainly isn't, and neither are the supplements I take. I do eat a little cheese, too, though not the plasticized processed cheese. I cannot afford organic food, so I make do with what I can find in the local supermarket, cheapest first. I go out to eat sometimes, and on those occasions I commit excesses like baked potato and gravy, or bread on sandwiches. I cheat outrageously sometimes, too, particularly with chocolate baked goods.

Speaking of bread, gravy, and bakery goodies, if I hadn't gone to paleo I would also never have realized that I have a bad reaction to wheat. Since taking up the paleo diet my antacid consumption has gone way down, except when I eat anything with wheat in it. That will have me eating antacids for a good 12 hours and sometimes more.

Another good thing about the paleo diet is that I fit the classic profile for insulin resistance - fat, high blood pressure, relatively inactive, cholesterol a bit on the high side - and the paleo diet is good for insulin resistance. I hope to avoid type 2 diabetes this way, or at least to slow it down.

For those concerned about whether my afib is "really cured", I do not think I can expect to be cured of needing proper nutrition, any more than cars are cured of needing gasoline. I don't think I am going to ever again be just like I was in my 20's either. To use the same metaphor, old cars are never again just like they were when new.

I think afib is one of the long latency deficiency diseases, and that is why, in most people, it does not appear until a relatively 'older' age, and why it appears in the context of stress so often. I am still old, fat, and lame in the knees, but I don't have afib any more. If I can do this, you can too.

Protocol started: December 2002

Protocol Effectiveness: 3 episodes during 58 months

SOURCE: The AFIB Report, March 2000

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Here is a later post to the bb explaining things a little better, i hope.

http://www.afibbers.net/forum/read.php?f=6&i=4462&t=4291#reply_4462

Re: Antiarrhythmic drugs Post PVI

Author: PeggyM (---.usadatanet.net)

Date: 03-18-07 04:55

Jeannie, the most important thing i did to get rid of afib was to change to a paleo diet. Afib episodes became few and far between as soon as i did that, and when i added Mg glycinate to that diet the few episodes became very mild, hardly uncomfortable at all. Then i added in 2 glasses a day of low sodium v8, and the episodes ceased altogether. The taurine i added later, when i began having loose bowels from my usual dose of Mg glycinate.

Mg glycinate dosage is an individual matter, different for different people, according to your own body's unique requirements. If you have any kind of kidney trouble you should not supplement with magnesium. If your recent physicals have not caused your doctor to mention kidney trouble, your kidneys and bowel will just eliminate any amount your body finds un-necessary.

You can determine your bowel tolerance dose by starting with the smallest available tablet, and taking that once a day with a meal. [I use the Doctor's Best brand from Hans' vitamin store.] When you have been taking that small dose for

several days to a week without incident [loose bowels or any increase in afib], raise the dose to 2 tabs a day with meals. Observe for a few days, then if no problem increase to 3 tablets a day, either one with each meal or else 2 at one meal and one with another. Keep increasing the dose of Mg glycinate until you reach a dose that gives you diarrhea. Then drop the dose back down to the next lower one that did not give you diarrhea, and just keep taking that dose. Eventually you will need to reduce it again as your body's magnesium stores get filled up. Jackie has written a lot about this process, and her posts are still available in the archives.

About potassium, the amount to use depends on how much you get from food and drink. The total amount of potassium most people need to keep away afib is, by no coincidence, identical with our government's recommended minimum amount for adults, 4700 mg or 4.7 grams. This includes food, drink, and any supplements. This means finding out how much K [potassium] your daily diet provides, and then either eating more K containing foods, or supplementing, up to the gov't's RDA. You can find out how much K is provided by your daily diet by using the free nutrient calculator at:

www.fitday.com

and you can find that RDA at the best potassium info page i know about, contributed by our Florida friend Howie, at:

<http://lpi.oregonstate.edu/infocenter/minerals/potassium/index.html>

If you have any trouble navigating the fitday site, either George Newman or Sharon Glass will be very glad to help you with it. The great thing about fitday is it will tell you also if you are not eating enough of any other vitamins or minerals, so that you can increase your intake of foods containing that nutrient, or else supplement it.

When i first began supplementing potassium, i used Campbell's low sodium v8 juice, which at that time listed 900 mg elemental K per 8 oz portion. Since then the label dosage has declined to, i think, 830 mg K. I was drinking 2 glasses a day. After about 2 years it began giving me diarrhea, and i changed to potassium gluconate powder, NOW brand, from Hans' vitamin store. I use 2 level teaspoons a day unless i eat something sweet, and then i add another teaspoonful, dissolved in a big glass of water. These are measuring teaspoons, not the kind you stir coffee with.

The taurine i added about the time of Jackie's big taurine post, which is also available several places in the archives. I use 4 grams a day, in morning and evening doses. It tends to reduce the Mg runs, if you are having trouble with that. With me, it also seems to act as a mild antidepressant. It is great stuff and i do advise you to read up on it for yourself. If i have consumed something with MSG in it, i can often quiet the resultant ectopics by taking an extra 2 grams of taurine. I use Jarrow brand taurine 1000, from Hans' store. As with all supplements new to you, start small and work up, and discontinue if anything untoward ensues.

When i started paleo diet, i started taking Mg glycinate within the same month, and the afib i had been getting at least once a month quieted right down immediately, and the few episodes i did get were the shortest, mildest ones i had ever gotten. When i added the low sodium v8, [dec. 2003] they stopped altogether. Since then i have at times gotten careless about taking the supplements, and at times eaten things that were severely nonpaleo, and twice when i was doing both these stupid things at once, i have gone into an afib episode. But as long as i keep to what i know works, the afib boogies have had to go flap their leathery wings elsewhere. Let me tell you, i am not sorry about that at all."

GEORGE NEWMAN

Hans kindly asked me to contribute my story this month. First I'd like to say that I'm a bit new at this afib business and I'm not sure my success is long-lived enough to qualify as an example (and it is still a work in progress), however, I'm happy to contribute so that others can possibly learn from my experience. I can say that I'm sure I would not have the success I've had without the work of Hans, PC, Jackie, PeggyM, Fran and the many others who've come before me and generously shared their expertise and experience. For this I'm very grateful.

I'm a 49-year-old male vagal afibber. Like many on this site, I've been a life-long exerciser. I played American Football in college and then continued running until about 10 years ago, when I took up 4 miles of daily walking at a pace of about 11-12 minutes/mile. I found this kept me in sufficiently good condition to compete annually in a 13 1/3 mile race

up Pikes Peak (a 14,000 ft peak, the race gains 7,850 ft in elevation). I could finish within 20 minutes of the 4 hr 20 min median time. I've also had a mostly vegan diet for 15 years and my blood chemistry has been excellent since then. In my early 20's, I was diagnosed with "white-coat hypertension." So, I've routinely taken my own blood pressure with a stethoscope and cuff since.

This last summer, I was again training for the Pikes Peak race. I was climbing 14,000 ft peaks on the weekends here in my home state of Colorado. One Thursday morning, in early July, I woke up and decided to take my blood pressure. It was fine, however, my pulse "sounded" weird. I took my pulse rate. It was about 80. This was unusual for me as my resting pulse is normally in the low 50's (and I had done no activity). I put on an old heart rate monitor and started walking around. Going up the stairs, my pulse soared to 150. Normally it would be 80 or 90 doing this. I really wondered what was happening to me. Was I having a heart attack? So I drove myself to the ER. They put me on a monitor, but my pulse converted to NSR before they could get a printout. The doctor did a variety of tests, chest x-rays, asked me if I drank (no), etc. The doctor sent me home with a Holter and said he thought it might be atrial flutter. The one significant item out of these tests was a low serum potassium (K) value of 3.2 mmol/l (normal range is 3.5-5.2 mmol/l). They did give me a potassium pill at the ER.

The following Tuesday, I went to my GP. He said my Holter was normal, one nonspecific run of 10 seconds and an average of 24 PVC's and 2 PAC's per hour. He wasn't too concerned, started me on a baby aspirin/day and told me to schedule a treadmill test, and a 30-day event monitor test.

The event monitor/treadmill tests were scheduled for a month hence. In the meantime, nobody was too concerned about my condition. I also learned that for me, it wasn't an ER event. This was important as I've been self-employed for 18 years and carry only very high deductible medical insurance. My ER bill was \$2,500 and it would be very costly to keep paying for those visits. About two weeks after the 1st event, I had another one. It came on at 3 AM. This time, I put on my HR monitor and decided to watch it. I went ahead and went to the office and around noon I decided to see what would happen if I did a little exercise (I knew very little about my condition and did not even know that it was afib at this point). I found I could walk at a 15 min/mile pace and my HR would go to 140. When I slowed down, my HR would drop, so I wasn't too concerned. At one point, I had to sprint across a street to avoid traffic. My HR monitor shot up to 233 (I'm still not sure if this was real, as readings like this can also happen if one of the leads loses contact). I was a little concerned, however, after a couple of minutes, I had converted to NSR. I called my GP and told him what I had done. He said that I had acted properly.

I had two additional episodes before my treadmill test. They both came on about 3 AM and I converted them with exercise. When I took my treadmill test, it showed no underlying disease, and it did not put me into afib. I went quite a bit longer than my expected time. During the test, I told the cardiologist that my events came on at around 3 AM and I had been able to convert them to NSR with exercise. I asked, "How common is this?" He told me that I was the first patient he'd seen who could do this. Wow, I thought, I'm unique. I went home wearing an event monitor. Sure enough, I had another event. I even took a reading while in afib and exercising, then converted it and took another reading. These readings showed that I did have atrial fibrillation. Of course the HR that was reported was the one while I was exercising, not resting. My GP suggested a consultation with the cardiologist, but I hadn't scheduled one yet.

I went ahead and did my Pikes Peak race, with no problems. In the meantime, I'd done some Internet searching and found a couple of papers that reference vagal afib. The early morning initiation of afib and return to NSR with activity described in those papers fit my situation. I now knew I wasn't a solitary case. I also knew I wasn't going back to the cardio who had done my treadmill test! Three days after the race, I had another event. The only thing that was different is that I didn't convert on this one.

I asked around and got referrals to a cardiologist and an electrophysiologist. It turns out they were partners. I didn't know any different, so I went to see the cardio. By the time I had an appointment, I'd found www.afibbers.org and read Hans' book. Feeling well armed, I went to my first meeting and talked to the cardio about my 3 AM events and (up until now) conversion with exercise. I said I thought I was vagal. He said, "I don't believe in that." I was a bit shocked. I offered to bring in some papers to discuss with him. He said, "don't bother, I won't read them." He also said, "I'm sure I could find some papers in your field that you wouldn't agree with." Then he told me that digoxin was his favorite drug. I was really worried then. He ordered an echocardiogram and scheduled another appointment. He started me on Coumadin. My echo came back fine, but after 6 weeks in persistent afib my ejection fraction had dropped some. I could tell this in daily activities, as I got winded more easily. I was such a pain that he referred me to his partner the EP. I told

the EP my story (3 AM and exercise conversion). He said, "you're obviously vagal, and there are a whole category of drugs that are contraindicated for you. We will not prescribe them." "Wonderful, finally somebody who has a clue!" I thought to myself. This guy sent me home with a Holter, so he could see what my average HR was, out of rhythm.

During the weeks this was happening, I read more and also had a few tests ordered by my GP and my integrative MD. These included an EXATEST for cellular levels of Mg (and other minerals), a Comprehensive Digestive Stool Analysis (CDSA) test, and a C-Reactive Protein (CRP) test. The EXATEST showed that I had low-normal magnesium levels, the CDSA, a very small amount of Candida and everything else looked good; and the CRP was very low. So, there was nothing obvious to treat. I did add some magnesium to my supplement plan.

The results of my Holter were that my average rate was ~80 when out of rhythm. The EP suggested that the best course of action was not to convert me, because of the risks of treating me with rhythm drugs if I converted and the fact that I was doing OK out of rhythm. We had already talked about this, so I had done my research. I'd read Hans' book and looked at all the reports of those who had managed to stay in rhythm with supplements. I also learned about flecainide on demand. So, I proposed my plan "B." It was 1) to convert me, 2) I would try to stay in rhythm with supplements and trigger avoidance, and 3) I would take flecainide on demand if 1 and 2 didn't work. He accepted my plan. He gave me a prescription for flecainide and at first thought he'd give me a 300 mg dose to see if I converted. Then he came back and said that the studies showed that this was only effective if given right after going out of rhythm. I'd been out of rhythm for 2 ½ months at this time. He told me to schedule a cardioversion in a couple of weeks. I got the prescription and went home. I looked at the pills and thought, "Well, I've already been cleared to take these, what do I have to lose?" I took a 300 mg dose and converted in about 18 hours. Needless to say, I was ecstatic after being out of rhythm for so long. I faxed a note to the EP who asked me to come in for an EKG to make sure I was doing OK on the flecainide. This turned out fine.

I went on my supplement program big time, determined to stay in rhythm (the conversion took me by surprise). This has worked well for 5 months. I did have one event at exactly 4 weeks. I determined that eating a bunch of junk, late was a trigger. I then thought back to my other events in the summer and could also remember similar triggers. At this point I decided to not eat after 7 PM. I wasn't sure if the trigger was GERD, hypoglycemia or a vagal response to eating, but early eating will help all of these.

I also wanted a finer gauge of how I was doing than "either I'm in afib", or "I'm not". To this end, I purchased a Polar S810 HR monitor, and the FreezeFramer HR monitor. They both accomplish the same thing, namely a beat to beat recording of your heart rate. The Polar records, and then the data is downloaded to your computer. The FreezeFramer has a finger cuff (now an ear cuff, too), which you wear while hooked up to your computer. You can watch the display in real time. Both devices suffer from artifacts and noise if you move around too much. I've taken to monitoring myself while meditating, as I am most still then. In recent testing with an EKG device[1], I've determined that I can differentiate PAC's from PVC ectopic beats. The PAC's have an anomalously fast beat or fast immediately followed by an anomalously slow beat. The PVC's have an anomalously slow beat[2]. Both the Polar and the FreezeFramer have the same PAC/PVC response. In testing the Polar with my EKG, I found that several anomalies that I thought were ½ period artifacts turned out to be real PVC's per the EKG. If you use a FreezeFramer, you need to make sure that the Enable Artifact Detection box is unchecked (this defeats the purpose), as well as uncheck the Enable HRT Filter box. In counting ectopics in a 20-minute period (the length of most meditations), I can see if I'm doing well with my program. My initial July Holter showed 24 PVC's and 2 PAC's per hour. Generally, I'm way below that now. My readings have ranged from 0 to 20 per hour, but most range in the 3 to 10 range. There is data to show that ectopics increase to 5 or 6 per minute right before the initiation of afib. I actually feel very few of my ectopics; in fact, I feel them only rarely and then only when I'm sitting quietly with a monitor on and my attention on my throat. The monitors pick up several orders of magnitude more ectopics than I feel.

I also wanted to address the possibility that my trigger was a hypoglycemia event. In addition, I had added about 10 pounds during my 2½-month afib event, and my blood pressure had crept up to 130/85. I wanted to address these issues also. I purchased a Bayer Ascencia home blood glucose monitor. It was the most accurate I could find. Many home models are very inaccurate (according to their own specs – OK for a diabetic, but not for my purposes). What I found was that hypoglycemia wasn't my problem, but hyperglycemia was. Hans' first book had also referenced that vagal afibbers might have a "flat" blood glucose response. This was not my case. I found that high glycemic index (GI) carbs could spike my blood sugar. Also the addition of fat, even "good" fat would keep my blood glucose high on a fasting test and so would a high GI meal. In a literature search, I found that this is because circulating lipids impair

insulin's ability to work[4-7]. For me, I could get a 112 mg/d (6.2 mmol/l) reading on a fasting test by eating solely two helpings of ice cream for dinner, however, this would drop to the mid 80's (~4.7 mmol/l) the next day on a fasting test following a day of eating my no added fat, whole food vegan diet. I also found that drinking 1 liter of a whole fruit drink, that I make by grinding up whole apples, oranges and other fruits hardly moves my blood sugar at all.

After two weeks of paying attention to keeping my blood sugar even, I'd dropped the 10 pounds I'd added, and my fasting glucose and my blood pressure normalized. One detriment to this approach is the lack of essential fatty acids (EFA's) in the diet. There has been discussion of the fact that people don't convert fat from flax seeds to EFA's; however, there are some interesting abstracts on one of Hans' other sites. One reports the non- conversion of the flax-type fatty acid (percent of dietary fat not stated). However the other shows that people do convert, if their dietary fat intake is limited to 20% of calories (see the first two abstracts listed at www.oilofpisces.com/weightcontrol.html).

Now some people may think "this guy goes nuts buying stuff to measure himself." You would probably be correct. However, you must remember that I have very high deductible insurance and if I can save one ER visit, I've paid out my monitoring investment many times.

Here is my supplement program:

Morning supplements, normally around 7 AM, with breakfast

2 mg Copper

1000 mg Taurine

800 mg NOW brand Trace minerals

200 mcg Selenium

B-50 B-complex

500 mg Vitamin C

400 IU Vitamin E

1000 mg Acetyl L-Carnitine

500 mg L-Tyrosine

500 mg L-Lysine

Mg & K

400 mg Magnesium Glycinate

400 mg Magnesium Maleate (will switch to only Glycinate when done with this bottle)

1.5 grams Now Brand KCl powder

Evening, normally around 6 PM, with dinner

Repeat the Mg & K

I also take CANDEX per directions to rid myself of any Candida, as per Jackie's suggestion.

My best estimate is that the Mg, K, Taurine and Acetyl L-Carnitine are the most active with respect to afib. Also the B6 helps the absorption of magnesium. If you decide to go this route, start slowly and increase your dosages. Also, make sure your kidneys are OK, so have your BUN and creatinine levels checked. PeggyM says that when your stores of Mg are full, your bowel tolerance for Mg will decrease. At this point, just reduce your dosage till you don't have a problem maintaining your Mg levels.

I don't know that I've optimized this. At some point, I plan to repeat the EXATEST and see how I'm doing bringing the Mg levels up in my cells, or as PeggyM suggests, I can wait till I have a bowel tolerance problem and cut back my dosage then. All of these supplements have not helped my digestion, however, the addition of Betaine HCl and dietary enzymes seems to help this. I may add a pre-bedtime dose of K, as my morning ectopic samples are much lower if I do. However, I think that the chlorine in the KCl negatively affects my blood pressure. I may substitute the potassium gluconate and see if this will still lower my ectopics while not affecting my blood pressure.

My digestive system doesn't really like all those fillers and capsules. However, if I can back off at all, my ectopic rate is right back up again. At some point, I'd like to see if I can accomplish the addition of these nutrients mostly within the confines of my vegan diet. However, since what I'm doing has kept me in NSR for 4 months, I'm loath to change it too much. One reason I chose the supplement route to begin with is that a dietary approach takes a lot more analysis and organization (perhaps not for the paleo or blood-type diet folks, but it does with my vegan plan and, otherwise, I do very well as a vegan with a lot more energy than my peers). Also, I'm very active, leading a youth group of 14- to 20-

year-olds camping on a regular basis. It is much easier just to pack a few supplements.

As an aside, several months ago a friend also had his first two afib episodes. I suggested that he up his intake of Mg and K. He did this and now makes his own version of the PAC-Tamer. He has had no more afib episodes since he started the Mg and K.

Thanks to all for suffering through this long-winded story and I hope some of you find it useful.

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Postscript

I sent my story to Hans before going on a snow cave outing with my youth group. I snow shod into our camp for 3 ½ hours carrying a 70-pound (32 kg) pack, breaking trail much of the time in >3 feet (1 meter) of snow. I then worked for another 4 ½ hours constructing a snow cave. Although I wasn't wearing a heart rate monitor, I can tell you that I was working at maximum exertion for those 8 hours. Also, the elevation was 10,500 ft (3,200 meters).

I crawled into my sleeping bag around 8 PM. At about midnight, I went into afib. I brought my flecainide along, so I decided to take a 300 mg dose (my conversion prescription). The instructions given on this board are to take it crushed in warm water as soon as possible after the start of the afib. Well, my water bottle had ice in it, as the cave temperature was below freezing (better than the -5 deg. F (-21 deg. C) outside). So, I chewed the three tablets and washed them down with ice water. Happily, I converted in less than 30 minutes. This was much better than my first two conversions on flecainide, 18 and 22 hours, and even exercise conversions I'd had. These ranged from 7 to 10 hours.

So, I've broken my four-month spell of not having to use my flecainide on demand as backup. However, I'm not unhappy – the plan I presented to my EP is still working. On this trip, I certainly stressed my system and probably messed up my electrolytes as well as being dehydrated from the exertion and altitude. The flecainide worked much more quickly than before. I would attribute this to all of the supplements I've taken. As I mentioned, this is a "work-in-progress", and I obviously need to fine tune my program if I want to continue exerting myself like this (some would observe that this would not be a bright move).

In addition, my blood glucose observation program has yielded an 18-pound weight loss in 8 weeks (usually with much more modest exercise than this latest outing). All in all, I'm very pleased with my progress. NSR to all readers!

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Author: [GeorgeN](mailto:---.hlrn.qwest.net) (---.hlrn.qwest.net)
Date: 11-19-07 17:40

Rereading my story, my protocol comes across as more complicated than it is (hopefully this can get posted below it when compiled). I take:

3 grams/day of potassium as citrate
0.8 grams/day of magnesium as glycinate
4 grams/day of taurine powder

I divide the above and take them morning and evening mostly around meals, but not always.

I continue to exercise (on the excessive side of moderate) and monitor myself with my Polar monitor. My PAC levels

are generally 0-2/hour and PVC levels are 0-20/hour. I give blood regularly without any side effects.

At least once a year I get my serum potassium levels as well as my kidney function (BUN & creatinine) tested.

In 36 months, I've had 4 afib episodes. One was within a month of starting my protocol, the others were when I stopped taking one or more of the supplements.

Protocol started: December, 2004

Protocol Effectiveness: 4 episodes during 34 months

Source: The AFIB Report, April 2005

DAVID PRICE

http://www.afibbers.net/forum/read.php?f=6&i=16751&t=16644#reply_16751

"Re: The List, 3 months - Re: Zyflamend and GERD-Related AF

Author: David Price. (---.leed.cable.ntl.com)

Date: 10-20-07 03:12

Here's the capsule version of my history. First LAF episode in 1999 - only 2 years ago diagnosed with hypertrophic cardiomyopathy, which has strong link to AF, and could be described as the underlying cause. However, I consider my progression, triggers, and treatment options to be the same as everyone else here - in other words, I don't think my circumstances render my experiences invalid. I have had a hiatal hernia for 12 years.

Drug regime: 300 mg FLecainide; lipitor; nexium

Supplements: Taurine; CoQ10; Fish Oil; B vits +Folic Acid; Nattokinase:Saw Palmetto; Mg Glycinate (about 800mg) and 2 zyflamend capsules per day. I also (when I can get it and make it) liquidise ginger root and take a teaspoon twice a day (Walt Stoll tip for stomach acid).

Of these I'd been taking all bar Zyflamend for over a year, but still getting episodes, so it's reasonable to link temporary cessation to it. When inflammation was/is bad I could trigger an episode simply by stretching, or 'scrunching' in bed. So postural and of course burping are invariably causes. But I could always link it to that 'acidic' feeling, and once confirmed this through ph testing.

Since Zyflamend, burping has almost disappeared and, as I said in the original post, I've been occasionally over-indulging in known GERD triggers, but managed to avoid any triggers. I also have begun to lie on left side occasionally.

I should stress that I've been here before. I once went 2 years AF-free, thanks to PPIs, and before that FLec worked for a while. So I half expect the body to find a way to create inflammation even with Zyflamend, and for the AF to return. But I figure that each 6 months that passes, means another 6 months more expertise for the London EPs who have offered me the ablation.

Finally, I have absolutely no idea why the ingredients should be so effective - they seem innocuous enough. All that I know is that it works well, for me at least, and may be worth a try."

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And here is an excerpt from an earlier post to that same thread:

Zyflamend and GERD-Related AF

Author: David Price. (---.leed.cable.ntl.com)

Date: 10-18-07 13:52

As of today, it's now been 3 months since my last episode. Do I now qualify for The List? During this time I've lost my father, taken two long haul trips (CA and China) and taken more wine than I should have done. Last week in Beijing I was even drinking beer and eating lots of bread (I'm no fan of Chinese food)- two things that quite frequently put me in AF. So, I've really been pushing my luck lately.

Anyway the point of writing is just to say that the only thing I have done differently is take Zyflamend supplement twice a day. It's normally taken, I believe, by people with arthritic problems, but I figured it might help with my inflammation and so far it's working great.

So, I'd invite any LAFs out there who are experiencing GERD or other inflammation to give it a try. I'd be fascinated to see if it's just me - a word of warning though: it didn't really work for me until after about 3 weeks of taking it. I put this down to getting the inflammation under control which takes time I guess, and now I feel like it's just maintaining a nice balance.

I'm grateful that I've found a way to reduce burping and GERD and I hope it might lead to a slightly larger experimental group!"

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And yet another excerpt:

Re: Zyflamend and GERD-Related AF
Author: David Price. (---.leed.cable.ntl.com)
Date: 10-20-07 03:17

Episodes averaged 3-4 per month. Used to be severe (sweating, breathlessness high BPM, but with time became much less so. I answered the other questions in Peggy's reply.

I eat a better (i.e. less acidic) diet but I'm far from vigilant (I enjoy the occasional fried breakfast and fries) but generally my diet is OK. I certainly don't see my current success as an excuse to abandon all the other progress I've made over the years. It's just nice not to be constantly on the look out."

Start date: July 2007

Effectiveness: No episodes since July 18th

SHARON GLASS

Female - 66 years old
Today's Date 11/09/07
Diagnosed with LAF Sept. 2005

It is my belief that I had afib episodes years before diagnosis that I passed off as just feeling bad. Looking back in retrospect I know it was poor diet and extreme job stress and have probably had afib longer than I realize. Since diagnosis I have had 5 episodes with duration of 13 minutes to 6 hours. Last afib episode Oct. 13 @ 6 hours, self converted, no sign of afib since.

I have always felt that my episodes were directly connected to poor diet, extreme job & personal stress over many years and gluten. I now believe my afib may be connected to some hormone issues as my episodes always happen in the same 10 day cycle of the month.

My first goal was to determine my nutrient and mineral intake on a daily basis so I did an extensive project to see where my body was not balanced. I believe my body is balanced in nutrients and minerals now as my energy level never varies from early morning until bedtime...unless...it is during the ten day hormone cycle, then I lose energy. I am

now researching hormone issues.

Nutrient and Mineral Project: Started June 2006 after an afib episode - Personal twenty-day log on my intake of food and drink. I recorded daily on www.fitday.com. I also recorded on the diary provided my feelings of energy etc. each day. This was invaluable information later. This program determined the nutrients derived from the recorded foods and showed me the supplements and nutrients I was lacking in foods.

Note: I am very aware that the RDA requirements are set low and took that into consideration. I discovered that I was getting some nutrients in excess through food and decided not to supplement them. I made the decision to take individual supplements for those I was lacking instead of a multi.

Goal: Determine the nutrients that I was receiving or lacking in my food intake, so I could make a knowledgeable decision regarding supplements.

Note: I did my best to eat good, nutritious food with extra protein, veggies of all types especially green, limited intake of grains, low sodium V-8 juice for potassium. I will say in looking back that I did not eat as well as I do now as I discovered I didn't know as much about good foods as I thought. I had a lot to learn and I am still learning. I added the 20 days of calories and divided by 20 which gave average calories per day. I feel my calorie intake was low as it was around 1,000-1200 per day. However, I was not consciously watching calories and intake was probably low because I am not a large portion eater. The low calories did surprise me, as I always felt full after eating. This accounted for a great loss in weight and also made me realize that I would have to make changes to stop my rapid weight loss and retain it at a desired level. (I went from a size 12 to a size 6 in a one year period.)

Considerations: I have sense added more calories by eating a lot of good healthy mini-meals throughout the day, while still avoiding trigger foods. I have found a gluten free bread and other gluten free foods which add more calories and fiber (which is very important to the digestive system.) I have still only gained a couple of pounds, but I am not as concerned as I was about it.

Conclusion: I believe this was a positive experience, although at times a daunting task. After I completed the project I was able to make an educated decision about adding particular supplements that I lacked in my daily foods. I would recommend others consider doing a project like this. It is a real personal eye-opener regarding food. It also gave me much concern for those who don't have a clue how little nutrition benefits they are getting. I believe this lack of proper food nutrients will eventually lead to a very sick society with many illnesses that may not be able to be reversed, especially in the younger generation that has been raised on fast foods and empty foods.

I have listed below the supplements I am currently taking. I chose to not take a multi vitamin as I am getting the right amount of minerals and vitamins through some of my food. I only take afib supplements and those I found I was lacking in through the study. I have explained the other supplements I am taking and why.

Q-Absorb Co-Q10 – 100 mg @ 1 per day

D - "Source Natural" Vitamin. D, 1,000 IU 2 x a day = 2,000 IU per day

E - "NOW" Gamma E Complex @ 400 IU 1x day

C - "Country Life" Vitamin C with Rose Hips, 1000 mg x 2 per day = 2,000 Mg

NOTE: If I am feeling bad I do increase my Vitamin C up to 4,000 mg per day

B's - Super B Complex by "Wellness Resources" includes all of the "B's" RDA requirements. One per day.

B-12 Sublingual one per day under tongue.

Zinc – "Natural Factors", Chelate 25 mg @ 1 per day

Potassium Gluconate – "NOW Brand" 540 mg, powder, 3 tsp per day in water or juice. If using juice, I reduce powder to 1/2 tsp.

Taurine - "NOW Brand" 500 mg X 2 a day- 3 times a day if I have a stressful day or event. (This supplement makes me very relaxed and I sleep like a baby so I take it at night.) It does not interfere with any daily activity if I have to take it during the day and there is no hang-over from taking at night. Great supplement.

RXOmega-3 Factors EPA 400 mg, DHA 200 Mg x 2 a day "Michael Murray's Brand"

Glucosamine Sulfate 2 @ 750 mg – (for knees)

"Cran Clearance" Cranberry concentrate pill form - 680 mg @ 1 per day - for a healthy urinary tract.

NOTE: With this regime of minerals and supplements, diet changes and avoiding stress as much as possible I went for 1 1/2 years with no sign of afib. On Oct. 13th I had a six hour episode which self converted. This episode happened during a stressful event and also during the same 10 day cycle of past afib episodes.

I am now studying and considering the supplement...Ribose.

DENNIS

http://www.afibbers.net/forum/read.php?f=6&i=14002&t=13977#reply_14002

"Re: Sotalol

Author: Dennis (---.cable.mindspring.com)

Date: 09-03-07 10:40

I had an af episode after being on sotalol 80mg twice a day for 6 months. (During these 6 months I experienced daily bouts of skipped beats usually in the evening after dinner and sometimes after stressful workplace situations.) The EP raised it to 120 mg twice a day. This dosage affected all areas of my life negatively.

I learned here on this BB that some people were able to eliminate their meds through lifestyle changes, dietary modifications and adding daily supplements. I pushed my EP to give his blessing to dosage reduction, because I couldn't function at work, and he did. The first few reductions were done with his consent and the last couple of reductions I did on my own until I was down to 40 MG a day. The EP said this was not a therapeutic dose and since I was doing ok I might as well discontinue it totally. My present plan with the EP is that I will use sotalol a PIP. If there is no conversion within 24 hrs or so I contact him and be electrocardioverted within 48 hrs of onset.

