



My Experience with Atrial Fibrillation

By Sadja Greenwood, MD

I was a vigorous person with good exercise tolerance until my 68th birthday, in 1998, when I went on a hike with friends on a very hot day. I didn't have enough water, and became a little dehydrated. On the way home I had difficulty walking, and felt very short of breath. For some reason, which I cannot fathom, I didn't take my pulse. Friends helped me get home, and I recovered quickly. Perhaps that was my first episode of afib, or perhaps that damaged my heart in some way. I had a treadmill stress test the next week, which showed no sign of heart attack. So, I didn't think much of this episode.

I began to have short attacks of afib, diagnosed by EKG one time when I had to call the paramedics; these came on after strenuous exercise, eating too much at one time, drinking ice water or sharply carbonated beverages, or being strongly emotionally upset. This leads me to believe that my LAF is mixed, but predominantly adrenergic. The attacks initially lasted 1-2 hours, and now last 3-4 hours. When they occur I have learned to do the following things, which seem to help me. I carry a vial in my pocket at all times with aspirin, 10 mg propranolol (Inderal), 2 magnesium pills (protein chelate or citrate) each 200 mg, and half of a .125 mg triazolam (Halcion) tablet. I chew all these pills for quicker absorption, and lie down. The aspirin is to prevent clotting, the propranolol slows the heart beat, irregular though it is, and the triazolam is a short acting sleeping pill similar to valium, which helps me to relax. I do deep, slow breathing and wait for the episode to go away. Since the episodes usually occur at home, at night or in the morning, I also take a few fish oil capsules for good measure. I continue aspirin for 5 days or so after an attack. I don't take aspirin daily because I do take fish oil capsules and vitamin E, which are both anticoagulants. When I take aspirin I get spontaneous nose bleeds and bruises under my skin when I play the drums. I don't want to have a GI bleed or a brain hemorrhage. It's a balancing act. Of course I am frightened of having a clot and a stroke when I have an episode, and I don't advise my course of action to anyone else!

I went to several cardiologists, and had echocardiograms and a thallium stress test. No underlying heart disease was found. I decided not to take the medications that were suggested to me, such as digitalis(!), sotalol, long acting beta-blockers, and coumadin. Even the lowest dose of any medication seems to affect me adversely, and when I studied the side effects of these meds I decided against them. Fortunately I found Hans Larsen on the Internet, which has been a tremendous blessing.

I no longer do strenuous exercise, such as jogging or going to the gym, and I always warm up very carefully now. I walk, lift light weights at home, and dance. My exercise abilities have definitely decreased since the afib began, and I could say it is age, but my partner Alan is 75 and is amazingly fit, as are many of my friends, so I think the afib has affected my aerobic capacity. I am working on increasing it very slowly, avoiding exhaustion. Walking in nature and dancing are really important to me, and since I can do these even in a limited way, I am happy.

I had very large varicose veins in my left leg due to a foot infection in my youth, and I had these removed in 2000. The surgeon estimated that I had about 400 ml of blood in my leg at all times, which was causing a strain on the heart. I had no afib for 6 months after the operation, but then it started again.

In 2001 I found a new cardiologist, who told me that several of his patients had improved after stopping the supplement glucosamine sulfate (GLS). This was an important revelation to me. I realized that I had started taking GLS for joint problems 4-5 months before my first episode of afib. I was also having two gastrointestinal problems, which are considered adverse effects of glucosamine. One was "heartburn", otherwise known as acid reflux, and the other was abnormal hunger, due to reactive hypoglycemia. I felt as if I had to eat many times a day, every few hours, to prevent a rapid heartbeat and a feeling that afib was impending. Glucosamine is an amino sugar; a sugar to which nitrogen is attached and it causes insulin resistance in some type 2 diabetics. It was giving me rapid swings in blood sugar, as measured by blood tests, and corresponding swings in heart rate. I have been off of it for 8 months now, and am gradually improving. No more acid reflux, and more normal hunger patterns. I still need to eat quite frequently, and prefer to have dinner at 4-5 pm, which is hard on my partner who likes it at 6-7. I am very careful to eat healthy food, avoiding simple carbohydrates, and emphasizing vegetables, fruits, whole grains, beans and small amounts of fish or poultry. I eat lots of walnuts or almonds between meals. No caffeine or alcohol – I never liked alcohol, but I really miss drinking tea.

Currently my afib episodes occur every 2-4 weeks, and last 3-4 hours. I have found that taking L-carnitine is very helpful, and I take 250 mg throughout the day, amounting to 2 grams daily. L-carnitine seems to stop the premature atrial contractions that can lead to afib. It makes me feel stronger. I have read a few booklets and articles on this amino acid, and feel quite certain that it has benefits for the heart and little downside.

I am a retired general practice doctor, and my new careers are working as a mediator in a small rural county, being a volunteer music therapist and playing various instruments in a local band. I figure that if I am not in pain, and my heart beat is regular, that I am very lucky. I conclude this lengthy treatise by saying how much I appreciate the work of Hans Larsen. I would not have had the courage to pursue my own course without all the information he brings to the problem.

California, March 2002

Postscript – October 2002

I am now taking a long-acting, 24-hour form of the beta-blocker metoprolol, which has very few side effects. I take 50 mg daily after dinner and have experienced fewer atrial premature beats and a lot less fear of episodes. My episodes occur about every 3 weeks despite everything, but they are mild and relatively short (3-4 hours). I also take coenzyme Q10 throughout the day with my l-carnitine, about 150 mg daily.

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