After about 6 months of no meds I had one af episode after a 30 minute run. We implemented the plan and I was back to NSR with 48 hrs. I supplement daily with moderate dosages Pot, Mag and Taurine and I am much more aware of my water intake. I now rarely have those skipped beats.

I am sure that without the knowledge I gained from this BB I would not have been able to resist the MDs and would be put on ever increasing amounts of sotalol.

Hope this summary helps.

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In that same thread, several people asked Dennis for more details of his anti-afib program. Here are his replies:

"In a nutshell;

1. No alcohol (didn't drink much but apparently 2/3 pints Fri & Sat became too much for me. I've had no alcohol for a year and a half)
 2. drink lots of water (I like to use water bottle instead a glass -I can better keep track of consumption)
 3. Pot, Mag and Taurine supplementation (modest amount once daily)
 4. Multivitamin and B complex daily
 5. I try to stay away from the known unhealthy foods. I can cheat without problem but several days of cheating or one meal where I overeat or if I eat too fast it will cause skipped beats. (to me skipped beats feel like af is trying to start up)
 6. be mindful of when experiencing skipped beats (usually when I'm sitting and eating) and get up and walk and stretch until the skipping stops or becomes less frequent.
 7. smaller frequent meals rather than fewer large meals seem to also help.
- A dense homemade salad with a protein is very satisfying and somehow it doesn't bring a craving for sweets which I could easily eat too much of."

NOW potassium gluconate- 1tsp(540mg) daily

DOCTORS BEST magnesium 200mg

JARROW FORMULAS Taurine 1000mg

All of the above from Han's web site

GNC mega man Multivitamin and GNC B-Complex 50.

I also have hard copies of the foods that contain the most mag and pot at home and at work and try to select them when I choose the menu.

=====
Date: 10-11-07 19:02

Started afibbing about an 2 hours ago!

I have able to cheat on my diet without consequences in the past. The last few weeks have had daily and sometimes twice daily pastry items. Also have gotten off the strictly salad and protein menu and on to the every other day chicken outlet parm hero menu.

I have been subconsciously aware that my stomach hasn't felt right for the last couple of weeks or so and the last couple of days have felt some heartburn. I had been heartburn free for months and kind of just forgot about it(I have successfully treated GERD). I guess I thought it was something I had overcome. It kind of snuck up on me. I wasn't really conscious of the heart burn until yesterday and when I thought about I realized that I have been feeling this way for a few weeks now.

So I decided to treat it starting today and took a prilosec this am. I was fine all day and after dinner sitting on the couch I felt the irregular heart beats. Stood up and stretched -however it didn't help this time.

I do not take medication (was on sotalol for one year - up to 120mg BID) however I'll take sotalol this PM and again tomorrow AM and If still in AF I'll notify my EP. Hopefully he'll electrocardiovert me within 48 hours if there is no spontaneous conversion. Anyway, thats the plan. I'll keep the BB informed.

AF is humbling! I hope I remember this lesson!"

In the interest of we all learn a little, at least I do, from the experiences of others with this condition I provide this follow up to my post of 10-11-07. I'll try to make this short.

Thursday 10-11-07 went into af. Tried to arrange an electrocardioversion on Friday 10-12 without result. Was talked into going to the ER, to get admitted, and someone would do a conversion on Saturday. It did not happen (apparently will never happen on a weekend) and would not happen until Monday. It was thought that as long as I was in the hospital anyway why not change medication from Sotalol to Flecainide. The former tends to prevent af and the latter tends to terminate them. Since Flec is pro arrhythmic it is not a bad idea to be monitored when you first take it. A couple of hours after the second dose, 60 hrs after starting af, I converted. I left the hosp on flec 100mg 2x & Metoprolol 1x daily.

If bowel movement information shocks you do not read any further - go to the next post.

Interesting to note that every time I have been hospitalized for this condition I have been given K supplements due to low levels. When this attack began I doubled up on my supplementation on Friday. I took 2gms K, 400 mgs mag, 2 gms taurine half in the AM and half in the PM. On Saturday morning before I went to the hosp I took the AM supplements. I had blood drawn upon admission and after that I had a loose bowel movement. After the BM and about 12 hrs after the first blood was drawn they drew more blood. Subsequently the nurse asked if I have diarrhea because

my K level went from 4.5 upon admission to 3.3. This drop in potassium occurred within about 12 hours while I was on bed rest and eating well (eating hospital food). I guess it could only have been the BM. I mention this here because I was having stomach issues with many loose BM's for a few weeks prior to going into af. Maybe my regular supplementation was making up what I lost through the BM's in the weeks prior to AF. I don't remember how many BM's I had on the day of the attack. It could have been more than one and since I take my supplements before bed I was not able to make up for the lost minerals before the af struck.

I am somewhat shy and it would it not occur to me in a million years that I would write about my bowel movements on a public forum. Someone please take something useful from this information."

Start date: April '07?

Effectiveness: 1 episode in 6 months, subsequent to dietary indiscretion

LEE

http://www.afibbers.net/forum/read.php?f=6&i=17358&t=17241#reply_17358

Re: AF and Chest Pain/symptoms

Author: Lee (---.dyn.optonline.net)

Date: 10-29-07 20:28

If GERD is one of your symptoms, the comments below might be helpful. Following the guidelines below has allowed me to go 22 months with only a single three-minute episode of afib and to have a dramatic decrease in ectopic heartbeats.

It appears (supported by the case studies below) that a certain percentage of those who suffer from Afib have a GERD (acid reflux) problem which acts as a very significant trigger. In my case the GERD symptoms were not the usual heartburn but instead a slight cough and hoarseness after meals and at times a hollow feeling in my chest.

Acid reflux or GERD tends to be worse if one lies flat, worse after a meal and there are certain triggers which differ person to person.

The fairly standard treatment of GERD outlined below has pretty much given me my life back. I even have returned to the very occasional evening drink.

1. Don't lie down after a meal particularly after a large one. Try to have only a light dinner and wait three hours before you lie down flat or go to sleep.
2. Elevate the head of the bed 6-8 inches, either by blocks under the legs at the head of the bed or by purchasing online a simple GERD wedge, which acts to keep your chest higher than your stomach. Merely placing blocks or books under you mattress will not work well enough nor will just using a large pillow, as these just tend to elevate your head. (This step has been very important for me.)
3. Don't exercise after a meal and try not to bend over from the waist after eating (bend your knees).
4. Consider avoiding chocolate, alcohol, caffeine, tomatoes, nicotine and anything else which seems to cause GERD symptoms or trigger ectopic heart beats.
5. Chewing gum after a meal may relieve acid reflux as it promotes secretion of saliva, which neutralizes acid and promotes digestion.
6. I also take an anti GERD medication. These fall into three broad categories, all available over the counter. (Taking meds should first be discussed with your physician. You might consider showing him or her the abstracts of the included articles particularly the recent article from Stanford.)

The available meds are antacids such as Maalox, H2 Blockers such as Pepcid AC and PPIs (proton pump inhibitors) such as Prilosec. I take a daily PPI, one half hour before breakfast.

I find that the unfortunate proof of this connection for me is that if I try to stop the PPIs or lie flat or go to sleep soon

after a large meal, the ectopic beats return. I don't like taking medication and keep looking for more natural ways to treat the GERD. (I am currently looking at probiotics, natto, and more of a vegetarian diet with less gluten) I am also considering the (very unnatural) idea of an anti-reflux surgical procedure.

I think I would be considered a vagal afibber, as my baseline heart rate is quite slow (48) and almost all of my AF and ectopics have been at night. For me, lessening the nighttime ectopics has also included sleeping more on my right side than my left and for some reason keeping my arms by my side rather than over my head. I also find that the course of events for me (when I have palpitations) is to wake during the night and immediately after waking have the onset of ectopics. I find if I take several breaths, accentuating the inhalation or sometimes taking a deep breath and holding it, I can abort or stop the ectopics. I think this works because breathing in accentuates your adrenergic system and my problem seems to be too much vagal tone. particularly at night. (The adrenergic system balances the vagal response.)

There are other participants in this board who are finding that treating the GERD lessens the Afib. One is a strong proponent of adding Natto to the diet which is a fermented soy product found in Asian stores and another has had an ant-reflux surgical procedure (a Nissan Fundoplasty) and is much improved following his surgery.

Please find abstracts of the three medical literature articles below:

Potential relationship between gastroesophageal reflux disease and atrial arrhythmias.

-1. Gerson LB, Friday K, Triadafilopoulos G.

Division of Gastroenterology, Stanford University School of Medicine, Stanford, CA 94605-5202, USA.

lgerson@stanford.edu

A potential reduction in symptoms related to atrial fibrillation after treatment of gastroesophageal reflux disease symptoms with proton pump inhibitor therapy has been previously described. However, illustration of this relationship by combined 24-hour pH and ambulatory Holter monitoring has not been performed. We report 3 patients with symptoms of both palpitations and reflux who underwent simultaneous Holter and 24-hour ambulatory pH monitoring off of antireflux therapy. All of the patients reported a reduction in arrhythmia symptoms on proton pump inhibitor therapy. The findings from this preliminary series suggest a potential relationship between gastroesophageal reflux disease and atrial arrhythmias that might improve with antireflux therapy. Patients with documentation of both atrial arrhythmias and reflux should have a trial of aggressive acid suppressive therapy To further confirm this relationship, larger prospective studies are needed to assess whether maximal acid suppression improves arrhythmias. PMID: 17016140 [PubMed - in process]

[Gastroesophageal acid reflux as a causative factor of paroxysmal atrial fibrillation]

[Article in Polish]

-1. Budzynski J, Klopocka M, Pulkowski G, Swiatkowski M.

Klinika Gastroenterologii, Akademia Medyczna im. L. Rydygiera, Bydgoszcz.

We present a case of a patient with very frequent episodes of paroxysmal atrial fibrillation (AF) who, besides hypertension and well-controlled post-amiodarone thyreotoxicosis, had no other potential causes of AF. Because of symptoms of gastroesophageal acid reflux, the patient was treated with omeprazole which significantly reduced the frequency of AF episodes. Next, the patient underwent anti-reflux surgery and has now only sporadic recurrences of AF. Our observations suggest that gastroesophageal acid reflux may be a triggering factor of AF.

PMID: 15815780 [PubMed - indexed for MEDLINE]

Reflux esophagitis in the pathogenesis of paroxysmal atrial fibrillation: results of a pilot study.

-1. Weigl M, Gschwantler M, Gatterer E, Finsterer J, Stollberger C.

Department of Medicine, Krankenanstalt Rudolfstiftung, Vienna, Austria.

BACKGROUND: We sought to assess whether proton pump inhibitor (PPI) therapy of gastroesophageal reflux disease (GERD) in patients with lone paroxysmal atrial fibrillation (PAF) leads to a reduction of PAF-related symptoms.

METHODS: The records of patients with reflux esophagitis were screened for the diagnosis of lone PAF. All patients with reflux esophagitis and lone PAF were invited for a follow-up visit, at which PAF- and GERD-related symptoms, medication, and electrocardiogram were recorded. RESULTS: Among 89 patients, 18 (6 women, aged 39-69 years) had lone PAF. Decrease or disappearance of at least one PAF-related symptom occurred in 14 of 18 patients (78%) after PPI therapy. In two of the remaining four patients, GERD-related symptoms persisted. Antiarrhythmic drugs were discontinued in five patients, and none had to be increased in dosage or newly prescribed. The electrocardiogram showed sinus rhythm in all patients. CONCLUSION: In lone PAF, GERD should be investigated as a potential

pathogenetic mechanism. PPI therapy reduces not only GERD-related but also PAF-related symptoms.
PMID: 14632362 [PubMed - indexed for MEDLINE]"

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Date: 10-30-07 20:03

In answer to the question which comes first the AF or the GERD, I also noticed the GERD only after my first episode of AF and interestingly similar is that the AF and the GERD all came after several trips to very rural parts of Indonesia, taking prolonged courses of anti-malarial meds, periods of fairly high stress and a GI tract that never quite seemed the same after the trips.

I saw the first episode of AF as the result of the perfect storm (prolonged antibiotics, stress, chronic GI problems, 10 years of endurance athletics). The AF, as it does, left a small irritated focus (I never had ectopics before the first episode of AF). The GERD combined with my low pulse became the main trigger for both the ectopics and the AF. I do think the other triggers I now have, such as wine, work through the GERD mechanism, not directly on the heart as a toxin.

My guess is also that somehow the hypersecretion of acid and the bodies response to trying and neutralize acid by excretion of cations and perhaps the mechanism of the PPIs (proton pump inhibitors) in decreasing this excretion and perhaps some role of the disturbed GI tract's flora (or lack of proper flora) are all involved in this tightly related GI tract?Atrium connection.

Bottom line for me though is that the anti GERD measures work for me and others and the regular probiotics I have been taking seem to be returning my lower GI tract to normal."

Start date: 22 months before date of post

Effectiveness: one 3-minute episode at the end of that 22 months

ROB BREW

http://www.afibbers.net/forum/read.php?f=6&i=15468&t=15468#reply_15468

Finally 3 months afib free without heart drugs
Author: Rob Brew (---.vc.shawcable.net)
Date: 10-01-07 21:03

I said I would post this when it happened. I had a run of 73 days without afib a short time ago but it blew out on day 80 from June 18th to 30th.

Total afib hours for six mths of Apr/06-Sep/06 = 433 hrs, afib every month.

Total afib hrs next six mths of Oct/06-Mar/07 = 534 hrs, afib every month.

Total afib hrs next six mths of Apr/07-Sep/07 = 67 hrs, five mths 0 afib.

In Aug/06 I was dumb enough to post on here that after two weeks of no afib with an HP cocktail of antibiotics, my problems were over. Now I can appreciate how difficult it is to get rid of this disabler called afib.

So I know that I should wait until I get to 6 mths free of afib before I post anything more. Lots of people get to 3 mths without afib only to have it return. Honestly, I don't know why it's decreasing right now.

I will post again in Jan/08 (I hope).

Here are excerpts from more of Rob's posts in that same thread, in answer to people's questions.

" Re: Finally 3 months afib free without heart drugs
Author: Rob Brew (---.vc.shawcable.net)
Date: 10-02-07 17:10

Thank you, I used nutritiondata.com last summer and got the mineral intake from my diet straightened out.

Something has blow my afib out of the water so to speak. The frequency has been interrupted. For example per month the numbers were:

Apr/06-Sep/06 50,49,62,113,92,66
Oct/06-Mar/07 88,38,71,145,98,95
Apr/07-Sep/07 0, 0,67, 0, 0, 0

I've been on a fruit, vegetable, lean meat, fish, omega 3 oil, nuts etc type of diet. No processed foods with the exception of low sodium V8 juice(no grains and no dairy products) since April of 2006. Of course I got this idea from this board. What an improvement in my health in 18 months. I will never go back to processed foods again. Before, I use to exercise for health and eat for fun. Now I eat for health and exercise for fun.

I think most people have heard of that movie, Supersize Me. Someone should do one about a group of people making a decision to eat only healthy foods for an extended period of time just to see what happens to them. I think it would be equally as shocking, only for the good.

I think a good diet helps strategically in the fight against afib because it eliminates many possible causes and leaves only the real causes, whatever they are.

I had my problem in June (67 hrs) with a very bad cold as one doctor (immunologist) pointed out to me. I've had trouble fighting colds all my life. For me this cold thing might be a real problem with respect to afib, as I had chest infections most of last year. And I always had good luck with afib whenever I took antibiotics but never connected the dots. Only time will tell.

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"... I got a new immunologist in Jan/07. He cranked up the gamma from Jan-Apr and in May he started to bring it back down because my levels were restored. Apr & May were afib free for the first time in over a year. When it came back in June I went right back to the immunologist and showed him my correlation between afib attacks and gamma infusions. He said that there is no science to connect the levels of gamma infusions and afib; however, there is science to show that some chest infections can exacerbate afib. News to me.

So since that day in June with him, I have been more diligent about not catching colds and if I do, then I move quickly to identify the type and get the appropriate antibiotic.

I never thought this could be part of my strategy for fighting afib but it seems to be helping so far. Of course I'm an afibber but if one looks at the numbers from Apr/06 to Mar/07 one would say get an ablation asap. But if one just looked at the Apr/07-Sep/07 hours, I'm not so sure an ablation is justified. I have to keep testing this cold thing further....

.... I'm using Udo's Oil 3-6-9 Blend these days...."

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Re: The List, 3 months - Re: Finally 3 months afib free without heart drugs
Author: Rob Brew (---.vc.shawcable.net)
Date: 10-03-07 18:10

"I have trouble describing the feeling of wellness..."

My feelings as well. I keep comparing my well-being to my memory of how I used to feel. (50lbs heavier in those days) I've been normal weight now for several months and I lost the weight as a result of trying to eat healthy, not to lose weight specifically.

This may sound odd, but I seem to have come to an agreement with my body treating it almost like a separate entity. I will provide the healthiest foods I can find and afford to my body, and my body in turn, will return the best possible health it can produce. Funny but it works for me.

This is my state of mind after receiving so many "health gifts" along the way from my improving body over the past 18 months. You know what that's like. Some come almost immediately, others take a year or more to happen.

The inflammation thing might be getting better because I take 10gms of vit C per day split into 3 dosages.

Your comment about feeling like you are getting younger has hit the mark. That is how I feel most days. Afib or no afib, valuing one's health through an improved diet is probably the greatest asset I got from this board.

Start date: 3 months before date of post

Effectiveness: no afib during that time

SUE BOWDEN

As requested I attach my AFib story. Sorry it has taken a couple of days but I have been trying to pull it all together without it being too long. Unfortunately it is still quite long but it could have been worse!

I started my AF journey in January 2001 with a first attack which hospitalised me for 2 days with a heart rate around 200 bpm. This lasted for 43hrs and I was allowed home. Over the next 12 weeks I was hospitalised 8 more times with AF and discharged at around 40hrs with several different medications to take while waiting for an appointment to have all the usual stress tests, echograms etc., These two medications Flecainide (taken for a month then stopped by the hospital) and Amiodarone were a complete disaster and of no benefit to me. Amiodarone actually put me back into the hospital intensive care unit within 4 days of starting it after a total collapse and a kidney problem which lasted for three weeks after I was taken off the tablets. By this time I was in a state of total panic, afraid to leave the house or be left alone, and unable to drive my car as I had fainted on one while in AF and the Department of Transport took my licence from me for 6 months until after all the tests were done. I had also developed GERD and IBS around the same time the AF started and I remain convinced that one caused the other, although I doubt I will ever be able to prove this. I then made the best move of my life and changed to a different cardiologist at another hospital on the recommendation of my GP. I was immediately fitted with a holter monitor and taken off all medication until the test results were in. I had a good stress test and a heart scan which showed no problems with valves or arteries and the size of my heart was normal. Four days later as an emergency, I was fitted with a pacemaker. He had discovered that my AF was being caused by Sick Sinus Syndrome which had reached such a serious stage that he admitted me to hospital immediately and I was monitored continuously until the procedure took place 48hrs later in case resuscitation was necessary. Apart from this electrical problem I had a normal heart in every other respect and passed all the fitness tests and stress tests with no problems. I am very fit, exercise regularly and have no weight or health problems. Before pacing I had a resting pulse rate in the low 30's (now set permanently at 70) but when in AF it still regularly topped 200. After the pacemaker was fitted I continued having frequent attacks which always terminated themselves at around 40hrs and was put on Sotalol which proved to be the only drug I could tolerate and never gave me any problems even at high dose levels. I was told that the pacemaker would not stop me suffering AF and it never has. At that point it gave me back a normal life, albeit one which contained a lot of AF attacks!

Over the next few years the attacks continued unabated until by the time I found this board I was lucky if I didn't have one or two 40hr attacks each week. I bought Hans' books, read everything I could, started taking Magnesium and changed my diet to include white meat and fish. I received very good advice from Jackie and PeggyM on this and took

on board their views on vegetarianism! (in a word, give it up and eat meat). I slowly started taking some of the other supplements - Omega Oil, Co.Enzyme Q10, Vit.C and Bioflavinoids, Multibionta probiotic multivitamins. Due to the prevalence of diabetes in my family (mother, grandmother, cousins) I also take a specially formulated Chromium supplement to help with sugar tolerances . This was recommended by my doctor. I found my triggers and gave them up. In my case these were, alcohol, MSG, aspartame, caffeine. Wheat and Gluten also turned out to be triggers although it took a while longer and some allergy testing to find out about this.

In July 2005 I added taurine into the equation. Slowly at first 1gram a day, increasing it each month until I was taking 4grams a day. After taking the first few doses I went two weeks without any AF and on 30th September 2005 I had my last AF attack. I have continued taking 4grams of Taurine a day and am convinced that it was adding this to the mix that finally brought me relief from my episodes. Since July 2005 I have changed my diet to a modified paleo and I have also given up all wheat and gluten products which has meant my GERD and IBS has gone away. (I was tested for wheat and gluten allergies by my doctor and these came back positive.) I now take no medication for AF or GERD and in February of this year my Warfarin was stopped and we began reducing my Sotalol dosage. I finally stopped taking it about 6 weeks ago. My cardiologist saw no necessity for continuing with it as there were no more attacks happening. He put me on a baby aspirin a day, and at that time I also added Vit.E into my daily supplement regime after some advice from Hans and other people on the board.

I remain convinced that it is my supplement and diet regime which has stopped my AF completely and changed my life for the better. My cardiologist remains impressed with these results. I now volunteer to speak with new patients at my local AF clinic, and have already seen one lady go 9 weeks without any attacks after starting on supplements. She was previously a weekly A Fibber. I wish there had been someone to speak to when I was diagnosed when I felt so alone with "the beast". I know that what I do will not suit everyone but I am very glad that I found the bulletin board and followed the advice I got from it. I know I would not be as I am now without my protocol programme. Thank you Hans and everyone for all your help. I may need more help in the future if my AF comes back and we try the PIP method!

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11-09-07 00:38

I knew when I started to shorten this I would leave something out!

When you read my story you will see that the only thing I don't take additional supplements for is Potassium.

You will have read in my story of my experience in intensive care as a result of a reaction to taking Amiodarone. This left me with a need to take a potassium sparing diuretic tablet every day and consequently whenever my potassium levels are checked they are always good.

While my cardiologist is happy for me to supplement everything else he did not want me to supplement with any further potassium other than what I could get naturally from foods.

I have done this since I started my supplement protocols. There are many websites which will give newcomers these details just by typing in the search box "foods containing potassium". Two that I have used recently for checking things out are:

www.vaughans-1-pagers.com/food/potassium-foods.htm
www.ucce.ucdavis.edu/files/filelibrary/1808/91.htm

I believe the first site I used was at the University of Oregon which PeggyM recommended but I can't find the website reference on my new laptop!

For those of us in the UK even Gillian McKeith has a list of potassium containing foods in her book "You are what you eat".

I have a very basic "travel" diet which I can do even on the cruise ships. I tend to stick to yoghurt and fresh fruits or a plain omelette for breakfast, fresh veg or simple undressed salads for lunch, grilled meats or fish with veg or salad for dinner, and always fresh fruit for deserts. The dessert is the hardest bit because believe me they look wonderful on the

ships but up to now I have managed it. I think if you let them know exactly what you want right from the time you board there is no problem and they will do what you want. Just the thought of a trigger is enough to keep me on the straight and narrow. I never eat bread or grains now and I don't drink alcohol so I can manage pretty well wherever I go. Air travel can be a worse problem but I tend to take my own rye crispbreads or brown rice cakes, natural cottage cheese and fruit with me so I can just have that and bottled water during the flight. I find I don't have any problems with the crispbreads or rice cakes as an emergency ration although I don't have them very often. Giving up the wheat and gluten has been a major benefit to me. I no longer have any problems with IBS and never have to use tablets or indigestion remedies any more. I think it must have been a major trigger factor for my AF as was even one glass of wine.

Sue Bowden/60/Vagal/The List/2 years No medication now

JUDE

http://www.afibbers.net/forum/read.php?f=6&i=14433&t=14209#reply_14433

"1-Year Afib Free

Author: jude (---.adsl.mcn.org)

Date: 09-07-07 23:14

Wow...hit a YEAR today without afib. To be honest, had 5 minutes of it a few weeks ago that I mentioned but that's it. I am going to post my March report here on how I managed this so far for anyone new to read. I hope it is helpful. Haven't changed too much in my regime, even having a glass or two of white wine sometimes. I am taking Prilosec regularly now as I had a terrible stomach acid problem awhile back. After trying not to be on it full-time, it seems I am much better off staying on it. Have cut down on the mag with malic acid by 2/3rds too. Think might have been part of the stomach problem. I did cut out the bittersweet chocolate too. So here you go with noted changes above.

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Author: jude (---.adsl.mcn.org)

Date: 03-10-07 14:19

To recap: My first attack (episode seems too mild a word) was in March, 2004 followed by the 2nd in November, 2005. Both times I went to ER as I had not discovered this board yet and learned to manage better on my own. I was given cardizem and after an hour or two, I went back into NSR. I spent the night at the hospital on the first occasion as I had an abnormal ekg. But since then I have done echos, holter tests and treadmill and nothing abnormal was found.

I had had years of digestive distress and it was clear to me that my heartbeat irregularity was tied to this problem. In those years I couldn't convince anyone of that. I finally started to carry a bag of baking soda around as it was the only thing that would immediately stop it. Cannot tell you how many times I have been on a road trip away from home when I have had to pull over to take baking soda and breath and wait for it to pass. Very frustrating as perhaps if my digestive problems had been treated appropriately, it might not have moved on into afib. All of my good friends got rather used to me having these 'heart spells' which were essentially ectopics, not afib.

Both of my first attacks happened at night, reading in bed and munching on almonds. I started my research looking for the connection that I knew was there and eventually found discussions related to vagal afib. What a relief. Then I found this site and asked for help a few times, and good help I did receive. Jackie and I initially had several email conversations before I posted and I will be forever grateful for her excellent advice. And I thank everyone here who helped me learn how to manage the attacks myself and, indeed, they then became episodes, not attacks, as the terror response was eliminated.

Then in 05 I went through a very rough period in the late spring through the early fall with a major episode every month and lots of short ones in between plus periods of serious ectopics I kept good notes on all this and what I tried to calm things down: supplements, diet, exercise, etc. I was very concerned with this escalating pattern. I had been on magnesium glycinate and potassium through diet, and taurine, although I went off the taurine for awhile as I thought it

might be causing rather than calming the problem. But now I consider taurine to be absolutely essential. Around this time I also became interested in dysautonomia through postings here and decided to add a low dose of Lexapro daily. I went off and back on PPI's, tried to handle digestive issues through Pepcid, Maalox, etc. rather than PPI's, and generally experimented on myself in every way I could think of. The Maalox, Pepcid approach made things worse, so I stopped it, although I do take a Pepcid if I have any breakthrough heartburn.

Then in June I stopped eating gluten for the most part and went off wine before that (am in food/wine pr/marketing biz), stayed off wine for 1-1/2 years until recently.

Soooo, this is my current program:

Diet: Eat small meals, lots of veggies and high quality protein (I eat organic).

I have a high protein organic shake in the morning with a decaf latte and a big glass of low sodium v-8 with D-Ribose added. (Jackie recommended the ribose)

Lunch is often a healthy open-faced sandwich on one piece of gluten-free bread, various sides like cottage cheese, hard-boiled egg, salad greens, cashews. For dinner I eat a small amount of protein, big salad, vegetables and later I eat a bowl of Total Greek yogurt with berries. For a snack I will sometimes eat a Larabar which is just nuts and fruit, gluten-free, no added sugar.

Daily Supplements:

5 mgs Lexapro

240 mgs Cardizem

2 grams Vit. C

2 capsules NSI Synergy Basic Multi-Vitamin (has 200 mgs mag in it)

200 mgs Doctor's Best High Absorption Magnesium

425 mgs Magnesium Malate (has 2.5 grams of malic acid in it)

2 capsules Carlson's Super Omega 3 (2 grams)

1 capsule NSI Taurine (850 mgs)

1 low dose aspirin tablet (I am not on Coumadin)

200 mgs ToCoQ10, a special NSI version

I also take PPIs periodically. I do not like to stay on them so I use them at any sign of digestion problems or ectopics or any mini afib runs, take for a few days and then off again when things settle down. This is working well for me.

I monitor my sugar for insulin response and my blood pressure and both are under good control. My sugar has always tended to be high so I am very careful with it. My BP is usually around 117/65, pulse rate 65-70.

To sum up, I think going gluten-free has been of enormous help. I took off a few pounds in my high stomach area eating this new way and that has no doubt helped as well. Correcting my diet has been very important. I am in a good groove on the supplements and have no doubt that keeping my potassium up and supplementing with magnesium and taurine have been essential to my improvement. Overall, this continual fine tuning, listening to my body, has yielded great results. After going through that very active seismic period with lots of episodes, to calm down to this extent has been reassuring. Also, that old positional triggering no longer happens. I can roll over in bed easily, sleep on left side, bend over, all things that would trigger me in the past.

Who knows if the Lexapro has helped to 'reset' my autonomic nervous system but am planning to keep it up. It seems helpful."

Date: 11-10-07 22:11

The changes I would make are to take magnesium malate out. I was essentially taking that for fibro anyway. Am just taking the mag glycinate and whatever is in my multi. I also take Prilosec every day and this has smoothed things out even further. Also, as I posted yesterday, I avoid red wine as it inevitably causes a fast heartbeat and therefore can trigger an afib episode. Fine thing you have done making this info so accessible.

http://www.afibbers.net/forum/read.php?f=6&i=18073&t=18073#reply_18073

an interesting experiment

Author: jude (---.adsl.mcn.org)

Date: 11-09-07 23:30

Last night I went to a dinner at 'my' restaurant, where I am PR Director. It's an annual wild mushroom wine pairing bash and I decided to try some red wine, which I haven't drunk in moons now since I started working on my triggers and also had a teensy bit of flour in a chestnut soufflé, also first time since going almost a year ago. I have, by the way, been afib free for 14 months. Did not overeat, was 5 courses but small ones, but had quite a bit of red wine. Fab evening, came home, went to bed to read and found my heart racing. When I got prone to sleep on my right side about an hour after I could feel the pre-afib symptoms, which for me is actually afib of a few seconds. I do this unique stretch that seems to be like an on/off position and it stopped and did not resume although it took a good long time for heart to stop racing. I am now SURE that I can't drink red wine. White does not do this to me ever. Just an fyi on trigger work that might be helpful to someone else. My particular 'vagal' stretch thing I came upon accidentally and it has worked to stop a beginning episode several times now. I used to have frequent episodes of heart racing that I simply do not have anymore but this was sure a reminder of the bad ol' days.

Start date: 1 year before date of post

Effectiveness: 1 five-minute episode during that time

DEAN

http://www.afibbers.net/forum/read.php?f=6&i=14867&t=14840#reply_14867

"Re: GERD and atrial Arrhythmias

Author: Dean (---.tpgi.com.au)

Date: 09-20-07 00:39

I was very lucky in the early stages of my afib career due to my GP suspecting silent reflux and referring me to a gastroenterologist who had experience and a good knowledge of the gastro/afib connection.

The gastro sent me for a battery of unpleasant tests and the following observations were made:

-Barium swallow

Indicated a "wandering stomach" or in other words my stomach is held loosely in my abdomen due to the gastrophrenic, gastrohepatic, gastrosplenic, and gastrocolic ligaments being loose. (for more on this see my gastric volvulus post below)

http://www.afibbers.net/forum/read.php?f=6&i=14019&t=14019#reply_14019

The attending doctor wrote - "On lateral views, after moving Mr Rutledge supine, prone and then back to erect, the configuration of the stomach altered with the antrum and duodenum on the erect view now lying above the level of the fundus. There is volvulus of the stomach with a change in the position of the fundus from supine to the erect position."

For more on this very interesting affliction see my gastric volvulus post:

http://www.afibbers.net/forum/read.php?f=6&i=14019&t=14019#reply_14019

-Stomach endoscopy

Revealed a loose lower esophagus sphincter (LES)

24 hr pH study

The 24hr graph showed strong reflux beginning about 6am when I wake to 12 pm when I was asleep. All my afib attacks and ectopics were all between 6am and 12 pm.

-Esophagus motility test

The barium test showed "slow clearing of the distal esophagus" and therefore indicated suspect esophagus motility but

the more accurate esophagus motility test indicated normal motility. I was having strong ectopics when undergoing the barium test but no ectopics when undergoing the esophagus motility test so I suspect to this day that intermittent faulty esophagus motility is behind my LAF and ectopics.

In 2002 I was put on PPI omeprazole 20mg day and I only had one major af attack after that but ectopics drove me absolutely mad for several years later until I discovered natto food. I would spend up to 15minutes trying to get into bed at night because every time I got into bed my heart would go into fibrillation and I would immediately have to jump out of bed and stand at attention like a soldier for a couple of minutes to stop the fib and then I would have another one or two attempts before I could actually get into bed without fibbing. This stuffed my good nights sleep. This would also happen when bending over and swimming.

I have been af free for 4yrs and 7 mths due to daily omeprazole and daily natto food (GeorgeN posted above about my natto food). I can't handle supplements of any kind and they have never worked for me anyway.

I would recommend anyone who has been diagnosed with LAF regardless if they have reflux or not to get to a gastro asap and have all the unpleasant tests. You will then know what you are dealing and it might save you years of heartache being on unpleasant heart meds with their side effects when a gastro could have stopped or reduced your LAF with PPI's or other measures.

If you can't handle supplements then you should suspect that you maybe a GERD afibber so get checked out by a gastro.

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George's post from the same thread:

"Re: GERD and atrial Arrhythmias
Author: GeorgeN (---.hlrn.qwest.net)
Date: 09-19-07 21:11

Dean from Australia is another person who has really helped himself by treating his GERD. Interestingly enough, Dean has also found that consuming 50 grams of Natto food (Japanese fermented soy food, generally found in the frozen food case at a Japanese grocer) 5 or more days/week has been a great benefit.

He has speculated that the natto bacillus (aka b. subtilis) is the reason for this benefit. I don't know if this would help any other GERD afibbers, but I thought I'd post it.

You can search "Dean natto" in this and archived message boards for more info.

Start date: 2002

Effectiveness: no afib in 4 years and 7 months

BOBBIE JO

http://www.afibbers.net/forum/read.php?f=6&i=13548&t=13548#reply_13548

Visit w/EP, off the toprol
Author: Bobbie Jo (---.tukw.qwest.net)
Date: 08-25-07 16:29

I have been gone on vacation and have had company so I've not been able to share the results of my once-a-year visit with my EP. It took me a long time to get into him and in the mean time, I was having more and more episodes.

Thanks to the help from those on this website and Han's book, I am quite sure I have vagal AF. I avoid a big meal in the evening and stay active for awhile after my PM meal. This really helps.

I had weaned myself off of Toprol XL, 25 mg. and had been taking supplements since May. I shared this with him along with the fact I had only one event and it was about 1/2 hour long.

I'm feeling so much better. I've actually had two vacations where I played golf 4 times in 90-degree weather, walked and carried my own bag. No AF.

I'm taking CoQ10, Vit. C, 1000 magnesium, 2 grams taurine, 50 mg of Potassium, 325 mg of aspirin, and a multiple. I quit taking fish oil and calcium and Toprol. (I'm a 55 year old female and was diagnosed with lone AF almost three years ago.) I also watch my diet and have cut out most of what we consider to be triggers. I exercise moderately (I used to be an extreme exerciser). Oh, and water, water, water.

My biggest regret is that my doctors don't allow me to try and reduce my AF by eliminating triggers, and changing lifestyle behaviors first. Also, they don't seem to be interested in distinguishing between types of AF. I do understand they can hardly be expected to walk people through the self-educating process.

Bottom line is, my EP said I was doing the right thing. He said all we can hope to do for now is treat symptoms and try to hold episodes to a minimum. I only need to come and see him if/when my current situation changes. If I do have an episode which lasts for over 18 hours, I need to come in. He said the longer we can hold off the beast, the chances are more likely for new procedures and/or meds to become available.

On a sad note, he told me that 30% of his practice deals with Afib and that many of those people have had their lives ruined. They are held hostage by fear and anxiety. Some deserved, much not. He said I should go out and enjoy myself because a positive attitude is the hardest part of the battle.

Re: Visit w/EP, off the toprol
Author: PeggyM (---.usadatanet.net)
Date: 08-26-07 02:15

Bobbie Jo, that is a very interesting post. Do i understand you right that you have had one half hour episode in the 3 months since May? How often were you getting them before starting better hydration and avoiding trigger foods and taking the supplements you mention?

Incidentally, that is surely a typo where you say "50 grams of Potassium". Did you mean to say milligrams, or maybe 5 grams [which would still be a lot]?

Re: Visit w/EP, off the toprol
Author: Bobbie Jo (---.tukw.qwest.net)
Date: 08-26-07 08:47

Dear Peggy,

Yes, I did mean milligrams for the potassium. Sorry, I am not at a computer where I have my supplements at hand. And, my EP suggested I ask my internist for blood work to check my potassium, etc.

Before May, when I started the supplements, I was having episodes all the time. They were becoming more and more frequent and some lasting quite a long time. I was only on the toprol then. I weaned off the med and added all the supplements in May. Since then, I have only had the one episode and it was short lasting.

I did forget to say that my EP gave me a prescription for pill-in-the pocket. It's toprol but not the timed release. It's faster acting. I am to use it for times when I go into AF. I hope to put that off for a long time.

Re: Visit w/EP, off the toprol
Author: Bobbie Jo (---.tukw.qwest.net)
Date: 08-28-07 12:18

I believe my Afib started years ago as I started to enter menopause. Menopause took years to go through, but I do remember having a racing heart once or twice. I also wore a holter monitor for a day, but it showed nothing so on my merry way I went.

About 3 years ago, I started noticing an elevated heart rate occasionally after an evening meal and especially if I were reclining. Once I mentioned this to my internist, the ball was set in motion and I had all the tests. An event monitor showed Afib. At that time I was given a small amount of a beta-blocker to take every day and again, I was sent on my merry way; no information, no advice...just medicine.

Once I found this website, and bought Han's book, I realized that I needed to be proactive in my care. I quit caffeine and tried to eliminate as many of the common triggers as possible. I've never been a very good fruit/veggie eater, so the supplement route was of interest to me. I know now that I am primarily vagal. A good walk can keep me from having an episode, too.

Meanwhile, my episodes of AFib went from every 8 weeks to almost every other day. Some were as long as 8 hours. So, I was determined to get rid of the beta blocker and try something else.

I had been taking Calcium and Fish Oil for a long time and on the advice of my internist, but everything I read made me feel these were counter productive. I quit those and immediately got some relief.

I've been off Toprol since May. At the same time I added mag., taurine, Vit C and CoQ10. All has been relatively quiet since. Only one episode and very short. I don't even have PACs or ectopics anymore.

I take 150 mg of CoQ10 a day, 1 gram of mag (1/2 in AM and 1/2 in PM), 2 grams of Taurine (1/2 in AM and 1/2 in PM), 500 mg of Vit. C and 50 mg of potassium.

I try very hard to eat breakfast, I've ditched bread for the most part and I consume a lot of water. I'm still exercising, but only 3 times a week and just an easy amount. I did get the Paleo Diet book and it was a bit extreme for me, but I make more food choices from that diet than before.

Not sure how long this will last and my EP warned me that it may end, but I have his support and it seems to be working for now. I would rather progress through this taking things slowly. I would consider other meds and an ablation if the time were right and I had exhausted all other channels.

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http://www.afibbers.net/forum/read.php?f=6&i=11934&t=11899#reply_11934

Re: Magnesium, potassium, taurine – useful clips -- FYI
Author: Bobbie Jo (---.tukw.qwest.net)
Date: 07-26-07 08:29

Thanks to this website, I started taking mag, taurine and potassium in May. Since then, I have had tiny little rumblings which feel like they will end up being episodes, but do not. Those have all but quit. Before that, I had been experiencing a variety of events which could last up to 6 hours.

I have had really only 1 short episode of Af since May, which lasted about an hour and I had golfed that day in very high heat, walked and carried my bag. It started after the evening meal. I downed my evening dose of supplements and it was gone.

For others out there, I am a 55 year old female with lone Afib which I believe is mostly vagal. I was on 25 mg of Toprol XL but stopped. My EP said I could experiment, but was not totally convinced I should. He's not sure what to say now. I

sense a little hesitation on his part, but at least he is willing to go along with me for now. Of course, he says "this too shall pass." Perhaps, but for now I'm watching what I eat, exercising and taking my supplements.

None of this would have been possible if I hadn't lurked around this website, purchased Han's book and gotten help from all those here who have so much knowledge to share. I appreciate the help and will continue to educate myself.

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Re: Magnesium, potassium, taurine – useful clips -- FYI
Author: Bobbie Jo (---.tukw.qwest.net)
Date: 07-29-07 19:29

Sorry it took so long for me to reply. I have been away. In fact, I spent three days working like a dog in the hot sun from dawn til dusk at a horse show. I hauled hay, water, and you-know-what and not a peep out of my heart.

Jackie, I have been working on staying hydrated and now plan ahead and keep plenty in my golf bag. I will buy those items you mentioned above on my next shopping trip at Iherb.

I have been totally off the toprol for a month, now...."

After reading a post from Jackie, I decided to up my Vit. C to 1000 mg a day. I've also started to have tiny evening meals. Instead of hitting the couch after dinner, I do tasks around the house and settle in about 1 hour after my meal. All this has resulted in no ectopics or PACs. For awhile, I would get this funny feeling in my chest. It felt as though an episode was lurking. This has gone away and I am pleased.

Start date: May 2007

Effectiveness: one half-hour episode between then and late August

ERIC

http://www.afibbers.net/forum/read.php?f=6&i=12596&t=12596#reply_12596

31 and 13
Author: Eric (---.ks.ok.cox.net)
Date: 08-06-07 21:16

As I sit here about 1 hour from my 31st birthday, I thought I would tell you all that I have now gone 13 months without an AFib episode. I was diagnosed at 27 and had about 11 events over the next 2 1/2 years with the longest period without being about 8 months.

All of my thanks must go to Jackie. It is amazing that you can still find someone that will answer the e-mail of someone she has no clue about and give them advice regarding their health. Unbelievable. All of my events seemed to come from the stomach and she helped me take care of many of those issues. There are still days when I will eat something I shouldn't and the ectopics will show up for awhile, but they usually leave just as quickly. I no longer worry about them as I used to and my life has just been absolutely wonderful the last 13 months. Even during stressful times (new baby girl, building a new house), everything has stayed the course. Is it going to stay this way? Maybe...Maybe Not. But I am OK with whatever happens. I will let you know that I do take Flec 100 x 2, but was on it when I used to get the events every couple of months as well.

It is a terrible thing to have and at my age, I would tend to say is even a little more worrisome as many folks my age have little ones that we are responsible for. Sorry for rambling, but I have been waiting to post for several weeks as I passed my one year anniversary. Once again, thank you Jackie and my birthday wish for all of you is many hours of

NS.....I better not tell, it may not come true!!!"

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Re: 31 and 13
Author: Eric (---.kgassociates.com)
Date: 08-07-07 09:08

Long Story Short - Very bad digestive problems (pain and bloating), even had gallbladder removed which I didn't need, come to find out. Had stomach ultrasounds, blood work, HIDA Scan, endoscopy, etc.

Jackie and others had me try digestive enzymes and probiotics which helped a little. She also suggested that I try a gluten free diet and watch my carb intake. Within several weeks my stomach felt better and has progressively been getting better ever since. I personally feel that if your stomach is bothering you, then it can't hurt to give the gluten free a try. I see continual improvement on how my stomach feels almost weekly. I also supplemented with and continue to take Candex, now on my 4th month on a maintenance program. All of these things led to less ectopics which led to less anxiety which I believe, so far, has led to less A-Fib. I rarely take the enzymes or probiotics anymore and my stomach feels the best it has since all this started. And yes, the stomach started hurting about 4 months before my first episode.

One other thing seems to bother me as well, and that is peanut butter. Don't think I am allergic but maybe just intolerant of that as well. In either case, if you would like to know more, please post and I will try to respond.

Thanks for all the birthday wishes. When all this started over 3 years ago, it was tough for me to think out to my 31st.

Start date: July '06

Effectiveness: no afib in 13 months

MATT

http://www.afibbers.net/forum/read.php?f=6&i=12085&t=12020#reply_12085

Re: Competitive Athlete Flutter /A-Fib
Author: Matt (---.gv.shawcable.net)
Date: 07-29-07 09:20

Afib, only starts at rest, goes away with exercise, your symptoms seem very similar to mine. After cardioversion and several scary attacks within one year of 1st attack I found this forum and searched for my "triggers" by eating more of things, turns out it was not chocolate :-)

What I did find was 2-3 days after having maybe only one or two beers I would go into afib mildly. I quit drinking and started eating lots of pumpkin seeds (source of magnesium which alcohol depletes) and nuts and fish, salmon mostly. I also cut out all junk food and hydrogenated foods. Not drinking Alcohol means I drink tea and juice more when out at the bar etc.

3 yrs later I have had no afib events and only a few very mild erratic beats for a while but nothing that would stop me sleeping or relaxing.

I do not run but do surf a fair bit and have not noticed any link between surfing for 2-3hrs and afib.

Its no cure but clearly for me it has helped to change my diet and if it can buy me more years without the need for treatment then when I do need treatment technology will have improved hopefully.

Re: Diet, supplements
Author: Matt (---.gv.shawcable.net)
Date: 07-30-07 23:43

It's hard to know if its luck or diet. I deliberately avoided magnesium or other supplements as I continue to read reports of the body simply not being able to use many supplements properly.

Seems to me that the long gaps between many peoples attacks could be a indication that its not one thing that triggers there attack but a slow build up of many factors that ends up only needing to be tipped by an event like cold ice drinks or other triggers.

In the 2 mths prior to my 1st attack I had gone from eating meat to vegetarian and as well intentioned as this may have been i feel it is very significant and most likely caused such a huge change in my body that it could not cope and the result was a heart out of balance.

If it is a slow build up then the best response is a slow but permanent change of diet, low fat meat is back on my plate :-) as is more Salmon... yum

http://www.eurekalert.org/pub_releases/2005-01/nhla-cte011005.php (supps and warfarin and aspirin)
http://www.eurekalert.org/pub_releases/2001-01/MC-CaLs-0401101.php (Lead in Calcium supps)
http://www.eurekalert.org/pub_releases/2004-03/acs-os031604.php (fish oil supps)

Start date: 3 years before date of post

Effectiveness: no afib episodes in those 3 years

J

http://www.afibbers.net/forum/read.php?f=6&i=12038&t=12020#reply_12038

Re: Competitive Athlete Flutter /A-Fib
Author: J (---.dynamic.mts.net)
Date: 07-28-07 12:09

Afib always ends up in the same place for everyone, quality of life. Eventually your quality of life erodes to the point where you have had enough, and ablation and/or maze procedures are entertained. The major difference for all of us is the point at which this decision comes. Some are quite happy to be sedentary as they have been essentially sedentary all their lives. Others, used to an active life style, will not accept being shut down by Afib. Mario Lemeiux, of the Pittsburgh Penguins, was a good example of the latter case. My father, an inactive person, has been on Rythmol for the past 30 years successfully warding off his Afib. I, however, would view his quality of life as a failure in my eyes. To each his own. As far as exercise is concerned, what is the right amount of exercise to maintain your heart muscle in good working order? Are you better off training with occasional LAF or sitting on your duff without it? I believe the latter to be far more life threatening.

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Re: Competitive Athlete Flutter /A-Fib
Author: J (---.dynamic.mts.net)
Date: 07-28-07 18:36

I think this thread shows that the optimization of one's life can vary widely from person to person. Everyone has their own journey through LAF. We all respond differently to diet and exercise. No generalities can be drawn from either in my opinion. In my personal 18 years with LAF, exercise (Not sure what vigorous means) has reduced my instances of afib. I currently lift weights 3 times/week as well as mountain biking 10 hours per week. I guess, depending on my age, this exercise could be categorized all the way from moderate to vigorous. These terms are vague at best. My last Afib was three years ago and I take no meds.

Re: Competitive Athlete Flutter /A-Fib
Author: J (---.dynamic.mts.net)
Date: 07-29-07 11:02

I have been following the Zone Diet since its origins in 1995 and have been taking PG Fish Oil for four years. Lately, through the influence of many of the kind folks here, I have been following the Paleo Diet and just switched over to NKO Krill Oil as it seems to be slightly more bioavailable than fish oil. I might be a slight oddity here as my occurrences of AF have decreased over time as my fitness has increased. I am 46 with my first occurrences of AF just prior to 30. I have had a total of 5 instances of AF with one cardioversion when I was suffering from Pneumonia. My AF only occurs during the day despite my heart rate of sub 30 BPM during sleep. Daytime resting 48-52 BPM. Hope this helps.

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Re: Competitive Athlete Flutter /A-Fib
Author: J (---.dynamic.mts.net)
Date: 08-01-07 06:57

Unfortunately, I see LAF as a symptom having some parallels to headaches. Many people experience headaches but, as we know, there are numerous and varying causes requiring very different treatments. Are the ultimate causes of LAF as broad and varied as with headaches? Not sure, but we will have to be happy treating the symptom for some time. It is no wonder EPs are reluctant giving us advice on diet, supplements and exercise. They don't have a causal clue and neither do we. Hopefully, we will all continue to conduct our individual experiments with this underlying complexity in mind. J"

Start date: [3 yrs prior to date of post?]

Effectiveness: no afib for previous 3 years

JOE

http://www.afibbers.net/forum/read.php?f=6&i=10000&t=10000#reply_10000

"Accidentally discovered a drug that stops my afib dead in its tracks
Author: Joe (---.nsw.bigpond.net.au)
Date: 06-24-07 02:38

I have suffered from afib for several years now and have resisted all attempts by my cardiologist to put me on Flec. This hideous affliction plunged me into depression so deep I thought I would rather die than become an invalid dependant on this type of drug.

I scanned the web and tried a truckload of the standard supplements such as magnesium, potassium, taurine etc etc etc, in various combinations. If anything they seemed to make it worse, a bit like putting high octane fuel in a car that already runs sick, it just seemed to run sick better. (if that makes sense.)

The one thing I found on these forums that made a tremendous difference was the recent post by Cherri regarding avoiding foods containing Tyramine. This was an absolute revelation. I had tried to collate a list of foods which appeared to trigger an afib episode. None of the foods seemed to have anything in common so I struggled to make sense of anything until I read Cherri's post and then it hit me like lightning bolt. Here finally was the common denominator. Cutting out tyramine containing foods definitely reduced the triggers but the afib just kept ticking along albeit at a reduced intensity.

I have an antidepressant called Tolvon which I sometimes use to help me sleep. Because of my aversion to any drugs, after a bad experience with an anti depressant called Efexor, i usually only ever take less than half a tablet a week once a month if at all.

Recently I was forced to go on a 2 week business trip and because I was petrified of suffering a severe afib attack alone in a strange country I took my son for support. We both stayed in the same hotel room and as he tends to snore I took 1 third 10mg Tolvon every night to help me sleep through his snoring. The result was no afib for the whole 2 weeks. At the time I did not see the connection but I was amazed at how good it felt to go an entire day without a single episode. I felt like a 20 year old again. Because we were in an Asian country it also meant that diet during this time was almost exclusively rice and green vegetables, which meant no Tyramine so this would have also helped. (though I did not know it at the time)

I am now at the point where I can turn this afib on and off like a tap. If I eat a high Tyramine meal it comes in within an hour of eating. If I skip a night of Tolvon it starts up by the following night. If stay away from high Tyramine foods and take Tolvon I can now, for the first time in many years, live a normal life.

Compared to Flec and other anti arrhythmic drugs Tolvon appears to be a somewhat safe drug, if there is such a thing. Given the fact that I am only taking one tenth the recommended dose for depression even I am comfortable taking this amount.

We are all different and this hideous affliction has a habit of keeping us all guessing. But I am posting this in the hope that Tolvon may help others, and to hear from anyone else with a similar experience. I have been taking about 3mg of Tolvon, 1 third a tablet, every night for the past 8 weeks and the only time my afib returns is when I skip a night. It has reduced my afib by at least 95%. I hope it does the same for all of you until a permanent cure can be found.

Re: Accidentally discovered a drug that stops my afib dead in its tracks
Author: Joe (61.88.183.---)
Date: 06-24-07 20:48

Tolvon--mianserin hydrochloride - more info here <http://www.medsafe.govt.nz/Profs/Datasheet/t/Tolvontab.htm>

See further info from an online pharmacy. <http://www.drugdelivery.ca/s3832-s-TOLVON.aspx>

In some countries TOLVON may also be known as: Mianserin, Bolvidon, Hopacem, Lantanon, Mianeurin, Prisma, Tolvin

As with all drugs please be aware of side effects and interaction with other drugs.

=====
Re: Accidentally discovered a drug that stops my afib dead in its tracks
Author: Joe (61.88.183.---)
Date: 06-24-07 21:24

Yes I totally agree that users should be aware of side effects and interaction with other drugs when using any drug. Tolvon also comes in 30mg tablets so just to re affirm I only take 1/3 of a 10mg tablet. I seem to be very sensitive to drugs and this small dose seems to do the trick. I notice it starting to work within 2-3 days of taking it. Effective dose may vary with individuals but I am guessing that the low dose is due to the fact that most of us afib suffers tend to stay healthy and eat right in order to limit the afib. Hence we would need smaller doses of any medication than say someone who drinks and smokes where the medication effect would be blunted by the nicotine and alcohol etc.

On the subject of Tyramine I found that avoiding it helped immensely. Tyramine had the effect of increasing the arrhythmia and heart rate to ridiculous counts per minute. Because I am not a meat eater I found I was practically living on Tyramine, eg my whole diet consisted of Nuts, Cheese, and over riper fruit. Avoiding Tyramine allowed me to return to a much more normal heart rate. Though still irregular it was going into serious afib less often.. Tolvon did the rest.

After some quick research on the Internet I found that the body produces Tyramine from Tyrosine. So I thought if Tyramine is produced from Tyrosine is there anything that can cancel out Tyrosine in the body. After several hours

research it seems that an amino acid called Tryptophan is the natural enemy of Tyrosine. The body produces 5HTP from Tryptophan. This may explain why 5HTP appears to help some afib sufferers but am drawing a long bow there. I am not sure if Tryptophan cancels out Tyrosine or just competes with it at the neuro transmitters. I found a powder at a specialist natural supplements store called SAD, as the name suggests used to combat Seasonal Affective Disorder. It didn't seem to help but I am still taking it figuring it can't hurt. Perhaps someone more qualified than me can take up this angle.

I am praying the effect of Tolvon does not wear off as I am so enjoying leading an almost normal life after years of not being able to function normally. Hopefully this post will lead to more people investigating if this drug works for them as it seems to for me. If it does and we make enough noise about it maybe some one will take up the challenge to do some research to try and find out how and why it works, isolate the effective component and maybe produce an even better drug, who knows, maybe even a cure some day. Wouldn't that be wonderful for all of us."

Start date: ca. 8 weeks before date of post

Effectiveness: afib events reduced by approx. 95%, returning only when Tolvon is discontinued or tyramine containing foods eaten.

BRIAN M

http://www.afibbers.net/forum/read.php?f=6&i=14859&t=14840#reply_14859

Re: GERD and atrial Arrhythmias
Author: BrianM (---.rlghnc.dsl-w.verizon.net)
Date: 09-19-07 18:51

I have been working this approach the past 6 months especially, and things are always better (less AF or feeling of impending AF) when I am actively addressing my gastrointestinal issues.

At first I was using Zantac, raised the head of my bed, stopped doing crunches etc... on a daily basis and noticed a difference, along with continuing to cut out the other "normal suspected" triggers such as coffee, MSG, excessive exercise.

Yet I was not convinced that I had it under control. I still was having a few episodes, but was almost always able to make the connection with bad gastro feelings that were also present.

I started taking Prilosec.

What a difference. Very few days now when I even think I might be feeling a little off. BUT....diet is crucial. Easy to screw up. The Purple Pill does not make it all better. NO PIZZA, NO MEXICAN, NO ORIENTAL...at least not a lot...small meals better, eat early, lots of fruits and veggies.

Oh yeah, and ACTIVIA from DANNON rocks the house!!

Also taking Taurine, Arginine, Multi-B and Multi Vit., V8, sometimes K.

Looking back I see the exercise that I thought was causing the AF as maybe aggravating my GERD?

Even now, If I go for a vigorous walk about an hour after eating I have to stop multiple times to belch.

I don't do crunches any more because I was squeezing my stomach too much.

So...about 30 days since last episode, which was one of only 2 in a 5 months period. I feel confident I am on the right track, but will not be surprised to have another AF spell any day now. Its just like that ya know.

Start date: 5-6 months before date of post

Effectiveness: 2 episodes in 5 months

GREG

http://www.afibbers.net/forum/read.php?f=6&i=5542&t=5542#reply_5542

Hawthorn
Author: Greg (144.87.143.---)
Date: 04-04-07 07:29

Ok I've had Afib for just over 10 years -steadily getting worse to the point of episodes every other day ranging between 2 and 24 hours.

Have tried and been prescribed many medicines ranging from totally ineffective, to a mild decrease in episodes, albeit with the side effects.

Have been taking Hawthorn berry capsules for two months now -and guess what, not one episode of Afib. Initially had one or two ectopic beats, you know the ones that generally precede an attack, but even they have stopped now. The dilemma I have now is do I stay taking a capsule of Hawthorn a day, or leave it for awhile ? Just because it's a plant, they can have side effects as well, although with Hawthorn, there have never been any recorded.

Anyway, it's been used for centuries for stabilising the heart, and would recommend people give it a try. It takes a week or two to get into your system. Needed to share this, because Afib is an annoying thing to have.

=====
Re: Hawthorn
Author: Greg (144.87.143.---)
Date: 04-04-07 08:29

I'm not taking any other medicine, as they all seemed ineffective.

I was getting attacks every other day, ranging from a couple of hours to a 24 hour thing. Really debilitating.

Right, I'll post the brand name up when I'm home (at work atm!). Its Hawthorn Berry in capsule form. Don't want to give anyone false dawns, but it's given me a lease of life.

=====
Re: Hawthorn
Author: Greg (---.cable.ubr01.hawk.blueyonder.co.uk)
Date: 04-04-07 10:50

Right, the capsules are Viridian brand Hawthorn Berry and they have 200 mg raw organic hawthorn berry powder, 150mg Standardised hawthorn berry extract, with a bit of bilberry and alfalfa -all organic.

They are about £13 here in the UK for 90 capsules -@\$20 US ?

Anyway, like I said they've certainly done the trick after 10 years, having tried Flecainide, Sotalol and god knows what else.

Will keep you informed of developments, and I hope it works for you.

=====
Re: Hawthorn
Author: Greg (---.cable.ubr01.hawk.blueyonder.co.uk)

Date: 04-04-07 12:40

Yes mate, Vagal Afib, if that's what you have I recommend giving it a try.

=====
Re: Hawthorn
Author: Greg (144.87.143.---)
Date: 04-05-07 00:03

It is the most widely prescribed substance for afib in Germany, and has been used in Europe since the 17th Century. Also, found this on a herb website;

"Hawthorn is one of the tonics for the heart and circulation, acting upon the heart by either stimulating or depressing its activity depending upon the need. The precise mode of action which results in the dilating of the coronary blood supply and the tendency to slow down or stabilise the contractility of the heart muscle is not yet fully understood, but it is safe to use as a long-term treatment for a weak or failing heart, and has a beneficial effect on cardiac arrhythmias, especially extra systoles and paroxysmal tachycardia. A clinical study of 80 patients in Japan showed statistically significant improvement in cardiac function, oedema and dyspnoea in those treated with a preparation made from the fruits and leaves. "

As I said, it may not work for every type of afib, but it is harmless. Interactions with other medications obviously are not recommended though, as this will give different results.

=====
Re: Hawthorn
Author: Greg (144.87.143.---)
Date: 05-10-07 00:06

OK. Update on the Hawthorn. Still thankfully no episodes of Afib, and still taking a capsule of Hawthorn a day.

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http://www.afibbers.net/forum/read.php?f=6&i=7687&t=7687#reply_7687

Hawthorn Update
Author: Greg (144.87.143.---)
Date: 05-10-07 02:30

Just thought I'd update you on my progress. Well, having suffered fro Afib for 10+ years, trying countless medications, the answer was growing on the tress.

A Hawthorn capsule supplement has kept me Afib free for 10 weeks now, after having Afib on an every other day basis. I don't even get the ectopic beats that precursor an attack now.

=====
Re: Hawthorn Update
Author: Greg (144.87.143.---)
Date: 06-21-07 04:40

Hi folks -just an update. Am still taking one a day Hawthorn capsule and am Afib free. I am also taking CQ10 supplement as a heart strengthening agent- thanks to Jackie for a post on its properties.

Start date: Feb. '07?

Effectiveness: no episodes April to late June

LARRY

http://www.afibbers.net/forum/read.php?f=6&i=4206&t=4206#reply_4206

12 month update- Triggers and Diet
Author: Larry (---.prem.tmns.net.au)
Date: 03-14-07 11:51

It has now been almost 12 months since I was at an all time low with my LAF. In March 2006 I was taking 1x100mg Flec every 8 hours and still having constant break throughs of AFIB which averaged 4 to 5 hours at a time, I was certain that I was on the road to 'permanent AFIB' that could only be controlled by Amiodarone.

Luckily at that time I read some Posts on this Forum that mentioned the strong connection between Diet and LAF, and also a Link to a study that showed an increase in AFIB among doctors who were taking Fish Oil supplements (something I was doing every morning at that time). I decided then and there to monitor and record everything that went into my mouth and how it tied in with my AFIB episodes.

To keep a long story short here is the basics of what I found was triggering my AFIB.

1. Fish Oil Capsules 2. Chili Peppers 3. Tinned Red Salmon and most Sardines - all were Strong Triggers, and would result in an AFIB episode within 20 minutes of consumption, even with Flec in my system! Interestingly tinned Pink Salmon, and 'Norwegian Brisling' sardines do not trigger my AFIB. By reducing my consumption of these Triggers I reduced my AFIB episodes by at least 80%!

I then switched to a 'low GI' diet which reduced the episodes even further. The end result is that with the Diet changes I have reduced my Flec to only 1x50mg at bedtime, and I now only average an AFIB episode once a week, and normally for no longer than half an hour.

A cure? No, but at least my life is now much more enjoyable and productive now that AFIB is no longer rearing it's ugly head on a daily basis.

I have come to believe that what is in our Blood is a big factor in triggering AFIB, whether it be High Sugar Levels, Insulin Spikes, or whatever there is definitely a link in my case.

=====
Re: 12 month update- Triggers and Diet
Author: Larry (---.prem.tmns.net.au)
Date: 03-14-07 12:31

You are quite right Sharon, these Triggers can be a very individual thing, in my case Coffee and Alcohol do NOT trigger AFIB and yet they have the opposite effect in most people with LAF, go figure!

Re: 12 month update- Triggers and Diet
Author: Larry (---.prem.tmns.net.au)
Date: 03-15-07 11:52

... But the bottom line is that Fish Oil supplements and certain types of Fish will trigger my AFIB, maybe you are correct about it being an some type of allergic reaction.

Take the time to research a 'Low GI Diet', I have found it to be really beneficial for both my AFIB and my overall health. The 'Diet' word isn't very accurate, it is more of a 'change of eating habits to avoid the Insulin Spikes'.

http://www.afibbers.net/forum/read.php?f=6&i=4405&t=4388#reply_4405

Re: Question about your use of caffeine

Author: Larry (---.prem.tnns.net.au)

Date: 03-17-07 11:14

I stopped coffee for a while and it made absolutely no difference. I now drink 2 cups of coffee each day and 1 cup of Green Tea. I also eat '85% cocoa' dark chocolate that is low in sugar and have never had any problems with it. Alcohol doesn't trigger my AF either, in fact my main Triggers appear to be certain types of Fish and Chilli Peppers.

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http://www.afibbers.net/forum/read.php?f=6&i=4489&t=4485#reply_4489

Re: Question about fats - just curious

Author: Larry (---.prem.tnns.net.au)

Date: 03-18-07 10:42

Age 1 to 20 - mainly saturated Fats (Butter, Beef Fat).

Age 21 to 40 - mainly Margarine and Vegetable Oils.

Age 41 to now (55) - NO Butter or Margarine, when I use an Oil it is either Olive Oil or Macadamia Oil.

Afib commenced at age 49, became almost permanent at age 54, however through diet I am now Afib free for most of the time.

Start date: March 2006

Effectiveness: The end result is that with the Diet changes I have reduced my Flec to only 1x50mg at bedtime, and I now only average an AFIB episode once a week, and normally for no longer than half an hour.

G CALESSO

http://www.afibbers.net/forum/read.php?f=6&i=2776&t=2776#reply_2776

atrial fibrillation and vitamin c

Author: G Calesso (---.dyn.optonline.net)

Date: 02-21-07 13:03

Atrial fibrillation has been associated with inflammatory changes of the heart muscles . Vitamin C, a strong natural antiinflammatory, in high doses has decreased the incidence of atrial fibrillation in some studies. I am taking 6000 to 8000 mg of Vitamin C daily divided in 4 doses and my AF is better controlled than with any other medications. The only side effect of too much Vitamin C could be diarrhea which is controlled by taking lesser amounts of it. I suggest more people should try it."

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http://www.afibbers.net/forum/read.php?f=6&i=5262&t=5262#reply_5262

AF gone with Vitamin C

Author: G Calesso (---.dyn.optonline.net)

Date: 03-30-07 19:48

My first AF was after Thanksgiving 2006. It converted spontaneously within a few hours. I was started on Toprol xl. My work up was all normal. I am 55 years old. In mid January,2007 I started with AF again every night during sleep and

converted spontaneously after a hot shower in the morning. Norpace was started , Toprol was stopped. The vagal AF persisted at night. At that point I started to look for other alternatives of treatment, i.e., ablation procedures. It looked too invasive. In my search I was intrigued by the inflammatory changes found in the myocardium of AF patients and the different anti-inflammatories that seemed to help. Vitamin C was tried with success in AF post open heart surgery at the Cleveland Clinic. I started to take 2000mg of Vitamin C 4 to 5 times a day and stopped the Norpace. I have had no AF in 2 months and feel the best I have felt in a long time. The high dose Vitamin C is well tolerated and to me has no side effects. I have had no colds either!

=====
Re: AF gone with Vitamin C
Author: G Calesso (---.dyn.optonline.net)
Date: 04-01-07 18:09

In the past 2 months I have read a lot about Vitamin C on the internet and in several books, old and new. Irwin Stone wrote "Vitamin C against disease , The healing factor" in the 70's, Linus Pauling wrote "Vitamin C and the common cold and the flu" also in the 70's , Matthias Rath, MD wrote "Why animals don't get heart attacks ... but people do" in 2003, and Hickey and Roberts wrote "Ascorbate - The Science of Vitamin C" in 2004. People who have hemochromatosis , 5 in 1000, may not be helped and may be hurt by Vitamin C, but I am convinced that 995 people in 1000 can be significantly helped by "optimum doses" of Vitamin C, i.e.,3000 to 5000mg total/ day, divided 3 to 5 times through out the day. Humans do not make vitamin C, but those animals that do make Vitamin C produce, in proportion, several 1000mg per day. I hope you start taking Vitamin C soon. It will help you prevent infections, stroke, heart attack, cancer, and perhaps atrial fibrillation too.

Start date: Jan. 2007

Effectiveness: no afib in 2 months

SALLY (Joyce's friend)

http://www.afibbers.net/forum/read.php?f=6&i=4007&t=4007#reply_4007

The List - Joyce's friend Sally
Author: PeggyM (---.usadatanet.net)
Date: 03-11-07 07:37

For List purposes, this is a grand summary of posts Joyce has made about her friend Sally. Sally was a vegetarian for some years, developed permanent afib, went to paleo diet, and does not have afib any more.

http://www.afibbers.net/forum/read.php?f=4&i=12254&t=12212#reply_12254

Author: Joyce (---.astra-net.com)
Date: 06-29-06 03:33

Please could you help a friend of mine who has been diagnosed with continual afib when she thought she was only getting occasional episodes. She has both of Hans books and likes to eat within the Zone.

Sally is 68, has been vegetarian since about 50, eating cheese and eggs several times a day for her protein. She has always suffered with constipation despite now supplementing with magnesium. She also takes taurine and lately a fish oil capsule.

I know you are almost vegan, George, and have eliminated your afib via diet/supplements and by monitoring your blood sugar levels after various food combinations.

I wonder if you would have time to give me a complete list of daily foods, ways of eating, anything in fact that I could print off and give to Sally, who doesn't have internet access.

Author: George N (---.hlrn.qwest.net)
Date: 06-29-06 06:56

My dietary habits have been the same for nearly 17 years. However I was diagnosed with afib just 2 years ago, so I don't think my diet has made a difference in my afib. I did loose some weight that I put on while out of rhythm for 2.5 months. I did this by monitoring my blood glucose and keeping it from spiking.

In my case, I attribute my afib remission to 3 grams of potassium citrate, 0.8 grams of magnesium glycinate and 4 grams taurine a day.

"She has always suffered with constipation"

This tells me she is not eating enough fiber. More veggies will help here. Also, she can increase the magnesium to the point where her stools soften.

As I said, I don't think my diet has made a whit of difference in my afib, but here is a general meal plan. I generally eat a whole foods vegetarian diet, with very little added fat. I'd guess my fat calorie % at about 15%.

Morning

Oat based granola
Non-fat yoghurt
freshly ground flax seeds
1 teaspoon cinamon
fruit - blue, black or strawberries

Lunch

salad w/cruciferous veggies like cabbage
carrots
tomatoes
a bit more nonfat yoghurt
berries

Dinner

veggies like: yam, sweet potato, barley, fresh corn, broccoli ...
salad
green peas, beans ...

I know you're big into blood type - I'm O positive, and I know this is not "eating for my type."

I also meditate 2x a day for 20-50 minutes each, do at least 30 minutes of aerobic activity a day, strength train 2-3x a week, do 20 minutes of daily yoga and lots of other activities like rock & mountain climbing, mountain & road biking, kayaking, snow skiing and etc.

Even with this diet, I'm not a thin type, still carrying the build of the American football player I was in college.

The only people I know where diet really helped their afib are Peggy M and Fran.

=====
Author: Joyce (---.astra-net.com)
Date: 06-29-06 08:25

Yes you are right I do believe in eating for one's blood type, but in this case I actually regret giving Sally the book, because as a B type she now thinks she can eat a lot of dairy with impunity! and she may have eaten a more varied diet previously. I had hoped to encourage her to try adding some small amounts of fish or meat and to eat more like Peggy [also B].

As that failed I thought you would be the best one to ask for a food list as a committed and physically active vegetarian.

You do seem to eat very little protein and that doesn't seem to fit well with the Zone re keeping inflammation at bay.

Nevertheless I will print your post off for Sally and let her take it from there. One can only lead a horse to water after all!!

Author: Joyce (---.astra-net.com)

Date: 06-29-06 08:48

A couple more questions! Apart from flax where do you get oils/fats from? Do you use any olive oil salad dressing or avocado or nuts for instance?

=====
Author: PeggyM (---.usadatanet.net)

Date: 06-29-06 10:54

"The only people I know where diet really helped their afib are Peggy M and Fran."

That is because Peggy and Fran are not vegetarians.

=====
Author: GeorgeN (---.biz.mindspring.com)

Date: 06-29-06 12:22

My own take is that the benefit of your Paleo diet is the avoidance of additives, msg and glutamates in general, not the meat or lack thereof.

"You do seem to eat very little protein and that doesn't seem to fit well with the Zone re keeping inflammation at bay."

We could discuss our opinions of the various programs - Zone, Paleo, Blood Type till the cows come home & it wouldn't do any of us much good. In fact the discussion might cause more inflammation!

"Apart from flax where do you get oils/fats from? Do you use any olive oil salad dressing or avocado or nuts for instance?"

Protein - the dairy combines nicely with the grains for plenty of protein. Sometimes I eat legume/grain combinations (classic veg.). I sometimes grind wheat to make my own bread & etc.

Oils - all foods have fats in them (even greens!)- it is just a matter of quantity. How much & what kind. I do eat nuts & avocado on occasion. I'll sprout seeds if I have time (ha, having time!). My own research with a glucometer shows that the addition of fat (even "good" fat) can really screw up your blood glucose metabolism. I've read studies that document creating diabetic rats by adding sufficient fat to their diet. Low carb programs solve this by restricting carbs so fat interfering with insulin's effectiveness is not an issue. I could write on this for quite a while, but will quit now.

=====
Author: Joyce (---.astra-net.com)

Date: 06-29-06 14:05

I'm not wanting to get into an argument, merely to learn more about how you as a vegetarian manage so that I can offer suggestions to Sally. She's 'into' zoning more than blood typing and expressed scepticism when I phoned her tonight.... but I assured her you had experimented with and measured your glucose levels.

There is no way that I could survive on the diet you list, I'd need a rumen like my cow to maximise it!!

Author: GeorgeN (---.biz.mindspring.com)
Date: 06-29-06 15:53

IMHO, no diet change will get her out of permanent afib. Because of remodeling, I think this is very difficult. The question would be, if she were converted electrically or chemically, how could she stay in NSR. My own bet would be on electrolyte supplements, as this has worked for me, but who knows?

Author: Isabelle (---.goeaston.net)
Date: 06-29-06 22:42

Too much dairy can be a trigger also. Her constipation may be due to meds or eating whole wheat items.....she may be one of those people who cannot tolerate wheat or gluten.

I found that Ryvita light Rye crackers very helpful in preventing digestive problems. I try not to eat tomatoes at mealtime because that interferes with my digestion of starches or carbs. I do eat them occasionally in between meals.

=====
Author: Joyce (---.astra-net.com)
Date: 06-30-06 03:15

Apart from supplements I do believe your strict adherence to meditation twice a day would make a big difference and also to Sally who does get very stressed with various family situations and doesn't make enough time for herself. If you ever have time and inclination I would be interested in more info on the fat/carb connections as Barry Sears seems to put more emphasis on balancing carbs with protein.

Sally says she has been better gut-function-wise since eating oatcakes. I agree about the dairy, cheese twice a day is awful from the calcium and sodium point! She wasn't on any meds until the GP gave her sotolol this week and rarely eats wheat.

=====
Author: GeorgeN (---.biz.mindspring.com)
Date: 06-30-06 11:04

Here is something I wrote in the April 2005 Afib Report. I do not claim to be an expert - I just monitor my own response to food inputs and see what happens. As to the meditation, I obviously think it is beneficial, however it is not a variable that changed with respect to afib. I'd been meditating for many years prior to afib. As to fats - I do know that it is documented that both dietary and body (especially around the liver) fat do diminish insulin's ability to effectively process carbs. There is an MD/engineer who solved his own Type I diabetes blood sugar problems without insulin with a very low carb solution - search on -- Bernstein diabetes -- at amazon.com & you'll see his books. This approach obviously works. My own sense is if you have any kind of impaired glucose metabolism that the combination of fat and carbs is not a good one. You can do one or the other, but not both. "Fast carbs" or high glycemic index carbs are especially bad, in combination with fats (see <http://www.mendosa.com/gi.htm> for more GI info).

I also wanted to address the possibility that my trigger was a hypoglycemia event. In addition, I had added about 10 pounds during my 2½-month afib event, and my blood pressure had crept up to 130/85. I wanted to address these issues also.

I purchased a Bayer Ascencia home blood glucose monitor. It was the most accurate I could find. Many home models are very inaccurate (according to their own specs – OK for a diabetic, but not for my purposes).

What I found was that hypoglycemia wasn't my problem, but hyperglycemia was. Hans' first book had also referenced that vagal afibbers might have a "flat" blood glucose response. This was not my case. I found that high glycemic index (GI) carbs could spike my blood sugar. Also the addition of fat, even "good" fat would keep my blood glucose high on a fasting test and so would a high GI meal. In a literature search, I found that this is because circulating lipids impair insulin's ability to work[4-7]. For me, I could get a 112 mg/d (6.2 mmol/l) reading on a fasting test by eating solely two helpings of ice cream for dinner, however, this would drop to the mid 80's (~4.7 mmol/l) the next day on a fasting test

following a day of eating my no added fat, whole food vegan diet. I also found that drinking 1 liter of a whole fruit drink, that I make by grinding up whole apples, oranges and other fruits hardly moves my blood sugar at all.

After two weeks of paying attention to keeping my blood sugar even, I'd dropped the 10 pounds I'd added, and my fasting glucose and my blood pressure normalized.

One detriment to this approach is the lack of essential fatty acids (EFA's) in the diet. There has been discussion of the fact that people don't convert fat from flax seeds to EFA's; however, there are some interesting abstracts on one of Hans' other sites. One reports the non- conversion of the flax-type fatty acid (percent of dietary fat not stated). However the other shows that people do convert, if their dietary fat intake is limited to 20% of calories (see the first two abstracts listed at www.oilofpisces.com/weightcontrol.html).

4. http://www.diva-portal.org/diva/getDocument?urn_nbn_se_umu_diva-26-1_fulltext.pdf;
5. Sweeny, J.S. 1927 Dietary factors that influence the dextrose tolerance test. Arch. Int. Med. 40:818-30
6. Felber, J. P., and Vannotti, A. 1964 Effects of fat infusion on glucose tolerance and insulin plasma levels. Med Exp. 10:1536
7. Anderson, J. W., et al. 1973, Effect of high glucose and high sucrose diets on glucose tolerance of normal men. Amer. J. Clin. Nutr. 26:600-607

http://www.afibbers.net/forum/read.php?f=4&i=14312&t=14250#reply_14312

Re: Fran, diet and no AFIB (con't)
Author: Joyce (---.astra-net.com)
Date: 07-30-06 03:59

My friend Sally, who is about to become connected to us when my husband sorts out her computer, is so impressed with bits from this site that I print for her and with Hans' books, she has decided to go paleo after nearly 20 years of lacto-ovo-vegetarianism. She found taurine to be so helpful to her afib that she now thinks she aggravated if not actually caused her problem by avoiding flesh and has warned her children off vegetarianism as a result of her findings.

Although taurine is not classed as an essential amino acid, meaning we can make it for ourselves given the right circumstances, I feel that as we get older we are probably not very efficient at doing so.

http://www.afibbers.net/forum/read.php?f=4&i=19065&t=19047#reply_19065

Re: Hi, looking for suggestions-
Author: Joyce (---.astra-net.com)
Date: 10-18-06 15:11

My friend was a vegetarian for over 20 years and developed eye problems and persistent afib. After 6 weeks on the paleo diet her afib became occasional and has continued to improve so much that her doc has told her to continue whatever she is doing! She also takes taurine, magnesium and potassium but has lowered the dose of these supplements too.

If you are blood type A you might find you do better without red meat as I do.

http://www.afibbers.net/forum/read.php?f=4&i=19141&t=19117#reply_19141

Re: Anecdotal observation
Author: Joyce (---.astra-net.com)
Date: 10-19-06 14:25

A friend was diagnosed with lone afib which then became permanent afib until she changed from a ovo-lacto-vegetarian diet to the paleo diet. Now she has occasional lone afib which is decreasing in frequency and duration. ...

=====
http://www.afibbers.net/forum/read.php?f=4&i=12254&t=12212#reply_12254

The update on this is that Sally gave up eating vegetarian to eat paleo and has now had 2 weeks free of a-fib. Can't remember when she changed, but less than 6 months ago. Doc says whatever she's doing carry on.... now very slim and trim in her 70th year!

=====
Author: PeggyM (---.usadatanet.net)
Date: 02-17-07 15:09

Thanks for the update, Joyce. Please congratulate Sally for me. I have a vague recollection of you telling us about this some time ago, i hope it was not caught in that deleted chunk of posts that happened while Hans was gone. Will you tell us again how often Sally was having afib episodes before she went to vegetarian, and during? Just for curiosity, because i don't think i can List her unless somebody can email her at some later date to see if it lasted.

=====
Author: Joyce (---.cache.pol.co.uk)
Date: 02-18-07 02:06

Sally was latterly in permanent afib after a year or two of intermittent episodes, but her afib didn't start until she'd been vegetarian for nearly 20 years. Now she spreads the word that vegetarianism can be a health risk!

She is a blood type B and combines BTD with paleo.

=====
Author: PeggyM (---.usadatanet.net)
Date: 02-18-07 10:00

And she went from permanent afib to 2 weeks so far of NSR using diet alone, or does she take some drug also? Either way that is wonderful.

=====
Author: Joyce (---.cache.pol.co.uk)
Date: 02-18-07 13:27

Permanent afib back to intermittent and now almost 3 weeks [latest news] free.... no drugs [atenolol to begin with which made her worse!] but supplements as recommended here.

=====
Author: PeggyM (---.usadatanet.net)
Date: 02-18-07 14:01

Realized after i posted that i had not asked about supplements. For the sake of some newbie who may be trying to figure out how to proceed, will you list what she is taking? UK brand names and sources would be very helpful to people located in the UK.

=====
http://www.afibbers.net/forum/read.php?f=6&i=3941&t=3710#reply_3941

Update on friend cont....
Author: Joyce (---.cache.pol.co.uk)
Date: 03-06-07 14:02

Continuation of <http://www.afibbers.net/forum/read.php?f=6&i=2553&t=2553>

Here's the food list Sally e-mailed me today [I'll post the supplements separately]

Subject: food

1st.thing-glass warm water with supplements.

Breakfast-Fish, usually tuna

- Fruit, usually stewed prunes and/or apricots.
- Water(hot)with slice lemon and teas.honey.

Lunch -Poached egg, grilled bacon and tomato.

- Four oatcakes(wheat free)with honey.
- an apple.
- lemon honey drink.

Mid-afternoon snack-piece beef or turkey

- banana
- lemon honey drink or hot water.

Dinner -Soup, usually celery, leek, onion or tomato.

- Meat(beef or turkey),vegetables: parsnips, carrots,
- turnip, cauliflower, cabbage, broccoli or salad.
- an orange or a grapefruit.
- lemon honey drink.

Supper -if hungry, two oatcakes, piece of meat.

I replace meat with fish when I can get fresh haddock.

I don't like pork (except bacon) or lamb which is restricting.

I'm not a "foodie" so am able to be very disciplined but anything is better than having continuous A-fib.I treat food as medication and find it is 100% better than anything the medics can come up with in my case.

After more than two years it is bliss to feel normal again.

=====
Author: Joyce (---.cache.pol.co.uk)

Date: 03-10-07 07:59

Written by Joyce during phone conversation with Sally.

Vits E and B complex from a health food shop - sorry don't know make.

When first changed to paleo diet afib was continuous, then became intermittent, but fairly severe at night from 10pm onwards.

Jackie's suggestion of eating a snack late [2 oatcakes with a slice of turkey breast or beef] stopped that.

I now eat as per Barry Sears' zone 5x a day

Used taurine for 5-6 weeks at beginning of diet when first started eating small amounts of meat and fish then found it

caused afib
Took potassium and dandelion when vegetarian - no longer needed
Took supplements in the morning and only at night if afib present.

Supplements are:

from www.highernature.co.uk

True food magnesium 1 tablet
True food vitamin C 1 tablet
True food beta carotene 1 tablet
Alpha [which is alpha lipoic acid and l-carnitine] 1 tablet

I found True food E and True food B complex made heart jumpy
so use another brand of E and B's.

I also take glucosamine, MSM, fish oil and starflower oil.

=====
http://www.afibbers.net/forum/read.php?f=6&i=18351&t=18185#reply_18351

Re: To Joyce and her friend Sally
Author: Joyce (---.cache.pol.co.uk)
Date: 11-13-07 12:50

Sally is 70 today and shares a birthday with me. We've been out to lunch to celebrate.

Sally is still clear of afib and still eating mostly paleo with a few occasional extras!!! We believe the main 'cure' for her was to add meat back into her diet, and ditch the wheat and dairy....well most of it anyway.

She doesn't even remember to take supplements every day but the 2 she swears by are magnesium and digestive enzymes.

Start date: Fall 06?

Effectiveness: still no afib as of 11/07

LON TANNER

11-11-07 13:43

I am a 73 year old physically active male who's first attack of atrial fib came about 14 years ago while having dinner at a Chinese restaurant. A continuous and rapid heart beat which continued after getting home caused me to go to the hospital Emergency Room. I had finished 18 holes of golf that day and had two gin and tonics at home after golf and before going to dinner.

The Emergency Room doctor made reference to Holiday Heart, administered some unknown (to me) drug, kept me in the hospital overnight and sometime that evening I converted to NSR. The next day I went through a series of tests at the hospital which ruled out any kind of heart disease, visited with a Cardiologist who prescribed Verapamil for me. I started taking the Verapamil and continued with it for the next two years, but the afib still surfaced about once a month. It was at this time that I discovered the Forum and started reading all the posts, sent for the book and began to try and learn a bit about this afib thing that came on at the least convenient times. I determined that I was a Vagal afibber since my attacks were coming sometimes at night while lying on my left side, or bending over to pick up my golf ball. My wife and I continued to go to New Zealand each year where we live for half the year despite my concern of getting afib on the long flight (this never has happened). I continued to Scuba Dive and continued with all the activities that I was

involved with prior to the onset of afib. I also continued to have an occasional Scotch and wine with some of my meals. While in New Zealand I had an afib attack come on one evening with a household of guests, one of whom was a young female M.D. I told her about my afib and she immediately was encouraging me to take digoxin. I politely told her that I didn't believe it was suitable for me (I got this from the Forum). She later checked with a Cardiologist that confirmed that in my case digoxin would have been contraindicated (thanks Hans). My blood pressure has always been normal and my resting heart beat around 60. Verapamil seemed to lower my blood pressure and sometimes cause syncope. I discontinued the Verapamil and for the next 9 years took nothing.

While on a cruise ship I had a tumbler of Cognac and immediately went into afib and had to go to the ships hospital. I was converted in several hours having taken some unknown drug. It was at this point that I decided to give up all hard liquor, believing it to be a trigger. My wife and I moved to our present location here in California where we spend May to November, about 8 years ago. It was at that time that I got a new Cardiologist who's first approach to my afib was to recommend my taking coumadin. I politely refused to go on coumadin, believing that I was at very low risk of stroke, given my family history and other medical data.

My afib episodes gradually came on more frequently starting eight years ago and this particular Cardiologist's only approach was for me to start coumadin. He and I had a real communication problem. I feel rotten when I am in afib, and unlike some, cannot do anything requiring much physical activity. I would usually self convert within 10 to 20 hours and then feel great. That's one of the reasons that I never asked for or took any meds after discontinuing Verapamil. However, the afib became more frequent (about every 14 days) and it was taking longer to convert. On two occasions in 2006 I had to go to ER to be converted because I was going over that 36 hour period. The ER physician suggested that I see a particular Cardiologist in the same facility as the Cardiologist I was already seeing. It was a bit awkward, but I transferred to the new Cardio. After reviewing my medical history, tests etc. he had me take a Nuclear Stress Test and later suggested that I start on 50 mg of flecainide 3 x daily. I started the flec on January 1st 2007.

Protocol-----Started January 1, 2007

Protocol-----Effectiveness-----Two short episodes in Jan, two short episodes in February ---No afib since March 2007

LARRY ZAJDEL

http://www.afibbers.net/forum/read.php?f=6&i=2039&t=2039#reply_2039

A visit from Mr. Fibbie

Author: Larry Zajdel (---.cbe.md.atlanticbb.net)

Date: 02-10-07 09:04

This morning at 4:00 am, I awoke in AF. This is my first episode since May 2006. I was beginning to think I had this thing beat. Realistically, from reading the posts here for almost 3 years I know that true long term banishment of AF is rare, especially if only using diet and over the counter supplements.

The good news is that I converted quickly by using a technique I learned from this board. I chewed up several magnesium and taurine pills, washed them down with LS tomato juice. I then waited about 30 minutes and climbed on the treadmill. Unlike my previous conversions using the treadmill at a steady pace I tried using intervals of fast running followed by slower jogging.

I used the interval technique this time because someone had mentioned on the board that they believed that it was during the transition phase between strenuous and light exercise that conversion to NSR would best occur. During the second slow period of the second interval, I converted to NSR. The total time on the treadmill was only about 12 minutes.

Hopefully this information may be of some value to a vagal fibber who may also benefit from this technique.

Re: The List, 9 months - Re: A visit from Mr. Fibbie
Author: Larry Zajdel (---.cbe.md.atlanticbb.net)
Date: 02-11-07 13:32

... At each meal I take Doctor's Best Brand High Absorption Magnesium (200mg), Source Naturals Taurine (500mg) and GNC L-Arginine (1000mg).
Right before bed I do the same but without the Arginine. In addition, I consume about 10 oz/day of LS tomato juice for potassium as well as using a salt alternative called "NoSalt"(potassium chloride). Based on a very recent blood test, my potassium is very high in the normal range but my magnesium is still very low in the normal range. Apparently, my body's set point for magnesium is low and despite my efforts my body is regulating mag at the lower end of the range. I generally avoid foods with high glycemic index with the exception of fresh fruit. I hope this helps someone....

=====
Author: Larry Zajdel (---.atk.com)
Date: 11-20-07 10:01

The supplement protocol in my older post that you cited is still accurate. In addition, I have added a couple of table spoons of Maloxx before I jog. I believe there is some GERD, acid reflux issue at play in my case and the Maloxx seems to minimize the belching/burping/burning sensations that I get when jogging. I am presently still averaging about 1 episode of AF/year.

Start date: May 2006

Effectiveness: one episode in 9 months

KEN

http://www.afibbers.net/forum/read.php?f=6&i=1073&t=1073#reply_1073

EP Visit -- Good News
Author: Ken (---.amer.csc.com)
Date: 01-24-07 12:35

I had another appointment with my EP and I just thought I would post my good news (with fingers crossed). Three months ago I started the paleo diet, magnesium, and taurine. At the time I was starting it I also had just seen my EP. I was given an event monitor for a month so he could see what I was getting, the results are good, on Nov 1st I had one minute of afib and a couple other times that month I had some pvc's and pac's and that was it. It has now been three months and I have been afib free other than the Nov 1st tiny episode, of course I still get pac's and pvc's a number of times a week but I will take it compared to the afib. One year ago I was getting my afib sometimes three times a week for a couple of hours at a time, not that that is horrible compared to what some people on this board go through but all in all it was bad for me. I just thank god for this BB, or I would have never known about the diet and the supplements. I hope things continue.

=====
Re: EP Visit -- Good News
Author: Ken (---.245.171.66.subscriber.vzavenue.net)
Date: 01-24-07 18:36

My typical diet starts off with fresh fruit (banana, melon, pineapple etc) and sometimes a couple of fried eggs, for lunch I eat a lamb kabob, rice and a small salad, dinner usually consists of a salad, meat and some sort of vegetable like spinach. I do drink plenty of water a day probably about a half gallon. The supplements I take are from this BB, the Taurine is from NOW and the magnesium glycinate is Doctors Best. I do not take potassium supplements but I make sure I eat a couple bananas a day as well as a lot of vegetables so as to get the potassium from diet. I take 200 mg of magnesium with each meal, the taurine is also taken with each meal (1000 mg) and an additional 1000 mg at bedtime.

http://www.afibbers.net/forum/read.php?f=6&i=13670&t=13652#reply_13670

Author: Ken (20.137.18.---)

Date: 08-27-07 12:43

I take a lot of vitamin C as well as the usual Magnesium (600 mg daily), and Taurine (3 grams daily). I am happy to say that is has been almost a year and I have had no a-fib, I still get pacs on occasion but that's it. Before the diet and supplement use I was getting afib 3-4 times weekly for a couple of hours each. I still pretty much stick with a paleo diet, though I do have a cookie and a taste of bread every once in awhile.

Also I should mention I still take 25 mg of atenolol daily and that was the dose I was on from the beginning.

Start date: Oct. 06?

Effectiveness: no afib as of Aug. '07

JIM

http://www.afibbers.net/forum/read.php?f=6&i=3429&t=3412#reply_3429

Re: Pinski Ablation Soon...Need Encouragement and Hans's Take on This

Author: jim (---.hsd1.fl.comcast.net)

Date: 03-02-07 17:00

I live in Pelican Sound. I have seen Dr. Pinski twice for consults. I found him very knowledgeable, honest and caring. Although I have been pretty much afib free since starting on taurine, mag and potassium, I wouldn't hesitate to use him.

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http://www.afibbers.net/forum/read.php?f=6&i=1763&t=1762#reply_1763

Author: jim (---.hsd1.fl.comcast.net)

Date: 02-05-07 14:41

I got off coumadin Jan1. I too had no risk factors but no one was going to give me the OK "It's your decision" ...'you know the risks". I must admit that I was nervous, but at 62 and very active I decided to follow Han's protocol in the "Stroke" book. I am more nervous when I feel the ectopics but that is rapidly fading.

=====
http://www.afibbers.net/forum/read.php?f=6&i=100&t=100#reply_100

going off coumadin advice

Author: jim (---.hsd1.fl.comcast.net)

Date: 01-01-07 13:16

Well thanks to this board I have had only one 36-hr bout of AF since May 29. I promised myself that on, Jan 1, I would go off coumadin and replace it with one aspirin 325mg daily. I am not certain how to phase out of coumadin and into the full 325mg aspirin. I thought I would wait 2 days and go from 81mg (I now take with Coumadin) to 2 -81mg tabs. Then wait 2 more days and go to 3-81 mg tabs etc. Make sense? Any advice is appreciated.

=====
Re: going off coumadin advice

Author: jim (---.hsd1.fl.comcast.net)

Date: 01-03-07 03:29

Well, it all changed when I started taking Magnesium(400 mg),Taurine(2 grams)and supplementing my diet with the equivalent of 4 grams of potassium. The monthly AF left and all though I still get ectopics ,they have declined as well.

Since I am vagal, I also watch how late i eat and i drink no coffee or tea even decaf.

Re: going off coumadin advice
Author: jim (---.hsd1.fl.comcast.net)
Date: 01-03-07 03:52

I sorry for the slow reply, I didn't realize I had replies to my post because I saw the word "new" and nothing underneath my post as it was before. In any event this is my story. I already posted a reply to Kagey about my eating regiment and supplementation which I got from this board.

I'll try to answer the rest now. First, I do have Hans' stroke book. My most recent Homocysteine was 8.7 and my CRP was .3 I am 62, have discussed this with my cardio who prefers that I stay on Coumadin but understands if I don't. He recommended the aspirin if I decided no Coumadin. I do not know my fibrinogen level. I must admit I'm scared to go off , which is about equal to my fear of staying on coumadin. I have no underlying structural heart issues so that places me in the AHA recommendation of choice Coumadin or Aspirin.. I am adding 200mg of E, 100 mg coQ10, continuing my exercise program of 4-5 day weekly, and upping Coromega to 3 packs daily. I plan on Nattokinase (50mg) daily beginning Friday.

I do think that a random holter might be a good idea. I feel very confident that I can tell Afib because I can feel every ectopic and when I do go into Afib my heart rate goes from mid 60's to mid 90's.

http://www.afibbers.net/forum/read.php?f=4&i=20639&t=20627#reply_20639
Re: Some Sure Triggers For Me
Author: jim (---.hsd1.fl.comcast.net)
Date: 11-11-06 13:52

I have been Afib free for 6 months since beginning Taurine(2 grams), magnesium(400mg) and potassium (4 grams but only thru food and drink). I have even stop taking my pulse 1000 times a day. I am planning to go off coumadin Jan1.

http://www.afibbers.net/forum/read.php?f=6&i=18881&t=18881#reply_18881
3 choices
Author: jim,fl (---.hsd1.fl.comcast.net)
Date: 11-23-07 06:14

I have been dealing with paroxysmal AF for the last 3 years. I get attacks every 2-3 months, generally lasting 36-48 hours. During this time, I basically have been dealing with 3 choices.

1. As one cardio said, "suck it up and live with it" take your coumadin and a beta blocker and in 3 days you feel normal.
2. Get an ablation. I have seen Drs. Saliba (CCF), Callans (U of P), Pinski (CC MIA). All said to wait, but it is my choice
3. Continue to work on learning triggers and continue with supplements i.e. taurine, mag., K etc

I am working on the latter, however sometimes it seems like my list of triggers has no end. My PVC/PAC are quite diminished but each time I get an episode I almost pick up the phone to call for an ablation. I am sorry for complaining but I can't stand to take coumadin even though I tolerate and control it well. I can't eat dinner after 6, no drinking or coffee, no salt, MSG is a problem. What a PIA!! Thanks for listening"

Re: 3 choices
Author: jim,fl (---.hsd1.fl.comcast.net)
Date: 11-23-07 19:16

Not much has changed since the earlier posts. I was getting AF once a month or less and when I started using the

supplements I have gone as long as four months in NSR. That has improved along with the ectopics which have decreased dramatically on most days. I just get frustrated when I have a set back as in getting AF in Oct and November. I am taking Jackie's advice and trying the gluten free diet for a few months to see if wheat maybe a trigger as well. I did find out that calcium is a real problem for me. I drink a quart of OJ at least daily. I mistakenly took the "calcium enriched " OJ and went into AF in November. That is what is frustrating. Mistakes mistakes!!!

=====

Re: 3 choices

Author: Jackie (---.neo.res.rr.com)

Date: 11-24-07 06:21

I agree with Sharon - a quart of OJ is a huge amount of sugar. Better to eat the whole fruit - and only one orange a day - if that. It should always be balanced out with protein to slow down the entry of glucose into the blood stream. A lot of people get reactive hypoglycemia from drinking too much fruit juice. ... "

Start date: May 29, '06

Effectiveness: One episode between May '06 and Mar. '07

BOB KALISH

http://www.afibbers.net/forum/read.php?f=4&i=22241&t=22241#reply_22241

My Afib Experience

Author: Bob Kalish (---.dyn.optonline.net)

Date: 12-12-06 20:10

I've been 'lurking' on this site for over a year since my first episode with afib, wanting to write a note of appreciation for Hans and this site. In the summer of 2005, I had my introduction to afib. After spending almost 7 days in afib and feeling every minute of it, I went to my physician who sent me to emergency where I was cardioverted.

I've been very active my whole life (I'm 47) especially in endurance activities such as running and recently triathlons. This was a life modifying experience for me. I started doing research and found this site shortly after the episode and realized that there were actions I could take that might reduce or eliminate afib episodes. I read through most of the posts and ordered a copy of Hans's book.

My first theory was that my LAF could be due to dehydration and mineral imbalance. My typical workouts might be 1-2 hours, and usually I would not rehydrate during that time. I did a 'sweat test' where you weigh yourself before and after exercise. A typical summer workout would see me losing 2-4 pounds which is 4-8 quarts of water depletion with associated minerals. I started to carry water with mineral supplements (Elete drops) during my runs.

I also started to up my potassium intake with bananas, OJ and LS V8. In the next 6 months, I had 2 additional short episodes - one I reverted with hard exercise, second required a flecainide dose. I then became more serious with the supplements and added 2G of Taurine and 800 mg Magnesium (from the site links) to my daily mix. I also was much more careful with cool-downs to get my HR settled down after workouts and eliminated sodium enhanced drinks. That was in Feb 2006. It's now been 10 months since my last episode. During that time, I've increased my workouts and racing, but thankfully have been afib free (besides an occasional ectopic beat).

I know statistics show that endurance athletes have higher occurrences of LAF - I sort of feel it may be related to the range between max HR and resting rate and the changes the heart goes through as you raise and lower the rate to the extremes. I have a very wide range (max HR ~195, resting 48) and during a cool-down, I can feel my heart move down in steps (almost like plateaus) and this is where I occasionally feel ectopic beats. My thoughts are that being out of balance on the minerals, de-hydration and improper cool-down have an affect on how the heart is able to properly regulate it's beats during transitions and this can lead to afib.

I credit this site and the information in Hans book with giving me the tools to work through my LAF. I know that afib can

be random and never really 'goes away', but at least for now, I feel it's under control.

The List, 10 months - Re: My Afib Experience
Author: Bob Kalish (64.192.136.---)
Date: 12-14-06 11:03

As my HR slows to around 100-105 BPM after hard, extended anaerobic type exercise, I will get a very occasional missed beat. Not bothersome, but I can feel them. As the rate slows to < 90, they don't seem to occur. If I do a proper cool-down, then these do not seem to occur at all. If I stay aerobic for the exercise, then I also do not seem to get these occurrences. But for the aerobic exercise, the cool-down is much quicker.

http://www.afibbers.net/forum/read.php?f=6&i=13692&t=13619#reply_13692

Re: Home made electrolyte drink
Author: Bob Kalish (---.dyn.optonline.net)
Date: 08-27-07 20:32

I've been using a product called elete (www.eletewater.com) as a way to replenish electrolytes during exercise. You add it to water and it supplies a fairly even mix of sodium, potassium, chloride and magnesium. Not a large amount of the minerals, but it adds almost no taste to filtered or bottled water.

A glass of OJ is also a good way to boost potassium before/after exercise and rehydrate.

Start date: Feb 2006

Effectiveness: at least 10 months afib free. Subsequent post in Aug. 07 did not mention further episodes.

DAVID W.

http://www.afibbers.net/forum/read.php?f=4&i=22446&t=22434#reply_22446

Re: Quick Questions..
Author: David WiW (---.dslaccess.co.uk)
Date: 12-18-06 12:27

When did you first find out you had atrial fibrillation? 1994 Age 43

How did you find out? A blast of AF. No warning. Hospital.

Did you have any symptoms? Not prior

What treatment did you use? Amiodarone IV.

Did the treatment work? Probably not thought the Cardio. NSR in 30hours.

How has (Occasional) atrial fibrillation affected your life? FEAR.

What would you say to someone just finding out they had this? Don't Panic. Don't entirely trust what you are told by medics. Read Read Read this forum and any books (ECG explained is a good book) then evaluate what you are told by the medics and others.

http://www.afibbers.net/forum/read.php?f=4&i=22062&t=22058#reply_22062

Re: To cardiovert or not

Author: David WiW (---.dslaccess.co.uk)

Date: 12-10-06 05:57

In my particular case, evidence shows that Flecaïnide neither reverts me nor prevents me from AF. Propafenone Hydrochloride has reverted me without exception on a one off bolus of 450mg within 90minutes on each occasion. I am 55 weight 75Kg.

Flec was easy to take in continuum at 100mg daily. Propafenone makes me ill but works as one off for reversion.

I am an occasional AF'er who hasn't for two and a half years - perhaps because of a big regimen of Mg and K and Taurine.

=====
http://www.afibbers.net/forum/read.php?f=4&i=21972&t=21972#reply_21972

Periodontal Bacteria? AF

Author: David WiW (---.dslaccess.co.uk)

Date: 12-08-06 13:04

I am a lone fibrillator whose first episode was in 1994 at age 43. In the following ten years I had perhaps five episodes. No episode ever lasted beyond 36hours and only once was I cardioverted. In 2004 I had a period of five months when I was in and out of AF twice a week at least. As you all know it was hell. Distressed at the lack of answers from the British Cardio Environment (No disrespect - I think it is a question of style, not of competence), I went to the Internet and to books. I found this Forum. Jackie Burgess compiled documents which included issues about supplements. I began taking Magnesium, Taurine and Potassium.

I had believed since 1994 that my upper spine was instrumental in my pre-disposition to AF. Increasingly with time the evidence suggested a direct connection.

I do not presume that my pre-disposition is not affected by other issues.

On July 27th 2004 my Osteopath manipulated my upper spine and, with a brief flurry of what appeared to ectopic beats, I became clear of the 'feeling' I have not been in AF since.

In March 2006 following the unbroken regimen of mag, taur and pot, I reduced the daily dose by 50%. In about early October I noticed that 'feeling' was returning and I noticed ectopic beats rather more unpleasantly than previously - but no AF.

I was not getting aerobic exercise. I returned to full dose mag, taur, pot. My wife ministered much work on my upper spine, without exception, giving me relief from the 'feeling'. I am aware that, this time, there seemed to be a connection with eating meals that were too large - producing the 'feeling'

By now (Dec 8th 2006) the ectopics have subsided and still no AF. (My spine is in better shape).

Today I had a meeting with a Periodontal Surgeon for lower right molar trouble which I have had for years. He explained the issues of bacterial infection connected with decay below gums and the connection with muscle decay resulting from continued circulation of associated bacteria in blood. He expanded to comment that consequences might be found in Brain, Cardio and - the other area escaped me - as he had mentioned Cardio. A discussion thus followed about heart muscle. I told him that I used Magnesium and he retorted that ... "good - do NOT stop taking it!..."

SO... does anybody out there know of a connection between this Periodontal condition and Cardio, AF, Infarction etc etc ??

Did I understand all this correctly I wonder.

NOTES.

1. I take 800mg Solgar Chelated Magnesium Twice Daily.
500mg Solgar Taurine Twice Daily.
99mg Solgar Potassium Twice Daily.
(I also take Omega when I have it and Glucosamine Sulphate 2000m daily.)
2. I am emphatic that there is a direct connection between my upper spine disorder and pre-disposition to AF.
3. In 2004 Flecainide neither prevented nor reverted me from AF.
4. In 2004 Propafenone Hydrochloride (450mg one dose) reverted me to SR within 90minutes.
5. Evidence suggested in 2004 that Propafenone 150mg daily did not prevent AF. - and by heck it made me feel ill.
6. I gave up decaf and full caffeine coffee in 2004. I also gave up alcohol but now only drink wine about two tablespoons once or twice a week!)
7. I am not a medic. I do not offer the above as any kind of science - merely by observations - correct or not!
8. I do not presume to be cured, but perhaps I have limited the extent of my pre-disposition to AF. I will always fear.
9. Only two medical practitioners (outside this Forum) have ever mentioned Magnesium in this context. One Austrian Professor and one Polish Periodontal Surgeon.
10. PEGGY M if you are out there - I have still not been in AF since 27th July 2004 as per my last post.
11. Jackie B you are still my Hero!
12. Hans - where would we all be without you.

=====
Re: Periodontal Bacteria? AF
Author: David WiW (---.dslaccess.co.uk)
Date: 12-10-06 03:33

I did suffer scoliosis at age 21 but do not now to any visible degree - other than when I sit badly (lazy) - see below.

I do expect that there will be influences upon other parts of the body as a result of spinal disorder and muscle tension etc.

I can get into a condition of unfitness where my upper spine is 'out'
--(what else can we call it ! We know when it happens just as we know when we have sciatica)-- When my spine is 'out' I am at risk of AF. I feel ectopic beats in an unpleasant (fear) way.

1. Typically I will have a heavy beam of timber which I swing round above my head to orientate correctly into the woodworking machine.
2. Lifting down reasonably weighted cases from a high shelf and twisting as I do so.
3. The apocryphal ... drawing closed the side door of a van with a body twist and some energy... I have gone into AF spontaneously twice with this movement.
4. Certain chairs can cause serious warnings, very quickly, as can sitting badly with a side twist.

I could expand on the spinal condition which prevailed the first time I ever went into AF in 1994 (The first van door action)

The second van door action in 1996 spontaneously triggered my second ever AF.

Recent evidence strongly indicates that spinal massage removes or reduces the visible effects immediately. (ectopics and that 'feeling')

There must be more than one issue generating my pre-disposition to AF.
It would appear that Mg intake has significantly reduced that pre-disposition.

The Russians apparently connected spinal disorder with cardio problems in the 1960s in Vilnius, Lithuania, but I have failed to make contact with any body of research. The Russians of course moved out of Lithuania lock stock and barrel some 15 yrs ago. The Vilnius institute thus changed.

Start date: July 27, 2004

Effectiveness: No afib since that time.

MIKE

http://www.afibbers.net/forum/read.php?f=4&i=21658&t=21658#reply_21658

My lucky story why I'm AF free!
Author: Mike (---.itsd.state.ms.us)
Date: 12-01-06 12:36

I am a 43 year old male from Jackson, Mississippi and I was diagnosed with AF 11 years ago. For the first nine years with AF I ignorantly depended on Tambocor for help. Because I never did have much confidence that the drug was working I went searching for something else - pray answered I found this website. Anyway, the reason I post is to report what I discovered to be my AF cure.....WATER.

Because of Hans' website I feel a great success from learning and practicing with many of the supplements discussed (the usual mg, k and taurine.). Earlier this year I went through a three month period without any AF and I thought to have finally found the solution. But without any warning it returned with vengeance. Once again I started asking why, why did this monster return.

The reason my AF resurfaced is because I started to train, on a daily basis, to compete in a couple of 5k road races. A summer in Mississippi is very hot, and humid, and so naturally I did some serious perspiring. Only after a couple of unusual back spasms, not related to heavy lifting, that it occurred to me that I needed more water replacement to help and prevent these muscle cramps. Almost immediately my AF stopped and after six months it hasn't returned.

I mentioned earlier this year I experienced a period of time AF free. The connection is during that three month period I purposely drank additional water to treat the possibility of dehydration related to stress. When that time of stress was over I slacked off the extra water consumption. I'm not sure if for the purpose of preventing stress problems the water did any good, but now I know what it was doing for my AF.

I realize that this is my own lucky victory and for 99% of you this simple solution is not enough. My AF is nothing compared to what most of you are going through, but I hope this helps someone.

=====
Re: My lucky story why I'm AF free!
Author: Mike (---.jan.bellsouth.net)
Date: 12-02-06 09:27

I've never officially measured how much water I'm drinking throughout the day, but it is a certain increase. The first thing I do in the morning before I have breakfast is drink at least 16 ounces of water to start the day and continue drinking all day. You can tell how scientific I am so others would be a better source. mike"

Start date: Summer '06

Effectiveness: 6 months afib free as of Dec. '06

ANN

http://www.afibbers.com/forum/read.php?f=6&i=5878&t=5850#reply_5878

Re: So, when are we cured?

Author: Ann (---.asm.bellsouth.net)

Date: 03-06-05 11:41

I believe as well that it is something with the supplements. My last afib was in June 04, when I went on a daily regimen of a custom-blend vitamin/amino acid supplement that gives me what my body was short of on a cellular level (according to the ION panel blood test I had done.....for info www.metamatrix.com).....

I stopped taking the custom blend a couple of months ago and in February noticed a recurrence of PAC's or PVC's (don't know the difference). They seemed to be increasing by the day, so I quickly pulled out my custom blend again and continued, and it is really unbelievable how, within 24 hours all PAC's/PVC's stopped again.

I am certain that lone afib, at least in my case, is a result of a nutrient, vitamin or mineral that my body is missing and is essential for my regular heartbeat, and whatever it is, it is contained in my custom blend. Needless to say, I don't think I will neglect my regular supplement intake again.

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Re: So, when are we cured?

Author: Ann (---.asm.bellsouth.net)

Date: 03-07-05 05:53

Here is the formula for amino acids I take. There is a base formula of 266 grams made up by percentages below, and where there is a plus next to it, that's what they had to add for my specific needs.

5-HTP 0.0% plus 1 gram
Arginine 9.4%
Histidine 10.1% plus 7 grams
Isoleucine 9.4% plus 2 grams
Leucine 12.9% plus 8 grams
Lysine 9.4%
Methionine 7.7%
Phenylalanine 12.9%
Taurine 0.0% plus 10 grams
Threonine 8.1%
Valine 11.1% plus 6 grams
Pyridoxal-t-phosphate .3%
Alpha-ketolutaric acid 8.5%

My vitamin blend is made up of:

Vitamin A 4000 IU
B-Carotene 5500 IU
Vitamin C 1250 mg
Vitamin D 400 IU
Vitamin E 700 IU
Vitamin K 100 mcg
Thiamin 5 mg

Riboflavin 5 mg
Niacin 25 mg
Pyridoxine 15 mg
Folic acid 400 mcg
B12 50 mcg
Biotin 100 mcg
Pantothenic Acid 25 mg
Calcium 500 mg
Iodine 75 mcg
Magnesium 250 mg
Zinc 30 mg
Selenium 300 mcg
Copper 2.5 mg
Manganese 5 mg
Chromium 400 mcg
Molybdenum 25 mcg
Boron 1 mg
Citric Acid 200 mg
Malic Acid 200 mg

Both formulas come in powder form which I mix into my orange juice in the morning. I get them from Metabolic Maintenance Products in Salem, OR www.metabolicmaintenance.com

Again, my needs were determined by an elaborate blood/urine test that checked for all sorts of things, including deficiencies, candida, mercury/lead/iron toxicity etc. It was well worth the investment (I paid \$1000)

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http://www.afibbers.com/forum/read.php?f=6&i=17759&t=17759#reply_17759

Taurine stops PACs/PVCs

Author: Ann (---.mia.bellsouth.net)

Date: 10-17-05 18:01

Hello to everyone....it's been a long time since I have checked in to this BB because I am one of the lucky ones on "THE LIST" and free of afib for over a year now! I still had occasional PACs and PVC's until I read about the use of Taurine to treat arrhythmia.....it truly seems to be a bit of a miracle how it calms the heart and the nervous system.

I don't remember reading much on this board about Taurine when I was dealing with my afib last year, so I want to share the link below, in case it helps someone else.....if you can stop the PAC's and PVC's, which seem to often precede afib, then maybe some of you can stop episodes altogether.

<http://www.coldcure.com/html/taurine.html>

http://www.afibbers.net/forum/read.php?f=4&i=2553&t=2553#reply_2553

T3 levels and arrhythmia

Author: Ann (---.asm.bellsouth.net)

Date: 02-24-06 15:41

I haven't posted in a while and don't come here often anymore, because I am on "the list".

Over 2 years ago, and a couple of months after thyroid surgery, I had my first encounter with "the beast". I was diagnosed with lone afib and am pretty sure I was actually in afib most of the time for a 2 month period. I left no stones unturned trying to help myself with natural remedies, and got on a supplement regimen which helped me stop the afib. However, I still dealt with frequent PAC's and PVC's which I could only control with Taurine. I always had a sensation of my own heartbeat, never quite feeling like myself.

Several months ago, I found a wonderful endocrinologist who listened to me, and he started me on Cytomel (T3) in addition to my daily Synthroid (T4), (My free T3 levels were within "normal" range, but on the lower normal range.) It has made a profound difference in how I feel and the sensation of my own heartbeat is now gone, as well as the need to take Taurine to control the PAC's and PVC's.

Most doctors do not consider giving T3 because they are taught to go by the TSH level, which is really useless for many people. Most hypothyroid people remain fatigued even after bringing their thyroid levels back to normal, simply because their bodies cannot convert T4 to T3. Interesting to note the following regarding afib and T3:

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=8633935&dopt=Abstract

Also, my pulse prior to adding Cytomel was 55 bpm and is now finally back to 72.

Just wanted to share in case it helps someone else solve their problem. I am so happy to be back to normal and not having to worry about afib every time my heart skipped a beat.

=====
Re: The List - Re: T3 levels and arrhythmia
Author: Ann (---.asm.bellsouth.net)
Date: 02-24-06 19:27

Low TSH levels (meaning you are getting too much thyroid replacement and are hyperthyroid) have always been linked to arrhythmia, however, few doctors recognize a link between Low T3, (even when TSH levels are normal) and arrhythmia or afib.

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http://www.afibbers.net/forum/read.php?f=4&i=4594&t=4594#reply_4594
Iodine
Author: Ann (---.asm.bellsouth.net)
Date: 03-24-06 17:44

Does anyone have any experience with iodine supplementation or painting? I keep reading about this trace mineral's necessity for proper thyroid function and health of all cells, and there are some very interesting links on this subject.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9755626&dopt=Abstract
<http://www.helpmythyroid.com/iodine.htm>

I know my arrhythmia and afib (which has been in "remission") are related to my thyroid status. I have just had my dose adjusted downward, and promptly, 3 weeks into the program, there come the PVC's and PAC's again! My endocrinologist believes only excess thyroid hormone can give you arrhythmia, but I am living proof that it is not so.....not enough does the same thing for me.

Start Date: June '04

Effectiveness: still in sweet NSR as of 3/24/06

MARK ROBINSON

Author: Mark Robinson (---.bb.sky.com)
Date: 11-14-07 15:13

NSR since 1st Jan 2007. 1g vit c + 500mg magnesium (which became ineffective from AUG 2006) + but still maintained since felt was beneficial before Aug 2006. + Now 200mg FLECAINIDE + diltiazem XL120mg

So,... attacks very approx every 6 months for 6-8 hours prior to AUG 2006 for 5 years. Aug 2006 a fib went ballistic approx 2 attacks per day ranging from seconds to say approx 12hrs max. Started sotalol and probably more frequent but less symptomatic and shorter duration attacks. Started flecainide 200mg in Nov 2006 much better NSR. ie less pacs but afib attacks of longer duration strange not like flutter or afib one up to 78hrs and one cardioverted. One 48 hrs etc.

However I felt my NSR was so good that I requested and was granted an increase to 300mg per day. This did the trick. Approx 1 month ago started lowering my dosage since my heart felt calmer and now down to 200mg and still in NSR. No pacs or other probs generally. If I have a pac even just a single one I up my dose to 300mg for that day. As stated above i also take 120mg diltiazem xl

Forgot to mention diet wise pretty typical western diet including Macdonald's and Chinese. I know I need to address this issue.

ANGUS

Author: angus (---.dialup.xtra.co.nz)
Date: 11-15-07 23:46

I am still totally dairy free and am planning to stay this way for the foreseeable future because at mid 40s my afib and health in general is still improving. Apart from aging six and three quarter years (and growing up a bit perhaps) being dairy free is the only thing I have" physically" changed and is what I am putting the improvements down to.

The biggest mistake with this protocol is telling people the reasons behind why I am dairy free (afib, general health etc.) because almost everyone I know thinks I'm nuts. But apart from that its all good:)

Start date: 5 and a half years before date of post

Effectiveness: 5.5 yrs as of 8/6/06

CHUCK MERRILL

http://www.afibbers.net/forum/read.php?f=4&i=14295&t=14295#reply_14295

Aspartame
Author: Chuck Merrill (---.dsl.bcvloh.ameritech.net)
Date: 07-29-06 14:46

I have been suffering from afib for about 3 years. Fortunately, I can feel it when it occurs which always happens at night between 10:00 and 1:00 am - pretty weird. The episodes have lasted anywhere from 2/3 minutes to 24 hours. They usually self correct, but I've been through numerous electro conversions over the 3 year period. I had an ablation about a year ago. It didn't help.

While visiting this site about 3 months ago, I saw a reference to aspartame and its causal connection to afib in some people. I had been drinking anywhere from 2 to 6 cans a day of Diet Coke. Needless to say, it was worth a try to give it up.

Within 1 week of abstinence, the afib episodes decreased to zero. I have been 100% free (nary a flutter) for about three months now.

Re: The List [3 months] - Re: Aspartame
Author: Chuck (---.dsl.bcvloh.ameritech.net)
Date: 07-30-06 11:21

About how often did your afib episodes used to occur?

On average - weekly; those that became serious enough for a hospital visit - about once every 2 or 3 months. I've gone through 6 or 7 electro conversions in that time period. I became less prone to run off to the emergency room as I got use to the condition and experience showed I often self corrected to sinus rhythm.

Also, would you tell us what hospital did your ablation, and who the doctor was?

Nassir Marrouche at the Cleveland Clinic. He has since left the Clinic to return to Germany."

Start date: [April?] 2006

Effectiveness: no afib since dropping diet coke about 3 months ago.

ALLEN

http://www.afibbers.net/forum/read.php?f=4&i=13448&t=13439#reply_13448

Re: Increase in episodes after starting supplements
Author: allen (---.bltmmd.fios.verizon.net)
Date: 07-15-06 12:34

I believe that it is possible and even probable that the magnesium caused your increased number of afib attacks.

A few years ago after reading about all the great benefits of magnesium, I started taking magnesium supplements, and immediately began having more afib attacks, so I decided that for me, magnesium supplements were a bad idea and I stopped taking them.

Another year or so went by, and I got the idea from this board to try potassium. I began drinking low sodium V8 juice on a daily basis, and almost from the day I started I noticed a big improvement in my afib. It's been around two and a half years now, and I've for the most part kept my afib at bay during this period. I also went back to a full running schedule which have included races from 16 miles long to a one mile track race I happened to do this morning. I'm running more races in a year than I did before the afib, came into my life, although I have stopped running full marathons which I used to do regularly.

Different things work for different people. I am also on 25 mgs of Toprol XL daily. And while Toprol generally takes a beating on this board, I think it has helped me, but it was only when I started the V8 that I noticed real improvement. When starting supplements I'm a believer in taking only one new thing at a time. Otherwise I believe the results can be confusing.

Re: Increase in episodes after starting supplements
Author: allen (---.bltmmd.fios.verizon.net)
Date: 07-16-06 08:16

" Do you do anything in particular to replenish your electrolytes before, during, or after you exercise? "

Nothing in particular. I should probably do more. I'm not even a big water drinker although of course I try to keep hydrated before, during and after long runs. I drink mostly water but will drink sports drinks during a race particularly long races.

" You must be in tremendous shape."

Not really. I guess I'm in decent aerobic shape for my age But I've been running for so many years that it's pretty routine and not as impressive as it sounds. I'm nowhere near the runner that I was in 1999 when my afib first started and while aging has certainly played a part in this I think the afib has been the biggest culprit. Thanks though.

Do you happen to know if you were adrenergic or vagal when you had afib?

I would phrase that: "when I have afib". While I have kept it under control, I don't claim that it's entirely gone. I have to live a certain way to keep afib out of my life: no alcohol, no caffeine, low stress, lots of potassium through V8. If I break any of those rules, I run the risk of having an afib episode. I don't think one ever cures afib by natural means, but can only hope to keep it "inactive". For the most part in these last couple of years I have succeeded.

Anyway, in answer to your question, I believe that I started off completely adrenergic, but I later had a few vagal episodes also. For the first couple of years all of my afib attacks would occur during running. There was nothing more discouraging than being several miles into a long race like maybe a half marathon (thankfully it never happened during a marathon) and suddenly start suffering from afib, and then trying to figure out how to get to the finish line.

I realize that being adrenergic puts me in a small minority on this board, and of course I'm also in the minority by engaging in much more intensive exercise than is generally recommended on this board, but as they say, everyone is different and different things work for different people. For me, running was my main avocation and I just hated to give it up

If potassium is working for you, have you considered reducing your Toprol?

Actually I did. I originally started off with 25mg, but after a year it was raised to 50 mg. When I started having success with potassium, I, on my own, started cutting my pills in half to go back to my old dosage, and my doctor later OKed that dosage, so I've been on 25 mg since. I believe that's the correct dosage for me. I tried a brief experiment on my own of trying to cut it off completely, but wasn't happy with the way I felt, so I think I'll stick with the 25. That's a pretty low dosage I believe. I felt very sluggish on the 50 and when I hear people speaking of taking 200 mg of that drug I must admit I don't know how they do it.

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Re: The List - Re: Increase in episodes after starting supplements

Author: allen (---.bltmmd.fios.verizon.net)

Date: 07-16-06 10:11

While I feel that I have been doing well in controlling my afib, and I have at least once gone six months without an episode, I'm afraid on average I don't meet that criteria to be on your "A list".

While I try to be very disciplined in maintaining the lifestyle I mentioned in my previous note, and am much better than I used to be, I do go astray occasionally, somewhat analogous to your KFC experience and I usually pay for it. I probably average several episodes during a six month period. But they are mild and usually relatively short, and I always convert on my own, so they don't really cause me a great deal of trouble as long as they don't occur during a race.

The fact that I have been able to resume my running and am racing in more races than I did eight years ago before the afib hit, and because I'm having far fewer attacks than I did the first few years of it, I feel like I'm handling it pretty successfully, but as I said, not quite as successfully as averaging zero or one attack every six months.

My afib free periods are just normal. I can't say that a day goes by that I don't give afib some thought, but I don't dwell on it. Sometimes when I'm taking a ten mile training run over some tough hills in this hot humid weather, I'll admit I'm a little surprised myself that I can do it and get away with it from an afib standpoint. I'm very thankful that I can because there was a period when I never thought I'd be doing this again.

Start date: early '04

Effectiveness; has returned to a "full running schedule" at age 66, says he is running more races now than he did before he got afib, 8 years ago.

GEORGE EBY

Author: [George Eby](#) (---.sw.biz.rr.com)

Date: 11-15-07 19:40

I have been convinced for years that taurine and L-arginine are effective in regulating rhythm, and they are. But, treatment every 4 hours can be a pain.

Several years ago I had a severe bacterial infection that prevented me from eating for over 4 days. During that time I was totally free of arrhythmias of all kinds. I talked with both my allergist and GP about the possibility that the arrhythmias were caused by food allergies, and I was roundly laughed at. So, I forgot about the idea.

Last week, my wife was sick and she didn't cook, so I didn't eat. I lost 10 pounds and during those 4 days, I was AGAIN totally free of arrhythmias. This time, I was seeing a good physician who agreed, and we will do food allergy testing starting in a few weeks, after my blood tests for 115 food allergies comes back from Immuno Laboratories in Fort Lauderdale.

DAVID S.

http://www.afibbers.com/forum/read.php?f=6&i=2432&t=2347#reply_2432

Re: Coincidence or possible breakthrough?

Author: David S (202.83.86.---)

Date: 12-21-04 23:17

Some two years ago I went without af for nearly eleven months, it was at the time of WW (Waller water) experimentation.

I inadvertently super dosed myself with WW. I make mine with "Pharmaceutical grade Magnesium Hydroxide Powder". I steadily reduced the strength to control my bowel movements as well as allowing for supplementing with a tablet (more convenient) and Mg. food/diet.

Now since I have levelled off on WW Mg strength, I get very short runs of af early am, about every two to four weeks or so. One of the other reasons also was the hypothesis PC posted about high alkalinity depleting calcium from ones bones etc? ... "

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http://www.afibbers.com/forum/read.php?f=6&i=6866&t=6839#reply_6866

Re: Poisons in our food/Waller Water

Author: David S (202.83.86.---)

Date: 03-23-05 13:27

I have been using Pharmaceutical grade Magnesium Hydroxide Powder since 04.Feb.02. I had to order mine from a local chemist that "on ordered" it from their supplier/manufacture. They had a minimum order of 5 lbs. That has lasted me about three years so far and I still have about 2 lbs to go !

As at the time I could not get "pure" MOM. I asked the same question some years ago of the MOM mix/content the only

person to reply at the time was Fran and what she said made me look into powder.

When I went from UW to Erling's WW. Erling guided me through the formula to get it right at the time. As I inadvertently supper dosed myself ! that in hindsight was a good thing as it kicked my uptake of Mg and I was free of laf for some eleven months, still take WW at two plus It a day but at a reduced pH (see PC post re pH in WW).

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Re: Poisons in our food/Waller Water
Author: Erling (---.proxy.aol.com)
Date: 03-23-05 18:13

Wal Mart's store brand of MOM, "equate", contains only "magnesium hydroxide" and "purified water". This is the brand that I have been using -- remarkably inexpensive, at least here in the U.S. I see from google.com that Wal Mart stores are also in Canada: www.walmartcanada.ca

The recipe for WW is in appendix "G" of Hans Larsen's book "Lone Atrial Fibrillation: Towards a Cure", which may be ordered at the bottom of this page.

Also find it on this forum at: <http://www.afibbers.org/Wallerwater.pdf>

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http://www.afibbers.com/forum/read.php?f=6&i=11972&t=11954#reply_11972

Re: Supplements seem to be helping
Author: David S (202.83.86.---)
Date: 06-25-05 15:24

I will run through what I do/take re vits etc via an old post of mine with some current info to see if any can help, good to hear that some things are coming together for you, you have had an hell of a trot compared to my laf. Have you had many colds etc that might be adding to inflammation of some sort, of maybe "over exercising" ?

Author: David S Date: 08-03-04

I have gone off Fleck (I use it only on demand, I have never been on Fleck long term) I was in af early am (From three to five am) for one to two hours about once a week so I decided to try without Fleck, just to see what the outcomes were. They were much the same only a little longer, one and half to two and half hours.

Over the next two to three months (from Dec to Feb 04.) I took Mg. and then (Thanks to Jackie's post on Taurine) with Taurine powder at the onset of af with a little success.

At this time of year (summer) I was drinking some two to two and half litres of WW so I was not dehydrated. My serum test for bicarb normal 30 (22 to 33) at this period I was cycling to the extent that sometimes my water intake would be more than that. I now think I was wasting K and not replacing it via diet or supplements. Although my K serum test showed in the normal 4.3 (3.2 to 4.5). And possibly wasting through physical stress over cycling.

I'm presently drinking 2 x 600 ml of WW at 175 mg Mg It per day. Since 1 litre of this contains only 175 mg. Mg, I consume approximately 210 mg, Mg. at 875 mg, bicarb It. This is a lot weaker in Mg and Co2 It than I previously mixed (250 mg Mg at 1000 + Co2) and I find that I do not get as much wind and I can drink more when I sweat/exercise.

I then added low salt V8. [although my Na is/was normal at 140 (135 to 145)] over the next three months-March until now. That has so far cut the af down to minutes.

I continue to have a banana (K) first thing in the am. I have a 250 ml glass V8 with my breakfast (more K). I snack on fruit, maybe another banana, and nuts (all for K) And all my tests have been serum tests.

If /when I get a turn of af I consume 900 mg of potassium as low salt V8 and a Mg tablet straight away, which now

terminates back into NSR within 30 to 45 minutes (So far! Knock on wood). I still get a few ectopics here and there and they generally a lead up to af-BUT-not always now. Had a run of af 03and 04.this year about 3 to 4 am, took my V8 and Mg. 3.30/4 30. am-gone by 5 am.

I try to avoid simple carbs after about two pm and do not eat a big or heavy meal at night/evening time.

I have just had another serum test (23.06.05.) whole blood, bun, and vit/mins and all vit/mins are normal even though I am supplementing constantly with Mg. and K. It just supports the fact one needs to test via an intracellular test.

I have found that it does take several weeks/months for the body to readjust to diet/vit changes.

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http://www.afibbers.com/forum/read.php?f=6&i=18370&t=18273#reply_18370

" ... have noticed over the last eighteen months to two years since I have reduced my intensity and length of exercise, and at about this time also on the WW, Mg, K, etc program. I have a lot less ectopic and not so server af episodes [my last being April for half hour] also my resting hr has gone up a touch to around 55 bpm, early am. Have also lost weight to 70 kg. 23 BMI.

Lets hope my 55 bpm resting HR is long lasting, my enlarged atrium is only transient rather than permanent. Thanks all as usual for me an enlightening post.

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http://www.afibbers.com/forum/read.php?f=6&i=19894&t=19834#reply_19894

Re: Intermittent hypokalemia?

Author: David s (---.acenet.net.au)

Date: 11-17-05 14:18

To describe the kind of afib "break through" that I now occasionally have while taking Mg. plus Mg in WW plus K in food and KC1.The break through is usually the result of either emotional stress or lack of diet control. The symptoms are far less pronounced now than earlier. In fact, most of the time all I experience is a stronger, more pronounced ectopics in NSR. It only occasionally becomes irregular af early am.

I had no benefit from magnesium citrate, but on the advice of many on this B board I switched my Mg. chelated with amino acids (plus my WW) which has definitely lessened the amount of ectopics, etc. I have lessened the severity and duration of episodes also.

My supplements are 4 gm. Fish oil, ½ gm vit C, 1 gm Mg, 500 iu vit E, and 2 to 3 lt. UW/WW at 100 mg. Mg. lt. a day, I take the sups split am/pm with food, sometimes Taurine pm. I add KC1 to my meals instead of salt, and drink LSV8 juice am/pm. I keep off all the known triggers coffee, tea, alcohol, [Simple carbs. after mid afternoon] for most of the time! I do not eat a large meal evenings, and do not drink milk of any kind.

So, with a less vigorous exercise regime, diet control [higher protein less carbs] and supplements my laf has diminished somewhat over the past three and half years. I have also lost weight, BMI about 23, hip/waist ratio 0.92. A way to go yet.

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http://www.afibbers.com/forum/read.php?f=6&i=21363&t=21221#reply_21363

Re: Finally found you!

Author: David S (---.acenet.net.au)

Date: 12-08-05 12:11

My post March 04, still much the same re my flec [Tambocor] but now 68 !

Author: David S Date: 08-03-04

I have gone off Fleck (I use it only on demand, I have never been on Fleck long term) I was in af early am (From three to five am) for one to two hours about once a week so I decided to try without Fleck, just to see what the outcomes were. They were much the same only a little longer, one and half to two and half hours.

Over the next two to three months (from Dec to Feb 04.) I took Mg. and then (Thanks to Jackie's post on Taurine) with Taurine powder at the onset of af with a little success. ... " [My note: repeat of that posted just above here, omitted.]

http://www.afibbers.com/forum/read.php?f=6&i=21475&t=21475#reply_21475

To Jackie-missed your last hello
Author: David S (---.acenet.net.au)
Date: 12-09-05 17:28

Missed your last hello, this BB sure moves along. Have been OK for some six months now. Have to watch my hydration as it is 35 c plus here, am using WW at three to four lt day with a pH of just over 7, just nice to drink. Everything else is about the same re sups and af [and just as slack with my painting!]

http://www.afibbers.net/forum/read.php?f=4&i=322&t=248#reply_322

Re: PVC-hassle today/bathing in potassium salts anyone?
Author: David S (---.acenet.net.au)
Date: 01-26-06 13:40

Where did you find that low stomach acid eventually contributed to low B12? and does this carry over to other B's? as I have a "stability" problem and am taking B12 and 6 for it.

The reason I ask is that I have been on WW for over three years now and it could be adding to the roundabout, cause and effect.

Before you jump Jackie ! as you know I have reduced my pH of WW to about 7.5 by controlling the mg of Mg and the charge of Co2 in my concentrate and the amount of water to concentrate mixture I drink.

Must be something in the water as I have not had vlaf since about the same time George + - nine/ten months.

http://www.afibbers.net/forum/read.php?f=4&i=1718&t=1680#reply_1718

Re: re 'Little Miss': Any frequent Forum Brisbane AFibbers tuned in tonight?
Author: David S (---.acenet.net.au)
Date: 02-13-06 12:40

I went to Prof David Colquhoun, The Wesley Hospital, Medical centre, 49 Chasely St, his room ph no is (07) 3371 9477.

The Prince Charles (specialist heart hospital) made me a zombie with digoxin and a better block. I am vagal with a low normal hr then of 40. ... "

http://www.afibbers.net/forum/read.php?f=4&i=3862&t=3789#reply_3862

Re: How old were you when diagnosed?
Author: David S (---.acenet.net.au)

Date: 03-15-06 12:02

I was approx 64, not had af for +- nine months now.

http://www.afibbers.net/forum/read.php?f=4&i=5284&t=5266#reply_5284

Re: Diet

Author: David S (---.acenet.net.au)

Date: 04-03-06 23:55

I post this repeat of mine to give some idea of my go with Flec and then diet, it has taken some time, as in many months, to an off then on with an af turn, to fiddle with Flec, diet, hydration etc to get as semblance of normality in life. I just plod along having got use to lifestyle changes and also listening to my body [parts !] you have to do the whole gambit, heart, gut, stools, diet, supplements, I do not take Flec now [since 05.Sept.05.] ...

The above is from my past postings, find under David S on IV and III forums. I have [very much like George] have not had an AF turn now since 05.09.05. Even prior to then for some three to four months they were getting shorter and shorter. I look back at lifestyle, eating habits, workload, profession, GERD [or something like it] was always going to be a major nemesis [to me eventually!]

Like Dean Natto served me well [then unlike Dean] but tummy troubles depicted that I only take Natto now once a week of so. I am slowly getting back a bit of GERD and find that decreasing simply carbs, chewing my food properly [An inbuilt bad habit of some years-see above!] probably some bitters first thing am and an increase in my Natto periodically.

http://www.afibbers.net/forum/read.php?f=4&i=10919&t=10850#reply_10919

Re: Magical Magnesium fixes me after waiting 16 long years.

Author: David S (---.acenet.net.au)

Date: 06-13-06 14:48

I am in Brisbane; I use "Natures Own" Mg with aminos, with considerable success. It is made in Brisbane ! and I have nothing to do with NO. I also use Taurine in the powder form by Musashi [not made in Brisbane !] because the tablets to me react in my stomach.

http://www.afibbers.net/forum/read.php?f=4&i=13641&t=13622#reply_13641

Re: uk heatwave = more afib

Author: David S (---.acenet.net.au)

Date: 07-18-06 14:45

We have 35 to 45 deg c in the summer and I have to drink at least four litres of electrolyte a day. See my past posts on WW and hydration. George and Jackie will no doubt post.

Pay attention to your Mg and K do not take too much salt try to sip constantly-bottle with you always. I cycle and have to up the anti summer time.

http://www.afibbers.net/forum/read.php?f=4&i=13659&t=13622#reply_13659

Re: uk heatwave = more afib/David S

Author: David S (---.acenet.net.au)

Date: 07-18-06 22:33

I make my WW from a two litre bottle of soda water brought from a shop [It saves me Co2 ing via soda stream etc] I then add pharmaceutical grade Magnesium Hydroxide powder. That way I get pure Mg as MOM has additives here, also I can control the Co2 and Mg ratios to give me a low Ph [aka PC posts]

If you have access to MPH powder as I call it I can send the formula that Erling and I have worked out to suit MPH powder.

Start date: Summer '04

Effectiveness: afib events reduced to minutes, episodes far apart, as of Sept. 06 at last posting to bb.

TRENT

http://www.afibbers.net/forum/read.php?f=4&i=11033&t=10960#reply_11033

Hans: Normal Mg on Exatest
Author: Trent (---.cruzio.com)
Date: 06-14-06 22:50

My Exatest Mg was normal (38.0; ref. range 33.9-41.9), but at the time of the test I hadn't had an episode in over 5 months and had been supplementing with Mg glycinate for months. Prior to that I'd had 6 episodes over the course of a year ranging from 2.5 to 6 hours plus with four and six months between episode clusters.

To date I'm 13 months afib-free and knocking on wood.

My own best guess is that my afib was in the main attributable to a chronic intestinal inflammation due to a subsequently diagnosed gluten intolerance. Plus stress. Lots of stress. And caffeine. Lots of caffeine. All of which, I'm guessing, led to adrenal burnout (also diagnosed) and a (not diagnosed but logically ensuing) electrolyte depletion (including, no doubt, magnesium).

I think that anyone with afib might consider trying -- no matter what else they do --avoiding gluten. It certainly can't hurt. Otherwise, there is a simple, relatively inexpensive and highly reliable saliva tests for both adrenal burnout and gluten intolerance."

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Re: The List - Re: Hans: Normal Mg on Exatest
Author: Trent (---.cruzio.com)
Date: 06-15-06 09:03

Well, I really need to say that I am agonizingly ever-mindful of all the afibbers who've gone a year or more without an episode only to be revisited by the beast.

That said, I think that the elimination of all gluten-containing foods was the key, in my case, to halting a cascade of biochemical events which resulted in chronic inflammation, severe adrenal fatigue and consequent electrolyte depletion. My understanding is that undiagnosed gluten intolerance (not full-blown celiac disease) is much more widespread than commonly believed. I think the stress and caffeine only exacerbated an already bad situation.

In addition, in consultation with Jackie, I adjusted my supplement program to include approximately 750 mg of Mg glycinate, 2 grams taurine daily and I placed an emphasis on potassium-rich foods. Recently I've added about 550-800 mg of Potassium gluconate (Now brand from Han's "store").

I use a combination of KAL's Cal-Mag Glycinate 1:1 (I do think I need at least some supplemental calcium) and Doctor's Best High Absorption Magnesium. The taurine is Now brand. I do take a whole bunch of other supplements as well, but those may not bear directly on the afib.

For a long time I supplemented with glandular preparations and L-glutamine (the latter to heal the intestinal tract), under the supervision of a health-care professional who specializes in the physiology of stress. (I think Jackie's research into l-glutamine has found both credible arguments that it poses a glutamate problem and credible arguments that it doesn't. Caveat emptor.)

As I posted above, there is a very simple and relatively inexpensive saliva test (The Adrenal Stress Index or ASI) which can reveal both gluten intolerance and adrenal fatigue.

You might be interested to know that I now enjoy a half-caf espresso each morning with (so far) no ill effects.

My own belief is that I and other like me haven't rid ourselves of afib, we're only managing to hold the beast at bay, one day at a time. So far so good.

2007-11-18

Well, in the last two and a half years I've had two minor, shorter episodes (2-4 hours) directly related to digestive stress. These came almost exactly two years after my last afib episode and pretty close together. They were significantly less symptomatic than previous episodes.

I am completely convinced that the major catalyst in my afib career was gluten intolerance (not celiac disease) leading to chronic intestinal inflammation and, ultimately, resulting in electrolyte imbalances. While, obviously, I'm still (and probably always will be) susceptible to afib, I no longer feel it lurking, ready to pounce. I do get regular ectopics (occasionally quite dramatic and unpleasant single events), some of which feel like they most definitely would have precipitated afib back when I was still eating gluten. I've even had runs of mild ectopics lasting hours but which never led to afib, although it's been a while. Now'days, I seem able to control ectopics with an additional dose of Mg and K+, taurine and, surprisingly, nux vomica.

I supplement with Mg glycinate (roughly 7-800mg), potassium gluconate (usually 500mg), taurine (1,500mg), d-ribose, and fish oil (among lots of other supplements which may or may not have a bearing on afib control). I also take calcium glycinate.

Other than eating what I consider a healthy diet, I do not practice any particular trigger avoidance. I enjoy a shot of espresso twice a day with a side of dark chocolate and wine in moderation. Of course, I avoid all food containing gluten.

For the time being, I am largely free of afib angst, although a thumping ectopic can throw me momentarily. But I am, needless to say, getting older (currently 65) and, assuming that afib is one of the ways my body gets out of whack, there's really no predicting, is there? However, intuitively and based on my history, I don't think my afib was/is primarily a "heart problem."

So, in sum, two short episodes in two and a half years and afib no longer a daily concern.

DAVID B.

http://www.afibbers.net/forum/read.php?f=4&i=524&t=321#reply_524

Re: Age of Vagal AF onset?

Author: DavidB (---.148.228.146.securetel.com.au)

Date: 01-29-06 18:47

I am 46 and was diagnosed a year ago at 45, I am Vagal (mostly) and initial trigger seemed to be low electrolyte balance through regular holiday drinking.

I take Mg. K and taurine supplements (plus fishoil) and have only had one episode in 8 months

Alcohol itself does not seem to be a trigger now that I maintain Mg and K levels

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http://www.afibbers.net/forum/read.php?f=4&i=1245&t=945#reply_1245

Re: To DavidB

Author: DavidB (---.148.228.146.securetel.com.au)

Date: 02-05-06 18:03

I have managed to reduce attacks (not enough time yet to say they have finished yet).

I was 1st diagnosed afib last January at the end of a weeks camping holiday at the time I thought it was alcohol that was the trigger since we had been drinking each day of the holiday - a couple of cool beers at lunch and wine with every evening meal etc. and a few nights when we consumed quote a few bottles of wine.

However since then just about every episode (i have only had 4 and have been afib free for nearly 5 months now) seemed to occur when I had not had a drink or perhaps one beer only many hours before onset.

At 1st I cut back on the alcohol a lot and worked out that I am vagal afib. But since I have always enjoyed a drink at social gatherings I started to consume again and didn't notice that it triggered any episodes. I seem to have them at night and am a little unsure but food may be a trigger last one was after having a Tandoori pizza before going to a concert and I wondered if it may have contained some msg.

I have in fact had several evenings when I have consumed a fair bit of alcohol without any onset of afib. I have gone off the sotalol my cardiologist prescribed and I am using a healthier diet (more fish and fresh vegetables together with fish oil, magnesium chelate, COQ10 and one glass of LSV8 a day). So far results are reasonable - went 3 and a half months and now 4 1/2 months without an episode, so only one episode in the last 8 months

I tend to believe that what happened last year on holiday was the daily regular drinking reduced my electrolyte levels due to the diuretic effect and that may have combined with increased intake of junk food.

Still not sure exactly what my triggers are but it seems that alcohol is unlikely to be one of them or I would have had many more episodes in the past 9 months.

I feel confident that the supplements are helping and the confidence Hans books gave me allowed me to just about demand to get off drugs. I am very aware of my heart rhythm most of the time now (Cardio said most sufferers have attacks and don't notice them which I am sure is not true with me) and I do feel ectopics now but I was probably getting them before anyway and not noticing. Other positive thing for me is that I have never felt ill or weak when in AFIB (yet) so I remain a very positive attitude towards it, I am not going to let it change my life if I can help it at all.

So I hope my story may give some motivation to others there is a big debate going on about effectiveness of supplements (vagal vs adrenergic etc) for me I am Vagal and I started supplements early after onset.

Not a blind controlled sample but I am a real life case so I think it is hard to say supplement are not worth trying.

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Re: The List - Re: To DavidB

Author: DavidB (---.148.228.146.securetel.com.au)

Date: 02-06-06 15:35

I take Nutra Life Magnesium Chelate 750mg capsules twice a day

Musahi Carnitine with COQ10 Plus tabs twice a day

and fish oil caps (can't remember the brand) twice a day.

I have one glass of low sodium V8 each morning (sometimes forget at weekends with a different routine).

Hard to describe my diet as my wife manages that mostly we just try to have a balanced diet with plenty of salad and vegetables reducing the high fat content, eat fish (salmon and various Aussie fish) a couple of times a week and keep meat portions to a reasonable level. Am also keeping off the chips and chocolate and snacks more which has had a great effect on my waist line. Common vegetables include lots of broccoli and cauliflower as well as green beans, snow peas, carrots etc. I have a salad from the sandwich bar at work most days varying between a Greek salad, fruit salad, Caesar or pasta salad. I try not to be obsessive about the diet just keep it balanced and use fresh not processed food as often as possible. Hope that helps have no idea what the potassium level will be. Measuring K levels seems all about technical how do you do that? I assume you must need to be on a very regular diet and mine is not really all that strict

Thanks for the advice about pizza, we have not used any added salt in our family diet for years. I do eat a few carbs though (like pasta based meals) should I reduce these, it is supposed to be a good energy source for exercise and I do exercise regularly.

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http://www.afibbers.net/forum/read.php?f=4&i=8704&t=8616#reply_8704

Re: Frustrated by PAF.

Author: DavidB (---.kyoceramita.com.au)

Date: 05-16-06 00:05

Try a regime of supplementation I am not as young as you (45) but have lone af and I am now 8 months without an episode once my magnesium, taurine and potassium (Low Sodium V8 drink) stabilised my electrolytes.

I like you enjoy a drink and have been lucky finding that once stabilised alcohol no longer seems to be trigger even in quite large amounts. I have to say that I am unusual in this as most I have read on posts say that alcohol contributes but there are a few of us who do not experience that

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http://www.afibbers.net/forum/read.php?f=4&i=9434&t=9249#reply_9434

Re: THE LIST... Weaker AFIB episodes anyone

Author: DavidB (---.kyoceramita.com.au)

Date: 05-23-06 16:30

On the question of rate control I was initially put on Sotalol but with comments in Hans book and here decided it was doing no particular good so came off it. Told my cardio who accepted it. I am now on nothing but supplements and if frequency of episodes rises I will suggest flec on demand to my Cardio to assist conversion but thankfully so far I have converted on my own. I always believe in avoiding prescription drugs till there is no alternative so will hold off while I have infrequent episodes and self conversion. I just don't like the idea of long term chemical usage from 46 years old if I can avoid it. You know with the help of this Bulletin Board and Hans books I believe that many of us know as much about LAF as the trained cardiologists do, this may be an arrogant an dangerous assumption but I find it hard not to come to that conclusion.

Start date: Oct. '06?

Effectiveness: 8 months afib free

RICHARD G.

http://www.afibbers.net/forum/read.php?f=4&i=8738&t=8735#reply_8738

Re: Interesting find - Hawthorne & L-Carnitine & AF
Author: Richard G (---.dsl.pltn13.pacbell.net)
Date: 05-16-06 11:45

I am a vagal afibber. I tried Hawthorne and it stopped me from having afib attacks, however, it made me more prone to migraine headaches so I had to give it up. Caffeine was also effective in preventing afib but it made me jittery and prone to migraines.

I have found that if I keep my heart rate above 125 BPM for at least a half hour a day (I take a break every third day) I can completely avoid afib. It has been seventeen months since I started this exercise regime and I have not had an attack. Prior to starting the exercise I had experimented with not exercising at all and I was averaging three or four attacks every night."

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Re: Interesting find - Hawthorne & L-Carnitine & AF
Author: Richard G (---.dsl.pltn13.pacbell.net)
Date: 05-17-06 20:54

I am 66. I keep my heart rate under 140 BPM during exercise because I find if I do I avoid over-training. I can get it up to about 160 BPM but I feel worn out later if I go on for too long at that rate.

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http://www.afibbers.net/forum/read.php?f=4&i=9624&t=9617#reply_9624

Re: high vagal tone, sodium and water
Author: Richard G (---.dsl.pltn13.pacbell.net)
Date: 05-26-06 14:56

I have high vagal tone and rather low blood pressure. I used to wake up at night having repetitive spasms. My muscles would tighten up such take I would scare my wife and wake her. The spasms were such that I could hear a repetitive Hmm, hmm, hmm. I also got head rushes any time I got up to quickly. Usually I would get out of bed and the spasms would slowly go away. One night I was particularly uncomfortable I decided to take a salt pill. I had had a similar problem that would show up after my daily jog and someone had recommended salt for that. It worked for the after jogging problem so I thought it might be a similar problem.

Well the salt worked in both cases. After the salt pill I was able to go back to bed and sleep in peace for the first time in a long time. Since then I have started salting my food more heavily and taking a salt pill before I go to bed each evening. I have neither the spasms nor the head rushes when I get up quickly. At first, I took a full gram of salt but I have since cut that back to half a gram. It works fine. I discussed taking the salt pill with my doctor; he saw problem as long as my blood pressure was as low as it is.

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http://www.afibbers.net/forum/read.php?f=4&i=21348&t=21336#reply_21348

Re: drop in pulse-does it mean anything?
Author: Richard G (---.dsl.pltn13.pacbell.net)
Date: 11-25-06 16:06

I wouldn't worry about the number as long as you feel okay. My rest HR is 38 or 39, but I have to lay down and stay still for some time to get that low. When I was in the hospital I drove them nuts because they could not set alarm below 40 BPM. When I sit I am generally in the upper 40s and low 50s. I have to get on my feet to get over 60 BPM. In every case it is asymptomatic. It is just the way I am.

Start date: Start date: Jan. '05?

Effectiveness: no afib in 17 months

ERIN

http://www.afibbers.net/forum/read.php?f=4&i=7690&t=7690#reply_7690

Found recent success

Author: Erin (---.dsl.rcsntx.swbell.net)

Date: 05-04-06 12:29

I wanted to report that, after trying many combinations of supplementation without success, I've found one that works for me! It has been a long time since I posted, and for various reasons (not only the recent death of two of my children), I've been way stressed, and have had a-fib which the doctors couldn't specify as being from extra tissue, but they wanted to go in and poke around anyway - I flat out refused!

I tried the calcium/potassium/magnesium/sodium balancing/supplementing, but without much success...I tried other supplements too, which I can't remember right now, but the one I found - yes, I said one - is Flaxseed Oil! I buy Barlean's Flax Oil, I think with Borage, and I started taking it once a day - three capsules at bedtime. My a-fib and tachycardia went away. I also was taking other stuff from allopathic and alternative docs, so I didn't recognize it at first. However, I've since stopped all the other stuff for quite a while, but kept up my Flax. This week, I ran out....

Guess what came back!?! Yep, a-fib. In one day, mind you! So, off to the health food store I went, bought my Flax Oil, and, thinking to myself, if it only takes one day of missing my dose for the a-fib to return, I probably need more than I've been taking. So, I upped it to 3-4 times a day (same three capsules), and after a day of resuming, the a-fib went away again. No trouble at all since I started again.

I know it's a short time to tell, and it's anecdotal, but I'm not running out of my Flax again! It has the added bonus of keeping things regular! ;-)

Re: Found recent success

Author: Erin (---.dsl.rcsntx.swbell.net)

Date: 05-04-06 21:28

I went from being quite regular with episodes, and tach being so severe, I would almost pass out (really think I'm an adrenal a-fibber, but no medical diagnosis to this effect)...That began while I was pregnant, from late '04 to early '05, and continued post-partum. Began with Flax in late Jan., early Feb., '06. I had tried the supplement options prior to that, again without success.

I was also on heart meds at that time, but quit those in March, fed-up and feeling way too young to be on daily meds (I even hate Singulair) -I'm only 31.

I did a 24hr monitor prior to the Flax, and it came back with *lots* of problems. I could feel the irregularities in the rhythm, but the heart docs didn't believe that I always knew when it happened. So, (ironically, after beginning Flax) I did a holter monitor for a week, intermittently. Just pushed the button at random, whenever, but hopefully when I could be still, for more accurate recording. Keep in mind that I'm usually just sitting down for a break after doing something for my other kids, so my heart rate could be anywhere. Anyway, nothing showed up on the holter (other than the fact that I'm out of shape!).

I had a gut feeling about my a-fib being adrenergic, as it seemed to be set off by allergies, so I was monitoring out of state, where I don't have much trouble allergy-wise, unlike at home (trying to convince my husband to move!). So, at this point I didn't think anything of the Flax, I was actually taking the oil for digestive reasons, and because I don't get many Omega 3's and 6's in my diet due to great concerns about mercury contamination in the fish. We also have

family history of negative reactions to vaccines, and I believe that mercury content is one big reason why...so I'm overly cautious. Fish is expensive, too (except for tuna)! This is the reason I didn't choose to supplement with fish oils instead.

So, like I mentioned, I quit the heart meds while I was away. Spite, anger, stress, frustration, feeling like no one was listening to me, docs in a hurry to cut me open, etc. But, the a-fib didn't come back, even upon my return to allergy-laden home state. I was so relieved. Somewhere along the line, I connected the dots and remembered that the Omega 3's and 6's were the one supplementation I hadn't yet tried....I wondered, could it be???

This went on for months. I kept taking my Flax, once a day, still wondering...until I ran out. And the a-fib came back. But I've already related that part of the story.

I don't wonder anymore...Hope this helps someone, anyone, hopefully more than one!

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Re: Found recent success
Author: Erin (---.dsl.rcsntx.swbell.net)
Date: 05-04-06 21:34

I don't use the liquid oil, I just can't get it down. I don't care for the flavor, etc., but then I've always tried to just take a spoonful of it, not use it as I would olive oil (hadn't thought of that). As for mg, etc...here's what the bottle says about what I take:

each capsule is 1000mg, and the nutritional info is for 3 capsules (3.0 g):
2.4g fat (.2 Saturated)
.6g dietary fiber
1.7g Polyunsaturated Fat (Omega-3 1335mg; Omega-6 388mg)
Monounsaturated Fat 0.4g (Omega-9 437mg)
Flaxseed particulate (containing lignan) 570mg

And, mine is NOT the one containing Borage oil...I wonder if that would help or hinder. I'm hesitant to mess with something that is working! Need to look up more info on Borage.

The List - Re: Found recent success
Author: PeggyM (---.usadatanet.net)
Date: 05-05-06 03:04

Erin, if I understand you right, you started taking flax oil in Jan or Feb 06, quit your heart meds in March 06, and had no more afib til you recently ran out of flax oil, and it went away again when you resumed the flax oil. Glad to hear it. I am marking your post for The List, an informal method for keeping track of posts from people who have gotten rid of their afib by means other than heart drugs or surgical procedures.

To read a great many more posts from such people, use the search function here on this site. Search in subject line only, unchecking all checkboxes except the one in front of the word Subject. Type in "The List" as a search term. Some of these posts are in this present bb, and many more in the 4th and 3rd bb's.

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Re: The List - Re: Found recent success
Author: Erin (---.dsl.rcsntx.swbell.net)
Date: 05-09-06 23:28

You understand correctly! I am quite hopeful that the success continues! I know it's anecdotal, a one case thing, but it's working so far for me, and that's what I needed.

I like The List...referenced it when I was searching for alternative remedies for myself when I started this journey.

That's where I got the information for the other supplemental therapies that I had tried. Thank you for maintaining it for those of us searching for something besides the allopathic, "Let's go in and poke around, see what we can trigger..." method!

Start date: Jan-Feb '06

Effectiveness: no afib as of 5/9/06, so long as she keeps up the flax oil.

SHALOM

http://www.afibbers.net/forum/read.php?f=4&i=7762&t=7742#reply_7762

Drastic improvement in my PAF agony...

Author: Shalom (---.242.192.217.Dial1.Seattle1.Level3.net)

Date: 05-04-06 20:21

I am 60 and in perfect health - I do not consume alcohol, coffee or tea and I do not smoke. Blood pressure 130 over 75 and Cholesterol at 167. I have suffered from Paroxysmal or Lone AF for almost three years. It used to hit me 2 or 3 times a month and as often as 3 or 4 times per week. Sometimes it is mild, and sometimes it really scares me and I had to go to ER in the middle of the night. At times it is irregular heart rates and at times it is a rapid succession of fast heart beats of 150-170 per minute. It was interfering with my job and I was very afraid to lose my job.

I have been examined and treated by several Cardiologists here in the North West. Had numerous tests done - been on Toprol XL, Coumadin (warfarin) and Flecainide. At times, some of the medications helped for a while and but then problems returned. I always suspected that my afib episodes resulted certain foods I ate - doctors generally do not agree with that theory. At my last visit with the doc he suggested that I consider an ablation by radio frequency. I decided to wait and make more inquiries with other doctors. (My English is not perfect, so please forgive my mistakes).

During a recent trip to Germany, where I was born and raised, I met some people who explained to me why eating certain foods create chemical imbalances in our bodies resulting in over acidity or under acidity. Especially with foods over 50 years of age. Some of these conditions, they said, are directly responsible for many common cases of paroxysmal or lone afib. Since I was at first a sceptic they introduced me to 11 individuals and 2 doctors who have suffered from various symptoms of afib ranging from 3 to 17 years and now are completely free - no more symptoms. Needless to say that what I have learned in those three days in Germany among those dear and precious folks changed my life.

I have returned back home last year a changed man - I am now on my sixth month with no episodes of afib whatsoever. Now, I sleep so good and so deep that I do not remember when I slept this well in my whole life. Life is so beautiful now !

1) The first thing to do, and this may seem strange to some people, you need to alkalize your system because in most cases our bodies with age become acidic. To determine the acidity level in your body, you can obtain some PH balance strips at your local pharmacy and do the test yourself. You can test the saliva or better yet, a urine test is more accurate. You need to reduce your intake of acidic foods and concentrate on alkalizing foods. My test showed that I was 5.5 (too much acid in my system).

You can find on the web much information on alkalizing foods which are mostly vegetables, fruits and other good natural foods. You will be surprised to see that some of the foods that we love to eat most, are hurting us and creating much acids in our systems - you need to stop eating them. These include foods that are high in sodium contents and most processed foods.

2) The second thing you need to do - is to supply your body with much needed amino acids that usually deplete with age and use of various medications. Those two amino acids are Arginine and Taurine. These actually will tune up your whole cardiovascular system and provide new strength to your heart. They are available at most good Health Food stores. They are highly recommended by some German physicians and Naturopaths. I take 500Mg of Taurine in the

morning and 500Mg of Arginine with my dinner. By the way, this is a very light dose but it works splendid for me. There are many good articles on the many benefits of those two amino acids on the web.

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Re: Drastic improvement in my PAF agony...
Author: Shalom (---.242.180.186.Dial1.Seattle1.Level3.net)
Date: 05-04-06 21:33

I have stopped taking Warfarin last year because one Cardiologist did not recommend it for those having short episodes of ATF (up to 2 hours) When I started taking Arginine I was on Toprol XL 2X50Mg daily - Since it is highly advised by physicians not to stop taking Toprol suddenly, I only took one 50mg of Toprol in the morning and substituted the other with one 500mg of Arginine in the evening. After two weeks, I stopped taking Toprol altogether and started to take Taurine in the mornings. Taurine is important in stabilizing the Arginine effect - it also seemed to have helped control my INR which was slightly elevated after I stopped taking Warfarin. A German naturopath suggested that I use garlic in my diet - in natural or in tablets form - garlic is a natural blood thinner. But I believe that it is the change in my diet that made a big difference in my cardiovascular system and heart, it reduced my blood pressure and lowered my cholesterol which used to be high in the past.

I read some clinical tests reports on Taurine and Arginine from German and Russian physicians who recommend that both should be taken together for best results."

Start date: 6 months before date of posts [Dec. '05?]

Effectiveness: no afib in that 6 months.

GILL

http://www.afibbers.net/forum/read.php?f=4&i=7006&t=7006#reply_7006

The List - PACs and bigeminy after Bordeaux ablation
Author: PeggyM (---.usadatanet.net)
Date: 04-24-06 15:58

Gill made this post to the current Conference Room, and i am reproducing it here because the Conference Room and the archived Conference Room Proceedings cannot be searched via the search function on the regular bulletin board. Many people have reported troublesome ectopics after ablation, Hans included, and Hans has invented the PAC-tamer to deal with them, but Gill took a slightly different path to getting rid of the ectopics. Her method bears a very, very close resemblance to the methods arrived at by other posters in The List, people who have not had ablations.

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Author: Gill (213.78.217.---)
Date: 04-20-06 01:17

Female, aged 68. Paroxysmal AF for many years, gradually increasing in frequency and duration until it became permanent in 2001. Ablation in Bordeaux Jan 2003, touch up 3 days later because of recurrence. One 2-hour episode of AF 10 days later, NSR since then. Annual 24 hour holter found no AF but some PACs and occasional PVCs..

After the ablation I had fairly frequent ectopics which Pr. Haissaguerre said I should forget about because everyone gets them. This I did, but in the last 9 months they started to become more frequent, and I started to get atrial bigeminy. These progressed rather like the AF had done, ie more frequent and longer duration. Thought about Hans's PAC tamer but it has too many calories - I have lost 84 pounds since the ablation through diet and exercise and I want to stay slim.

I sent my 'annual report' to Bordeaux in January and asked about the ectopics and bigeminy. They replied that no medication was required for ectopics even in bigeminy, but suggested that I might try taking magnesium tablets.

January 2006 - started with chelated magnesium, gradually increased to 900mg per day then reduced back to 800mg because of bowel intolerance. No change in ectopics or bigeminy.

March 6th. Started Taurine, gradually increased to 3000mg per day. Ectopics and bigeminy slightly reduced.

April 4th. Started potassium chloride, ½ teaspoon a day. Ectopics dramatically reduced. Feels as though someone has turned the volume down, and the few I now get are very gentle compared with before supplementation when it felt as though my body was being shaken by them.

I now get whole days when I hardly feel a single ectopic and have no bigeminy at all. For example, I feel my pulse in bed at night and used to have only 2 to 10 normal beats between ectopics. Last night it was 203, then I gave up counting.

This is still an experiment in progress. I intend to stay on present doses of supplements to get a longer term picture, then will try adjusting the quantities one at a time until I get the perfect cocktail.

The only drawback is the heap of pills I have to take - hard for someone who has never taken pills for anything in the past, but worth it to get rid of the ectopics and bigeminy.

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http://www.afibbers.net/forum/read.php?f=6&i=10550&t=10461#reply_10550

Re: Long Term effects after Ablation?

Author: Gill (213.78.217.---)

Date: 07-03-07 03:28

According to the Holter I was getting almost 6000 ectopic beats in 24 hours, could feel every one of them and it was very uncomfortable. So I started taking magnesium, potassium and taurine supplements. My perception was that the number decreased dramatically and I hardly noticed any ectopics. However a repeat Holter a year later showed the number to be about the same.

This puzzled me but since I couldn't come up with any reasonable explanation I just accept that I feel comfortable and get on with my life. Is it placebo effect? I don't know. I sometimes wonder if it would be a good idea to stop taking the supplements and see how I feel, but so far I haven't been brave enough.

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http://www.afibbers.net/forum/read.php?f=6&i=15657&t=15619#reply_15657

Re: ectopics

Author: Gill (213.78.217.---)

Date: 10-04-07 17:05

I get nearly 6000 ectopics on a 24 hour holter and they used to make me really uncomfortable. I started taking magnesium, then added taurine, not much difference. I finally added potassium to the mix - success. I thought they had disappeared.

However another holter showed just as many but I don't feel them like I used to and so am quite comfortable. I now just take the supplements and forget about the ectopics.

=====

Re: To Gill

Author: Gill (213.78.217.---)

Date: 11-18-07 16:10

Yes, all is well, was scuba diving (not skin diving <g>) with whale sharks and seals in the Sea of Cortez a month ago, just after my 70th birthday. Have just booked up for a dive trip to a remote part of Indonesia in early 2009. Hope no bits fall off by then!

I read the board regularly but don't post much because other people give such good advice I have nothing to add.

Still getting lots of ectopics but not feeling them because of the supplements. I haven't done any tinkering with the quantities because what I'm doing seems to work well for me. So I don't think I have anything to add to my postings that you copied to the Conference Room.

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There WAS an update after all because I had forgotten that long ago I changed from potassium chloride to potassium gluconate, and I reduced the taurine without it making any difference.

I now take, daily, in 3 divided doses --

2g taurine

4 x 250g chelated magnesium, Country Life brand

5 teaspoons Now brand potassium gluconate powder, mixed with water, which gives 2700mg of potassium.

I have a blood test every 6 months to check that my levels are not getting too high, and that my kidneys are still working well.

Start date: added KCl to mix of supplements April 4th, 2006.

Effectiveness: ectopics ceased to be felt immediately, though continuing according to later Holter results. Gill is still active [world travel, skin diving hobby] and drops us a line from time to time.

DALE

http://www.afibbers.net/forum/read.php?f=4&i=6662&t=6662#reply_6662

Another off the rat poison!

Author: Dale (---.tampabay.res.rr.com)

Date: 04-20-06 15:35

Had open heart ventricular repair in 1962. I am 65 male, about 20 pounds overweight, and last AF was one year ago.

Cardio had me on Digitek and other stuff and wanted to make sure that I had NO 'flutters' for several months before 'permitting' me to get off.

AFTER I got his permission, told him the truth- I was taking K & mg supplements that solved the problem and not covered it up.

He gave me a blank look, quietly told me to also think about CQ10 and check back in 6 months.

So now only meds are the thyroid pills.

I do know that binge eating ice cream triggers me, so am facing the obvious-shed the pounds.

Re: Another off the rat poison!
Author: Dale (---.tampabay.res.rr.com)
Date: 04-21-06 11:59

Have been using from lherb:

K gluconate 1 tsp x2
Mg chelate 1 cap x2
MultiVit no iron no vit K 1/2 half cap
vit C about 2 grams through out day

NO 'alky-hall' since 1991, no smoke

have been following food group that has good plan to eliminate sugar (all forms), wheat, flour.

So down to bread once a month. still have one (1) cup coffee morning
and only sugar is my drug of choice--- ice cream.

Up to one mile fast walk in eve., on flat streets (near Tampa)

Note: have friend who had maze procedure about 3 years ago, who was developing more and more flutters. Told him about my results, so he does bananas and LSV8 that really helped him. tried to tell him more, but said he is not really into supplements (go figure) or BB's.

Start date: April '05?

Effectiveness: one year afib free, able to discontinue warfarin

STEVE W.

http://www.afibbers.net/forum/read.php?f=4&i=4751&t=4750#reply_4751

Re: Perspective and Advice
Author: Steve W. (---.dsl.ltrkar.swbell.net)
Date: 03-27-06 09:05

Randy, I was experiencing AFIB on a regular basis two years ago. I went to the CC and was evaluated by Dr. Natale, was told I was a candidate for a PVI and an appointment scheduled. However, with Jackie's help and others on this BB as well as Han's books, I have been able to get my GERD under control, and that, along with the supplements, has really turned things around for me. I have not had an AFIB event since July, 2005. Although I continue to experience some ectopics, I believe my health is better than it has been in many years. I know that this may not last; at the suggestion of Dr. Natale's office I have rescheduled my ablation twice. I am now scheduled for June, 2006. If the AFIB returns, my plans are to eventually have the ablation.

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Re: Perspective and Advice
Author: Steve W. (---.dsl.ltrkar.swbell.net)
Date: 03-27-06 14:10

I am happy to report on what I have done, though I think it is no different than others are doing.

As I mentioned, I have experienced digestion problems for many years. I had my gall bladder removed over 30 years ago, and I think that has contributed to my continuing indigestion. I could control it with PPIs but I was concerned about

taking them for very long at a time.

I followed Jackie's recommendation to take digestive enzymes with each meal. I added to that grapefruit seed extract a twice a day (later reduced to once a day) and my GERD cleared up. No PPIs and no other meds of any kind.

At the same time, I began Magnesium, Potassium, Taurine, Fish Oil, and selenium. I was already taking Vit C, & E. The reduction in my AFIB was a gradual thing, going from a few times a week to once or twice a week, then monthly and now this nine-month run. I almost hate to say anything about it because I know it could return anytime.

I have lately had more ectopics than usual but have been taking L-Arginine for about a week and ectopics have improved greatly. I might also say that I eliminated all alcohol for about 8 months when first diagnosed but could not tell it really made a difference. So I still have alcoholic drink/s/, but never more than two on any given day. I don't know that it helps the AFIB but I tell myself it does.

Finally, I did take flecainide for about nine months that really seemed to control the AFIB. I just didn't want to take it if I didn't have to. I have not had any Flecainide for the same nine-month period. I do plan to take it on demand if necessary.

Start date: Spring 2005?

Effectiveness: No afib for 9 months.

MICHAEL FROM SF

http://www.afibbers.com/forum/read.php?f=6&i=18755&t=18719#reply_18755

Re: The List - Re: Beta blockers and vagal afibbers
Author: Michael in San Francisco (---.hsd1.ca.comcast.net)
Date: 11-01-05 08:33

Yes, my first afib episode in three years did get me into the ER. I could not figure what had happened to me. I converted back to sinus rhythm just as I arrived home at about 7:30 am from the hospital. The ER doc had put me on a beta blocker which reduced my heart rate to below 100 (from 170) which made me more comfortable.

Later that same day I had a session with my therapist, who is a psychiatrist, and we discussed the event and a few medical matters. In the discussion we talked about Mg citrate and its use as a purgative before surgeries, sigmoidoscopies, etc. I realized then that Mg citrate works as a purgative precisely because it is not highly absorbable and that the cause of my return of afib symptoms was due simply to using the wrong sort of mineral supplements. I had switched from glycinate to citrate forms of both K and Mg; now, of course, I have switched back.

The beta blocker does increase my ectopy at night and I would no doubt have had further episodes of LAF if I had not immediately restored my former mineral regime. I am in the process of tapering off the beta blockers now.

The cardiology department at my HMO (Kaiser Permanente) is very good about many issues, but poorly informed about LAF. They do not distinguish between adrenergic and vagally-mediated forms, for example.

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http://www.afibbers.net/forum/read.php?f=4&i=78&t=57#reply_78

Re: Survey: Vagal afibbers- Did supplements help?
Author: Michael in San Fran (---.hsd1.ca.comcast.net)
Date: 01-23-06 13:10

Supplements have absolutely put my afib under control for three years, when I have taken them in the proper form.

During this period, I have had a few episodes of tachycardia (for a few seconds or perhaps a minute) or PACs/PVCs and one several-hour episode of full-blown afib.

All my arrhythmia problems occurred when I: reduced my supplement regime and then stopped it for a few weeks; over a two month period when I changed my supplements from glycinate or gluconate forms of magnesium and potassium to citrate forms. I certainly have learned my lesson about using the proper chemical form of supplement.

For much of this three-year period, I have had no problems with the usual afib triggers such as coffee, tea and alcohol (always taken in moderation). During the periods when my supplement regime was compromised, these triggers once again became problems, triggering PACs/PVCs, short runs of tachycardia and a several-hour afib episode.

I am also convinced that a high-quality diet rich in fruits, vegetables and nuts can keep me afib-free, provided I avoid completely triggers such as caffeine and alcohol. Since I, like most people, am busy, go to work regularly, and generally don't manage my life with perfect competence, I depend on supplements to keep my heart in good rhythm all of the time despite occasional forays into the world of restaurants, parties, wine bars, coffee bars and microbreweries.

I have never had a problem with afib during the day. My episodes have occurred only at night after going to bed or, in one or two cases, reclining in a lounge chair.

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Re: Survey: Vagal afibbers- Did supplements help?
Author: Michael in San Fran (---.hsd1.ca.comcast.net)
Date: 01-24-06 09:16

My supplementation program, with regard to magnesium and potassium, is 1000 mg of Mg per day, in divided doses, and 2500 to 4000 mg of K per day, in divided doses. I also eat a good quantity of vegetables, fruit, whole grains and nuts.

I use magnesium glycinate (KAL brand) and an "amino acid chelate" form of potassium packaged by my local health food and vitamin shop. I also use NOW brand potassium gluconate powder which comes in a 3 lb. canister. A teaspoon of this powder contains 500 mg of K; if I am having ectopics, which sometimes arise in the evening, I take 500 to 1000 mg of K in this form which dissolves easily in water and is nearly tasteless. Within 15 or 20 minutes after taking the K in this form, my ectopics cease.

It is abundantly clear to me that taking supplements of the proper chemical form is critical to their effectiveness. I also take my supplements with three of my meals each day (I eat perhaps 5 small meals daily). I am also convinced that both Mg and K need to be taken for a supplement program to be effective.

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Re: The List - Re: Survey: Vagal afibbers- Did supplements help?
Author: Michael in San Fran (---.hsd1.ca.comcast.net)
Date: 01-24-06 09:22

I should add that I take other supplements which I think may have some benefit for my heart, but for which I do not see the immediate effects on eliminating arrhythmia. These include taurine, multi-B vitamins, omega 3 oil (flax), vitamin C, acetyl L-carnitine, vitamins A and D3, coenzyme Q10 and nattokinase."

http://www.afibbers.net/forum/read.php?f=4&i=3049&t=3043#reply_3049

Re: weaning off topol
Author: Michael in San Fran (---.hsd1.ca.comcast.net)
Date: 03-03-06 21:48

I was prescribed 50 mg of topol, 25 mg twice daily, after my last episode of afib (which came about because I inadvertently reduced my magnesium and potassium supplements over a period of about two months). Two weeks after the episode when I was feeling calm again and back on my proper supplements, I began to wean myself first by taking only the evening dose. I figured that the morning dose was unnecessary since I have only had episodes of afib

during the late evening or very early morning.

After another week or so I started taking half a tablet at night or 12.5 mg. At this dose I had a week with many episodes of frequent PACs after going to bed and one brief episode of afib, lasting about an hour, so I went back to taking 25 mg for a night or two and decided to taper off more slowly, by approximately 6 mg (1/4 tablet less each time) every four days. My first four days were at 18 mg per night (3/4 of a tablet). I continued this and was soon at 6 mg per night. After a few nights at 6 mg, I went to 3 mg and then soon to zero.

It worked. A slow tapering off.

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http://www.afibbers.net/forum/read.php?f=4&i=8682&t=8652#reply_8682

Re: Marginal PAF and water consumption

Author: Michael in San Fran (---.hsd1.ca.comcast.net)

Date: 05-15-06 16:17

Interesting that topics like this seem to arise from several LAFers at the same time.

I had been noticing that my experience of PACs/PVCs during the day varies considerably from day to day and I had wondered at the cause. This is quite apart from my experience of vagal LAF which has only occurred at night and which remits completely with a regimen of Mg and K (and other) supplements. I had recalled reading some time ago a post from PC remarking on his sense that hydration was important for his avoiding afib.

My point is that I finally have come to realize that I experience PACs/PVCs when I am drinking less water during the day. I'm now more careful about staying hydrated. When I am hydrated, I do not notice any PACs or PVCs.

I had come back here to post a note saying that I thought that adequate Mg, K AND ALSO H2O are critical for staying afib and PAC/PVC-free, for staying on "the list."

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http://www.afibbers.net/forum/read.php?f=4&i=8683&t=8616#reply_8683

Re: Frustrated by PAF.

Author: Michael in San Fran (---.hsd1.ca.comcast.net)

Date: 05-15-06 16:31

I have had not difficulty with drinking all I have wanted to while on my supplement regime of Mg, K, taurine, etc. I usually don't drink more than, say a pint of ale or a couple of glasses of wine, but twice that amount has not triggered afib (although it usually ruins my night's sleep from tossing and turning).

On the other hand, when I have neglected my supplement regime, I have had episodes of LAF (vagal type, happening only after going to bed), after having a very modest amount of alcohol.

I have also experienced episodes of afib after eating very late in the evening, or eating a large meal late in the evening, without having any alcohol.

I would suggest that you well may not have to give up all your "bad" habits of drink and eating late in the day, if you get yourself on a good supplement regime and stick to it. In the short term, (in the long term for most of the rest of us), you may have to take it easy on the drink and the late eating."

Start date: [Jan. 2003?]

Effectiveness: afib free for 3 yrs as of Jan. '06, except when straying from supplement regimen.

KESTRA

http://www.afibbers.net/forum/read.php?f=3&i=15713&t=15445#reply_15713

Re: Q. for Kestra
Author: kestra (---.ded.swbell.net)
Date: 07-23-04 10:55

I never really had my palps diagnosed as to what kind they were. Like yours, they don't show up on the holter. I was diagnosed with LAF. When I asked whether it was "vagally mediated," the cardiologist looked at me like I was nuts. Sigh.

I had flutters or palps or whatever you call them for 8 years before I had my first full blown AF episode. I believe a number of causes brought all this on: parasites, bacteria, digestive troubles, hormonal changes.

I don't know where the name "kestra" came from. I made it up, or thought I did, until I learned that it is the name of an obscure Star Trek character, it's also some other character's name in a book I don't know the title of, and it describes some kind of metallurgical process. I use it as an online pseudonym; my real name is Kate, which is a pretty name itself. It does feel weird thinking everyone thinks my name is "kestra." OK, cat's out of the bag - I'm really Kate! :-)

Miriam: I strongly recommend, if you haven't already, that you pick up a copy of "What Your Doctor May Not Tell You About Menopause," by Dr. John R. Lee. He's dead now but his book goes against what most everyone in traditional medicine will tell you, and he had the research and 30 years of clinical experience to back up his methods, which are basically, supplementing with topical USP-grade progesterone cream and nothing else."

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http://www.afibbers.net/forum/read.php?f=3&i=16867&t=16800#reply_16867

Re: evening meals as a trigger
Author: kestra (---.ded.swbell.net)
Date: 08-16-04 10:45

I haven't gotten my PACs completely beat but I am now in my 11th month afib-free by going on the paleo diet (what Richard just described), taking magnesium and other supplements, and sleeping in a recliner, as I believe I am a vagal afibber.

When I do have PACs, it's because I've eaten what I shouldn't and am bloated. And when I try to lie down in a bloated condition, many PACs.

I miss sleeping next to my husband, but it's worth it not to have afib. I have slept in the recliner now for over a year. Hard to believe, but it has worked for me. And I am working on getting rid of the bloat by doing bowel cleanses and other cleanses."

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http://www.afibbers.net/forum/read.php?f=3&i=17746&t=17639#reply_17746

Re: Fish
Author: kestra (---.ded.swbell.net)
Date: 08-31-04 20:44

I eat wild-caught salmon every day for lunch. Supposedly that has less mercury than farm fish.

I've felt better in many ways since eating this, as well as going to a paleo diet and avoiding msg and taking magnesium. I'm going on a year afib-free since making these changes. I'm also working on bowel cleanses and liver and kidney flushes and parasite cleanses.

http://www.afibbers.net/forum/read.php?f=3&i=17020&t=16800#reply_17020

Re: evening meals as a trigger - The List

Author: kestra (---.ded.swbell.net)

Date: 08-18-04 10:54

I can eat processed foods, dairy, soups, etc. sometimes and in moderation, and if other factors are present, like making sure to take my magnesium and potassium and fish oil (and in some cases increasing my dose to counteract the effects of the "bad" stuff I've eaten) I can escape having PACs. But for me it is folly to think I can play both ends against the middle and keep making all the former unhealthy food choices I made through most of my life and just take a few more supplements so I can keep doing all those things and get away with it. I just can't.

Stress plays a huge factor, at least for me. I agree calming down helps a whole lot for the PACs to lessen and disappear.

Here's what I really think about diet and lifestyle: I think we were meant to eat a variety of fresh, whole, mostly raw, organic, in-season, locally grown foods as our hunter-gatherer ancestors did for optimum health. I admit I don't only stick to locally-grown (i.e., I eat a lot of coconut milk, and there ain't no coconut palms where I live!) or in-season foods (love my hothouse avocados year-round if I can get them!), but would probably heal all kinds of things a lot quicker if I did. And I need to get a whole lot more exercise. That one is slow in coming for me, but I know I feel tons better all around when I get out and walk every day.

I'd rather heal GERD than take drugs to suppress it and have it catch up with me in a worse way later on. But I know sometimes and for some of us it takes years to make these changes. We all have to decide for ourselves what we are willing to put up with and what we are willing to do to make changes so we don't have to."

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http://www.afibbers.net/forum/read.php?f=3&i=18457&t=18413#reply_18457

Re: A day without afib/ectopics - The List

Author: kestra (---.ded.swbell.net)

Date: 09-13-04 17:09

Fran directed me to this website a year ago. I printed out the whole dang thing and put it in a notebook!

<http://www.paleofood.com/>

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http://www.afibbers.net/forum/read.php?f=3&i=18458&t=18411#reply_18458

Re: Medicinal plants against afib and anxiety.

Author: kestra (---.ded.swbell.net)

Date: 09-13-04 17:19

... The supplements Fran listed have made a huge difference for me. No afib for a year! Especially magnesium, which I take as mag. glycinate in two daily doses of 360 mg each."

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http://www.afibbers.com/forum/read.php?f=6&i=540&t=540#reply_540

Vacation Report - went hog wild and no afib

Author: kestra (---.ded.swbell.net)

Date: 11-01-04 10:39

Wanted to add this to the mix: I just returned from 3 weeks on vacation (a big stress reducer, so that helps) and had no afib and even very few PACs.

I'm one of the ones on "the list," now in 15th month afib-free after changing my eating and taking supplements, most notably mag. glycinate.

But during vacation I went nuts and ate everything under the sun - except coffee, because I know that's a trigger for me. I also don't drink, so that's not a temptation.

I ate ice cream out the wazoo, sugary desserts, massive quantities of Italian food (no Chinese, though, to avoid the msg) and tons of white bread and pizza. Guess what - no afib and very few PACs.

I do have edema in my legs, and that got bad, as well as bloating, but even with that (I'm a vagal afibber) I didn't go into afib.

I don't recommend doing this, ya know. It was stupid. But I thought it was interesting that I didn't seem to experience any bad effects afib-wise. I did continue to take my supplements every day. The best I can figure is, after almost two years of eating organic, whole foods and switching mostly to a paleo diet, along with keeping up on the supplements, I may have achieved enough healing to take such a risk for a short period and not pay the consequences.

But I'm back on my diet and behaving myself, for the most part. I must say as much as I enjoyed the Italian food and the desserts, I prefer eating my healthier way. My food doesn't have a "heaviness" that tons of Italian food creates in me.

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http://www.afibbers.com/forum/read.php?f=6&i=1249&t=1249#reply_1249

Pride Goeth Before a Fall - had afib last night

Author: kestra (---.ded.swbell.net)

Date: 11-18-04 10:32

Well, see what I got from bragging about going hog wild on vacation and no afib? Went into afib last night at 12:30 a.m. and converted back on my own this morning at 10:30. That mars my 15-month record! Wah! Does this mean I have to be taken off "The List"????

OK, so here's what I know about this episode and its possible triggers:

1. Even after coming back from vacation, I continued to eat some bad things, i.e., processed meats and breads and cheese. Not so much sweet stuff, although some. I did eat a very intense dark chocolate candy bar earlier in the day. It probably had a high caffeine content. Caffeine was the trigger of my first afib episode. 'm sure all that processed stuff had msg in it.
2. Last night I played an hour and a half of competitive badminton. I am so out of shape it isn't funny. I haven't been physically active for a long time. My heart was probably not used to it. The strange thing is, I played from 7 to 8:30. Afib occurred at 12:30 after I'd been asleep for about an hour and a half. I had trouble sleeping and my legs were aching and restless. I've noticed this leg thing accompanying other afib episodes.
3. I sat in the hot tub before going to bed. Maybe being overheated from both playing sports and the tub was part of the trigger?
4. My descent into afib was not like it had been in the past. In the past I had pounding for a minute or two and then settling into afib. This time I just slipped into afib.
5. I didn't panic. Tried some deep breathing and took several doses of fish oil, magnesium glycinate, CoQ10 and Vitamin E a couple times during the night. I was too bothered by the afib to sleep so I stayed up for several hours and worked on jewellery.
6. I didn't have what I would call "the big P," but did urinate several times while I was awake. Also had two or three

bowel movements (probably from the increased magnesium, although I'm usually not affected that way with the glycinate).

7. I have had warnings for a couple weeks that this was coming on, with increased PACs. I ignored them. Bad girl!

8. This may sound woo-woo to some, but here it is, for what it's worth: I talked to my heart and sent it love and appreciation and acknowledged that I had made choices recently that were not good for it, and apologized. I said I would go back to taking care of it and thanked it for letting me know by way of afib that I needed to make changes. I noticed a quieting of the afib after that to the point where I couldn't feel it unless I put my hand on my chest.

9. I was finally able to sleep at about 4 this morning, even with the afib. I keep left over Rythmol on hand in case I have an episode that really goes on way too long, but I didn't need it. I knew that this time, as in the last time, I would self-convert, and I did.

OK, hope this is helpful to others out there who are trying to get on "the list by using "alternative" methods of dealing with this problem.

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Re: The List - Re: Pride Goeth Before a Fall - had afib last night
Author: kestra (---.ded.swbell.net)
Date: 11-19-04 16:31

I'll look into the potassium. I do take about a tablespoon of blackstrap molasses in warm water nearly every morning. Helps get the bowels moving. There's about 173 mg of potassium in one tablespoon of molasses. Normally I don't take other potassium as a supplement. I've tried taking the 99 mg pills, but it seems that when I take it every day in pill form, my body doesn't like it somehow.

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http://www.afibbers.com/forum/read.php?f=6&i=1520&t=1432#reply_1520

Re: Must Read
Author: kestra (---.ded.swbell.net)
Date: 11-27-04 07:34

It's good to know there are alternatives and people are getting well by following common sense approaches.

Marshal: there are websites devoted to msg and its dangers and lists of processed foods that contain glutamates. Searching will find them (can't remember them right now). Msg does not have to be listed as such on a label. It can be called "spices," "hydrolyzed protein," "flavorings," etc.

If, like me, you get tired of trying to figure out what may have glutamate or not, follow this simple rule: the more processed it is the more likely it is to have glutamate and other harmful chemicals. Eat whole foods as much as possible, organic preferable. If you go out to eat, try to eat whole foods without sauces or breading on them. When we go to a buffet like Ryan's, I eat meats that have been roasted, salad and steamed vegetables. I avoid casseroles, breads and grilled meats, as the "meat tenderizer" used on them is nothing more than msg.

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http://www.afibbers.com/forum/read.php?f=6&i=2843&t=2842#reply_2843

Re: The List
Author: kestra (---.ded.swbell.net)
Date: 01-01-05 20:58

I am continuing afib free, even after my last little episode in November. I really consider that just a blip on an almost two-year recovery, brought on by pushing the envelope too far.

http://www.afibbers.com/forum/read.php?f=6&i=2845&t=2778#reply_2845

Re: Calcium Question for Jackie
Author: kestra (---.ded.swbell.net)
Date: 01-01-05 21:18

I had years of intermittent "tachycardia" before I ever went into A/F. When I did go into A/F, it was a month after having a hysterectomy for stage 1 uterine cancer.

For about 8 months before I had the surgery, I had been taking IP6 with Inositol (along with many other cancer-fighting herbs and supplements, but not calcium per se) to hopefully get rid of the cancer without having to resort to surgery. Although I believe it arrested the cancer and may have even begun to help shrink it, I still went through with the surgery.

The interesting thing is that I read somewhere that inositol is made from calcium. At that time I was not taking magnesium at the levels which I have been taking it after the surgery. I often wonder if the increased inositol helped trigger the A/F.

I don't take calcium supplements, but do eat an organic, fresh-food diet most of the time, with lots of leafy green vegetables. I take magnesium glycinate, 720 mg a day divided morning and night, and except for a foolish run of bad eating and resultant 10-hour afib episode in November, I'm around two years afib-free.

Kathleen, you might check out John R. Lee's book, "What Your Doctor May Not Tell You About Menopause." He is a proponent of using natural progesterone cream for hormone supplementation after menopause or surgical menopause. He also says the same things Jackie says above about calcium in relation to magnesium and dietary sources being better, etc.

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http://www.afibbers.com/forum/read.php?f=6&i=5583&t=5408#reply_5583

Re: Paleo diet -- yuck
Author: kestra (---.ded.swbell.net)
Date: 02-28-05 00:49

I understand the frustration with the paleo diet - indeed, any "restrictive" diet where we have to make major changes to the way we've always eaten. But after making such changes as described below, I have to say eating the way I used to doesn't taste good to me anymore. The difference between organic, freshly steamed broccoli and what you get in a restaurant is like night and day.

I eat a modified paleo diet, paying attention to how I feel and what I am craving. Sometimes I do crave more carbohydrates and will eat pasta or red potatoes - on occasion. I don't eat more meat than fruits and vegetables. But I do notice that I need to eat red meat regularly - not every day. I feel better with it. I don't absorb B-vitamin supplements well, and they make me jumpy and irritable. I do great getting them from red meat.

I know on the paleo diet you're supposed to eat organ meats, but I just can't bring myself to do it. Liver - yuck. Kidneys, heart? Yuck. So I don't, but I suspect I would feel even better if I did.

I have a very slow metabolism and tend to be hypoglycemic, also.

Here's pretty much how my diet goes (and I try to eat all organic, whole foods:

breakfast: fresh fruit such as banana, kiwi, apple, pear, pineapple and raw cashews topped with about two tablespoons Thai Kitchen Original coconut milk (which replaces dairy for me) and a dribble of non-alcohol vanilla (it's in glycerin, yum!) Sometimes I will eat scrambled eggs. If I just have to have bread, I buy the Ezekiel 4:9 bread, which is made from fresh wheat sprouts and not ground up seeds. You can get this in a health food store.

lunch: salad, with mixed greens, avocado, black olive, tomato, sprouts, green onions and a dressing of cold-pressed virgin olive oil and fresh-squeezed lemon juice and about a 3-inch square of wild-caught baked salmon.

dinner: steamed vegetables such as broccoli, carrots, cauliflower, green beans, zucchini, etc. and sometimes a meat, like baked chicken or tuna steak or another fish, and sometimes homemade meatloaf with organic beef (I have a great recipe for this!).

I try not to eat after 8 p.m. I do have terrible sugar cravings. When I just can't stand it any longer, I make a smoothie in the blender with bananas, frozen fruit, usually berries (blueberry or strawberry or sometimes peaches), coconut milk, honey, vanilla and chinese five-spice. Yum! That takes care of the craving and gives a full feeling.

No one diet is right for everyone. You have to test everything and see how you feel on it and whether it increases or decreases your afib. Modify it accordingly. Sometimes you can cheat and get away with it. I've noticed that if I cheat too much, I pay. It all comes back to which foods bloat me and thus put pressure on my vagus nerve.

And, as always, stress plays a HUGE role in afib. I'm going through huge stress right now over my work situation. That tends to up my sugar cravings and I've been having a hard time staying away from chocolate, which tends to increase afib because of its caffeine and its acid-forming and GERD-increasing nature. I'm more bloated and have had a couple afib episodes in the last few months after having gone almost two years with none, being on the modified paleo diet and reducing my stress levels."

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http://www.afibbers.com/forum/read.php?f=6&i=5694&t=5584#reply_5694

Afib after dental work - Jackie?

Author: kestra (---.ded.swbell.net)

Date: 02-28-05 01:01

Hi Jackie!

There was a thread in December about jawbone cavitations causing afib. I had a six-hour afib episode Feb. 13 (shortest one ever, and self-converted with increased mg, fish oil, etc.), a week after having periodontal work (root scaling and planing). I'd been really bloated all week and had fallen off my paleo diet wagon somewhat, too.

I believe I've still got pockets of bacteria where teeth were pulled for infection (probably clostridium). I believe the dental work stirred them up and contributed, if not caused, the afib.

I've got another appointment coming up this week (sigh). Here we go again. Any thoughts on what might help fight the little buggers off and keep them from triggering another afib episode, short of seeking out a Hal Huggins-trained dentist, which I can't do before Thursday?"

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http://www.afibbers.com/forum/read.php?f=6&i=13332&t=13211#reply_13332

Re: Need Help on the Correct Potassium amount

Author: kestra (---.ded.swbell.net)

Date: 07-16-05 23:10

It's been awhile since I posted because life has gotten busy, but thought I'd check in. I'm one of the ones on "The List," still afib-free after changing diet and taking supplements, most notably magnesium glycinate. I don't take any medications whatsoever. I still have GERD and still sleep in a recliner, but it's worth it to me to be afib-free. I've lost track of how long I've been afib-free. Years, now, except for one 6-hour episode that I brought on myself by eating the wrong things for an extended time.

http://www.afibbers.com/forum/read.php?f=6&i=22055&t=22032#reply_22055

Re: Magnesium When HR Low?

Author: kestra (---.253.65.71.Dial1.Dallas1.Level3.net)

Date: 12-18-05 14:38

Hello to all. Been a long time since I've been here. I am still afib-free but do get ectopics when I eat the wrong things and get all bloated.

I have often wondered about this magnesium/heart rate thing myself. My resting heart rate is anywhere between 48 and 60. I can't get it up above 60 unless I'm energetically active, and this concerns me.

At my last checkup, my doctor said, "You're worried about 60? Most people would kill for 60! That's a great heart rate!"

I said, "Not if you're aerobically out of shape to the point where just walking up a slight incline makes you huff and puff." He's not an EP or a cardiac doc. He just doesn't get it."

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http://www.afibbers.com/forum/read.php?f=6&i=22057&t=21947#reply_22057

Re: Prevention Backfired

Author: kestra (---.253.65.71.Dial1.Dallas1.Level3.net)

Date: 12-18-05 14:57

Been awhile since I've been here.

Like PeggyM, Fran and some others on this board, I switched to a paleo diet and started taking supplements, notably Mg glycinate, CoQ10, cod liver oil and flax oil.

When I go off the diet and eat crap like chocolate, grains, potatoes (tomatoes don't seem to bother me) or anything that bloats me - I'm a vagal afibber - I get ectopics. If I do it for too long or stay bloated for too long, I go into afib. But that is few and far between. I'll go a year, two, before having an episode because I usually manage to get back on track before that happens.

I also continue to sleep in a recliner, which helps keep the pressure off the vagus nerve, and keeps me out of afib.

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Re: Prevention Backfired

Author: kestra (---.253.71.156.Dial1.Dallas1.Level3.net)

Date: 12-18-05 20:59

I would say: try a strict paleo diet for awhile and see if it helps. Then experiment: you might be able to get away with some things once in awhile, or some things verboten on the diet may not be a problem for you.

I can eat feta cheese without a problem, so I have it in my salad every day. I can't drink milk or eat ice cream for very long before my heart starts protesting. Dairy is a big no-no generally. But I also eat feta cheese that is made from sheep's milk and is not GMO. I also try to eat organic everything and as much raw food as possible. I know it's expensive, but it's a choice I'm willing to make to try to stay healthy. I'm rarely sick.

Other things that I'm sure you've seen people say here have been helpful for me, too, such as don't eat after 8 p.m., don't get dehydrated, avoid caffeine, avoid stress! Stress is a big one.

Two years ago my husband and I gave up television. We don't have satellite, cable or antenna. If we want to watch a movie, we rent it or go to the theater. I can't tell you what a huge difference just that action has made. We spend time working on creative projects, reading, or going on the internet - but I even do less of that than I used to (don't hang out

in chatrooms).

I am so grateful to this board, and especially Fran, for showing me a better way - for me - to handle and get rid of my afib. I couldn't handle the medications. I do not do coumadin or cardizem or anything. I have an old bottle of rhythmol if I ever get to the point where I go into afib and can't self-convert in a reasonable time frame. But the last few episodes I've had, 2 or 3 about a year apart, I self-converted by loading up on potassium, magnesium, CoQ10 and fish oils.

If anyone would like more complete details about my journey with this than are included in my previous posts, please feel free to email me. I've been forgetting to check back here for awhile I guess cuz with afib gone, it's outta sight, outta mind."

http://www.afibbers.net/forum/read.php?f=6&i=11463&t=11463#reply_11463

Newsletter topic re magnesium

Author: kestra (---.ks.ks.cox.net)

Date: 07-18-07 10:14

Sorry I haven't been around in the last long while.

I am one of the people on "The List" and continue without afib by observing diet and supplements. Feel free to contact me if you would like info on how I maintain afib-free.

Re the article on magnesium supplementation and intravenous magnesium to curb an episode. Hans mentions that oral supplementation may not be practical because of increased diarrhea. This is probably true for every form of magnesium EXCEPT magnesium glycinate.

I get it from Willner Chemists, the Pure Encapsulations brand, and take the contents of 3 120 mg. caps in the morning and three at night before bed, totally 720 mg. per day. That is, I empty the capsules into a spoon and take with water so they begin to absorb immediately. I also take 300 mg. of CoQ10 before bed every night.

During the one or two afib episodes I've had in the last four years, I increased the above supplements, taking double the dosage and more over the four hours or so it takes to convert back to sinus rhythm, and it always works in four hours.

Of course, this is following a mostly organic, paleo-style diet in daily life, also.

Start date: Sept. '03?

Effectiveness: 2 episodes since then, as of 7/07

ELLEN

http://www.afibbers.com/forum/read.php?f=6&i=17762&t=17762#reply_17762

40 years with Atrial Fib, but now a new person!

Author: Ellen (24.106.231.---)

Date: 10-17-05 18:34

This is my first visit to this board, so hello, Everyone! My name is Ellen. I'll try to be concise here, because there are a lot of years to cover!

I'm 54 years old and developed paroxysmal atrial fibrillation when I was 14, although the doctor called it tachycardia back then. I was treated with various medications such as digoxin, Inderal and a bunch of others. All of them lowered my already low blood pressure and made me miserable.

Back then I was unable to determine what triggered the events. Sometimes it seemed stress-related; other times it was exercise-induced, or so I thought.

Through the years I stayed off cardiac meds for the most part and dealt with my atrial fib episodes as they arose. It wasn't until 1999 that my new cardiologist impressed me with the blood clot dangers of staying in atrial fib for longer than 24 hours without blood thinners. He didn't recommend that I be on Coumadin on a daily basis because of the unpredictable and infrequent (usually) nature of my episodes. He did suggest Rythmol (I had tried that before and it did NOT agree with me), Norpace, Quinidine, or a few others but I simply knew they would make me feel weak, tired and horrible, as they all act to lower blood pressure. Mine usually hovers around 106/68 without medication.

Under his care, I was told to call the office whenever I went into a-fib and it always led to cardioversion; sometimes it was outpatient and sometimes they kept me overnight. Since I go to a large group of cardiologists, each one seemed to have a different idea of what medicine I should take. I remained steadfast in my determination not to take ANY medication on a daily basis, since I was having episodes that required cardioversion only about 4 times per year. I OFTEN had what I called "flutters" or "blips," where I could detect my heart attempting to go out of rhythm but I would lie down, breathe a certain way, and it would subside.

(Trying to condense this ... really!)

In the early months of 2004, my doctor highly recommended an RF ablation. I was scared of it but he told me the success rate was around 89%. The odds of death from the procedure were around 1%, which was a bit high for me (!) but I decided to do it.

In April, 2004 I had the RF ablation. Instead of taking 3-4 hours, it took 6 hours. At some point, the doctor thought he saw a shadow of some sort and feared they had encountered a complication, but in the end, everything turned out okay, he said. He did not think I would ever have a fib again. I was delighted.

I felt like garbage for the first 4-5 weeks after the ablation and wondered if I had done the wrong thing or if the doctor had perhaps actually damaged my heart. Then gradually, I felt better. I never felt completely okay, though; it was as if my heart kept trying to go out of whack.

In July, 2004, we went on a trip to California. While in San Francisco, I was lying in bed and to my horror, started an atrial fib episode. I willed it to go away. I prayed for it to go away. I simply could NOT believe that the ablation had failed and that here I was, in a strange town, with my "fixed" heart out of rhythm.

We went to the ER and they did blood work. The ER doctor announced that no wonder I was out of rhythm: my potassium level was 2.8 (normal range is 3.5 - 5.5). Suddenly I got flashbacks to other times when I was in the hospital to get cardioverted. They invariably told me my potassium level was unusually low and made me drink this hideous yellow concoction to raise it quickly, before they would even cardiovert me.

They raised my K level and cardioverted me. The ER doctor suggested that I go to a dietician and get suggestions for a potassium-rich diet. Meanwhile, I bought some over-the-counter K supplements at GNC and took them for the remainder of the trip.

Once I got home, I consulted with a dietician, who outlined a good K-rich diet. But before I could really implement it, I went into a fib again and called my own doctor, who told me to come on over to the ER. Before I left the house, I drank a large glass of low-sodium V-8 (the best and fastest method of getting about 850 mg of potassium into my system) and ate a banana.

I sat in the waiting room and about 30 minutes later, my heart rhythm corrected. When I got in to see my doctor, I told him what had happened ... gave him the story of the San Francisco experience and my realization that every time I came for cardioversion, I seemed to have a K level of around 2.8.

My cardiologist sent me to a kidney specialist to find out if my kidneys were perhaps "wasting" potassium, which is something that some people's kidneys just do. The nephrologist confirmed that my kidneys do, in fact, waste quite a lot

of potassium, and he prescribed a prescription dose of potassium in capsule form to take every day, along with a potassium-rich diet.

My life has completely changed. That was July, 2004. It is now October, 2005 and not only have I not had an episode of atrial fib since then, but also I have had only one "scare," and it was after a particularly stressful few days when I knew I had not stuck to my high-potassium regiment. When I realized what was happening, I loaded up on V-8 and bananas, sweet potatoes, spinach and almonds, and by the next day I was fine and I've been fine since.

If you have a fib, then you know how this must feel. Before, I thought about my heart rate almost constantly, checking my pulse in my neck, feeling little blips and skips and thumps. I was afraid to travel for fear I'd go out of rhythm while away from home.

I often had precursors to the atrial fib episodes. I often got headaches and then 2-3 days later, I'd be in a fib. I had aching joints ... then a day or so later, here came the atrial fib. I had a sense of disorientation and then later that day, my heart would be out of rhythm. All those symptoms are also related to low potassium! I no longer have those symptoms.

I go in for blood potassium level checks every two months but except for those days, or when I am visiting a board such as this one, I give little thought to my heart at all.

Diet and the potassium supplement absolutely fixed my problem. No beta blockers. No heavy-duty cardiac meds that have bad side effects.

One important fact: Potassium does not get metabolized properly without the proper level of magnesium in the system. I also take an OTC magnesium supplement (250 mg) once a day to ensure that the magnesium level is okay.

I have told my experience to three friends, all of whom have had either atrial fib or other heart arrhythmias; every single one of them started on the V-8 and other high-K foods and none of them is having trouble anymore. I am not making this up. To his relief, one was able to go off Amiodarone.

I often think that the doctors are just trained to think that medicines are the only treatment, and maybe they are ... for some people. But NEVER had ANY doctor suggested a high-potassium diet for me, or a K supplement, or had suggested that I have my kidneys checked, until the doctor in San Francisco. When I talked to my own doctor about it, he initially sort of pooh-poohed it, saying that yes, potassium is important for heart regulation, but I think he figured I wouldn't be able to stay away from the cardioversion lab for very long. Guess what? I honestly do not think I will ever have atrial fib again.

It's important to know that before you start loading up on potassium, you should have your kidneys checked. People who have kidney disease, diabetes and other conditions have to be very cautious that they do not ingest too much potassium!

The change in my life and my heart health has been amazing. But I was thoroughly checked before starting this regimen. It certainly has solved my problems.

I'm hoping that reading this might help some of you by opening up the possibility that you may go into atrial fibrillation from something as basic as a potassium deficiency.

On October 24 I will go in for my annual 24-hour Holter Monitor. I can't wait! I just know the doctor is going to be amazed at the change in my readout. He was as disappointed as I was that the ablation did not work, and he did state that, sadly, it has to be classified as a failure. He said that although it may have eliminated SOME of the bad pathways, clearly it did not erase all of them, or I would not have experienced the episode on SF or the one a week later (corrected by the V-8 and banana).

If any of you wish to discuss this more, please feel free to email me at ellen@ellenspot.com. Thank you.

Re: "The List" Re: 40 years with Atrial Fib, but now a new person!
Author: Ellen (24.106.231.---)
Date: 10-17-05 20:15

I have wondered why NONE of the doctors I've consulted has ever suggested trying this approach before resorting to medications. Do you have any idea why they don't? It seems so basic and logical to me now.

I don't like to think that they opted not to try increasing my potassium because it would mean fewer visits (less income) to them but sometimes we wonder, I guess.

It wasn't just one or two or even three times that, before cardioversion, I had to have either the yellow liquid potassium or the (heaven forbid!) IV potassium. That IV potassium was possibly the most painful thing I've endured. The burning! They told me it would be bad, but I had no idea a shot could be that awful. I'm very good with injections.

Wouldn't you think that after seeing that whenever I showed up in atrial fib and in need of cardioversion, my potassium level was 2.8 or below, they might make a logical connection? I remember asking about it once and was told, "Don't worry; we'll get you within a normal range and then correct your rhythm." Thanks, but that hardly addressed the issue.

Interestingly, even with all the attention I give to my K and magnesium levels, I have never had a blood test for potassium show me at higher than 5.2, which is still within the "normal" range.

Thanks so much for the reply. I wish I'd found this board a long time ago. I was directed to it by a new friend of mine whose husband is undergoing treatment for atrial fibrillation."

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Re: 40 years with Atrial Fib, but now a new person!
Author: Ellen (24.106.231.---)
Date: 10-23-05 18:03

Regarding the kidney test:

I went to a nephrologist who had me collect urine in a container for 24 hours. I turned the container in and he was able to tell that my kidneys waste potassium. I know so little about how they do kidney tests that I was just glad he was able to find out what he needed to know without some sort of invasive or gross procedure!

The potassium has turned my life around.

=====
Re: 40 years with Atrial Fib, but now a new person!
Author: Ellen (24.106.231.---)
Date: 10-23-05 18:08

Sometimes potassium from food just isn't enough ... and the over-the-counter potassium supplements are fairly weak. I take a prescription strength capsule twice a day; each one has 10 milliequivalents (different measure from milligrams) and it is time-released so I am getting potassium in my bloodstream 24 hours per day. I like that idea and feel that, if my diet isn't up to par, I am "covered."

I can definitely tell when I am getting low. I start feeling sort of achy and begin to have a headache, and start feeling "skippy," as I call it when I get flutters. I always drink a tall glass of low sodium V-8 as soon as I feel these symptoms. Improvement is very fast - within 30 minutes.

Please keep in mind that digestive disorders such as diarrhea, especially, can very quickly deplete your system's supply of potassium, magnesium and other electrolytes. Vomiting is the worst (in many ways - I haven't thrown up since 1974 because I am SO phobic about it).

Re: 40 years with Atrial Fib, but now a new person!
Author: Ellen (24.106.231.---)
Date: 10-23-05 18:11

I am so glad you noticed an improvement with the V8 and bananas. Almonds and apricots (if you can stand to eat apricots - yuck, they remind me of chewing on a dead rodent - sorry! haha!) are excellent.

I wonder why no one's doctors seem to recommend trying this approach before going on intense drugs that require hospitalization to even START them? Mine sure didn't."

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Re: 40 years with Atrial Fib, but now a new person!
Author: Ellen (24.106.231.---)
Date: 10-23-05 18:16

After my ablation in April, 2004, I felt like total dog-doo for about three weeks. I didn't have atrial fib, but my heart felt as if it were beating too hard; sometimes I'd feel as if it were about to go out of rhythm. I felt weak and light-headed and really feared that I had made a huge mistake by having the procedure. I was afraid that he had damaged my heart and that I was on my way to becoming an invalid.

My first a fib after the ablation, requiring cardioversion, was on July 19, so it was about three months later. Then after that episode, I had another spell about a week later, which corrected itself after I got to the hospital but before they got around to cardioverting me (I had consumed a huge glass of V8 and a banana on the way to the hospital and it kicked in). I have had none since then, because of the change in diet and the potassium supplements.

Truly, it was like magic and when I think of all those years of misery, when I probably could have been controlling it ... it just makes me sad.

My cardiologist does consider my procedure to be a failure, he said. If the person has even one atrial fib episode afterward, then it is not classified as a success."

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http://www.afibbers.com/forum/read.php?f=6&i=20906&t=20906#reply_20906

Unbelievable! Released by my cardiologist!
Author: Ellen (---.central.biz.rr.com)
Date: 12-02-05 15:14

I posted on this board a while ago, relating the story of how I've had atrial fib since I was 14 years old - that's 40 years now. I've tried various medications, had numerous cardioversions, experimented with numerous fads ... and finally had an RF ablation in April, 2004.

The ablation was not successful. I had an afib episode 4.5 months after the procedure and then another one week after that; however, the doctor does think that the ablation eliminated some of the triggers.

Folks, seriously ... as much as I love my doctor, he never once mentioned the importance of potassium as a heart regulator. It wasn't until I'd been cardioverted numerous times and been told that my potassium level was 2.8 or lower that I put it together: every time I ended up in the ER, my K level was low! REALLY low!

When I brought it up with my doctor, he referred me to a kidney doctor, who determined that my kidneys "waste" potassium; thus the chronic problem with my K level.

I visited a dietician and have been on a potassium-rich diet for the past 16 months and have had NO atrial fib of any kind. 17 months ago, I was tuned into my heart constantly, checking it - worrying that I might go into a fib on vacation,

or on a holiday ... and now I just really don't even think about my heart! Amazing!

Yesterday I had my annual meeting with my doctor, who said that my Holter monitor results were fabulous and that while he felt that the ablation had helped my condition (but clearly did not "cure" it, he was convinced that the potassium deficiency had played a big part in my problems.

He has released me from his care (mixed emotions as I love this guy and he treated me so kindly), and said that I can follow up with my family doctor, but he doesn't expect that I will have further problems.

I really wish cardiologists would try putting patients on high potassium diets before putting them on amiodarone and some of these other potentially dangerous meds.

Also, i had mentioned to my doctor that many times, i had "warnings" of a fib. I would get this odd headache, muscle cramping in my feet or calves, and generalized aching a few days before going out of rhythm. I have learned that these are all symptoms of low potassium, but I didn't know that at the time.

I make sure I have a large glass of low sodium V-8 every day, plus a banana. Also, Bolthouse Farms Vanilla Chai Tea is a wonderful and delicious way to get 800+ mg of potassium fast. Sweet potatoes are a staple in my diet, too.

As long as you don't have kidney disease, this high potassium diet is a great thing. I swear, it is the answer to my entire atrial fib problem, and it's not difficult, either. I feel terrific and have no hint of arrhythmia.

But it's a good idea to have a kidney specialist make sure your kidneys can handle the extra potassium, as too much of it can cause serious issues.

Good luck, everyone. I am celebrating a turning point in my life!!"

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Re: Unbelievable! Released by my cardiologist!
Author: Ellen (---.central.biz.rr.com)
Date: 12-03-05 06:47

I take the 20 meq of potassium by Rx capsule each day, plus at least 850 mg via V-8, plus usually a banana, which is around 450 mg. That's all i really pay attention to, but then at my other meals I have potatoes (up to 750 mg) or almonds (really good).

I also am not sure how to translate milliequivalents to milligrams.

I would estimate that I probably do not exceed 5 grams, but it would vary.

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Ellen says she takes 20 meq of potassium by pill, plus the LS V8 plus other food.

To convert meq of potassium to mg of potassium multiply by 38.29. So 20 meq = 765.8 mg of potassium.

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Re: Unbelievable! Released by my cardiologist!
Author: Ellen (---.central.biz.rr.com)
Date: 12-03-05 06:59

The nephrologist said everything was fine except that there was an indication that my kidneys were "wasting" potassium! I hated to hear that my kidneys were misbehaving, but glad to think that maybe there WAS an explanation for all those low potassium a fib episodes!

Yes, caffeine is a horrid problem for me. I always avoid it. It doesn't always trigger a fib, but it makes me feel nervous

and jittery, and I'm a very high-energy, active person, so about the last thing I need is to be MORE excitable and active!"

Start date: July 2004

Effectiveness: no afib since then [as of last post, 12/05]

RICK

http://www.afibbers.com/forum/read.php?f=6&i=17558&t=17552#reply_17558

Afib Supplements
Author: Rick (---.bchsia.telus.net)
Date: 10-15-05 08:59

Since I SEEM to have been fairly successful in reducing my afib symptoms thru the use of supplements over the last year and a half I will do as you suggested and let everyone know what I have been doing. At this point I seem to experience perhaps a minute or 2 every month or so - and that JUST FINE with me!!

Anyway, I started out with Mg first. I started with 125mg twice a day gradually increasing over a month to my present 6 x 125 mg . This is chelated Mg. I had read on this BB that too much Mg could cause 'bowel intolerance' - if you get diarrhea, you are taking too much for your body. I split my vitamins into 3 doses - breakfast, lunch and dinner as follows;

Breakfast

- 2x125 mg Chelated Mg (Natural factors)
- 2x99 mg Potassium (also Natural Factors)
- 1 multi-vitamin (just any good brand I can find)

Lunch

- 2x125 mg Chelated Mg
- 2x99 mg Potassium
- 1 Omega-3 oil capsule (again, any good brand seems to work)

Breakfast

- 2x125 mg Chelated Mg
- 2x99 mg Potassium (also Natural Factors)
- 1x500 mg L-Taurine (I'm using Quest right now)
- 1x30 mg Co-Q10 (again, I'm using Natural Factors right now)

I'm not trying to push Natural Factors (since I really didn't realize I was using so much until I compiled this list, but, I live in Vancouver, BC and it seems to be widely available and I was having trouble finding chelated.

I have also dropped caffeine (I drink 1 cup of decaf a day), don't eat much chocolate and have MAYBE a glass of wine every week or two. I have recently started drinking Pellegrino sparkling water since it lists Mg and K as ingredients. I have also tried to ensure I eat early in the evenings (finish by say 18:00)

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Re: Afib Supplements
Author: Rick (---.bchsia.telus.net)
Date: 10-16-05 08:10

My history - hmmm...

Bio - 6'4" tall, 210#, in good shape (work out 2-3 times a week).

My first official attack (in retrospect, I suspect I had a few earlier ones in my 20's and 30's) was 2 days after my 47th birthday. I'm now 48 + 4 months. I was away with my wife and in-laws for the weekend. The in-laws are much heavier drinkers than my wife and I are. Monday morning I was in the ER being cardioverted after a couple of tries of drugs didn't work.

In the next week or 2, I went back to the ER twice, but, by the time I waited etc I was back in NSR - I suspect these were adrenally triggered. I've had all the usual tests - blood, CT, halter, ultrasound - all negative to anything underlying. My usual pattern while waiting for the test results and to see a cardiologist (that took 3 months) was early morning / later evening ectopics. Very hard to rest when all you feel is the erratic heartbeat. The cardiologist said there was no problem, my heart was fine to try and relax and not worry about it. He emphasized this after I told him exactly what my pulse rate was while talking to him!

Anyway, about 9 months ago I started the vitamin thing and have not looked back. Just to see if it was making a difference, I stopped taking them (a Wednesday) and by Friday night I was back in Afib.

I have still had the odd one (on holidays in Mexico with the in-laws again - had 3 or 4 drinks over the course of 4-6 hours) and 1 or 2 other times. But I truly think the vitamins make a difference!

Start date: Jan. '05?

Effectiveness: gets a few seconds of afib every couple of months, and goes back into afib within a few days if he stops taking his supplements, or if he drinks 3-4 drinks in a few hours time.

SUSAN

Date: 11-26-07

I have been in NSR since Sept 5th, 2004. I figured out my triggers and eliminated them.

1. I don't eat out in restaurants, no takeout, no prepared meals...no pizza, no food items with "seasonings" "MSG", or any hidden MSG. Unless the food is steamed without seasonings, spices, marinates, sauces, etc. I don't eat it. I don't cheat....it isn't worth it.
2. No foods or vitamins with enriched Calcium.
3. I started taking Prilosec for GERD. I also take probiotics and probiotic yeast.
4. No chocolate, no sodas [even caffeine free], no teas, coffee, alcohol, etc.
5. I practice biofeedback when stressed. If I feel I am experiencing stress overload, I will take an occassional Ativan [perhaps once a month].
6. Flecainide 100mg BID and 25mg Tenormin 25mg
7. Stopped taking Ginko [cardiologist said it could be a trigger]
8. stopped eating spicy foods.
9. Supplements: L-arginine, CoQ10,
10. I hydrate with minimal 8-10 glasses of water daily. I try not to get overheated in the summer.

I consider myself lucky to remain in NSR even with Flec and a beta blocker. Drugs don't work for everyone and I am convinced changing my diet, losing weight, and trying to reduce stress has contributed to my luck in remaining in NSR and to the success of the drugs working as well as they have.

GEORGE'S FRIEND

Date: 11-30-07

Three years ago, a friend had two very symptomatic afib episodes. At that time, I suggested magnesium, potassium and taurine. He experimented. I talked to him today and he is still in NSR, settling on 1,500 mg of magnesium glycinate a day. 500 mg at each meal. He says it, "keeps me regular, but nothing more."

Obviously magnesium is his issue.

Start date: Dec 2004. Effectiveness - NSR for 3 years.

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Hans R. Larsen MSc ChE, 1320 Point Street, Victoria, BC, Canada, V8S 1A5
E-mail: editor@afibbers.org World Wide Web: <http://www.afibbers.org>

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