

How to Improve Atrial Fibrillation

By Byron Richards, CCN – March 14, 2012

Atrial fibrillation, or A-fib, is the most common form of irregular heartbeat and is typically accompanied by a rapid pulse. It involves electrical malfunction relating to factors that regulate how your heart beats. Medications used to treat the problem do little to fix the source of the problem. Understanding this issue is important for everyone, since it generally takes years to develop A-fib, and once it starts it is much more difficult to fix compared to not letting it start in the first place. A-fib, when occurring in combination with other cardiovascular risk factors, can increase the risk of stroke sevenfold. This is truly a situation wherein an ounce of prevention is worth a pound of cure.

Your pulse rate increases when your body needs to move oxygen and nutrition to cells more rapidly. This can be to compensate for increased physical output such as hard work or exercise, as well as emotional stress. If your cardiovascular fitness is in good shape, once the stress or increased demands are over, your heart rate returns to its normal baseline. In situations of declining cardiovascular health your baseline may be a rapid and/or irregular heartbeat, which tends to worsen with increased demands of one type or another.

As compared to a rapid pulse, A-fib means that the pulse is under electrical dysregulation. At first, this simply may present as a jittery or uncomfortable feeling in your heart or chest. The problem may be aggravated by increased demands, including exercise. The metabolic conditions that contribute to weight gain and difficulty losing weight are key factors that contribute to the development of A-fib (although any person can develop A-fib). These problems gradually develop over time. In other words, various nutritional deficiencies set the stage for the formation of the problem. Once the problem exists it is not simply a matter of taking a vitamin to fix it immediately, although many nutrients offer support while people manage their cardiovascular health into better condition.

A new study* has found that patients with A-fib have lower levels of DHA compared to those who don't. This means that those who do not regularly consume DHA, either from dietary and/or supplemental sources, are more at risk for developing this health problem, which in turn may dramatically increase the risk for stroke.

This new study involved 206 dialysis patients with cardiovascular disease. In this group, those with A-fib (13 percent) had the lowest blood levels of DHA. An intervention of 1.7 grams of fish oil per day over a three-month period did not improve the A-fib, in this diseased patient population.

One of the main points about the data in this study is that it is a lot easier to prevent irregular heartbeats in the first place or to aggressively work to improve them when they first become a health problem, compared to improving them once they are occurring in the context of many health problems that have been evolving over a period of time.

DHA is a primary anti-inflammatory nutrient for both the structure and function of every cell in your cardiovascular system as well as every cell in your nervous system. It is therefore not at all surprising that a lack of DHA would be associated with a problem that involves nerves, arteries, veins, and your heart. Regular intake of DHA is highly advised for many aspects of good health even if you are in good health. Once your health starts slipping, higher amounts of DHA are needed to help right the ship.

For example, I recommend daily DHA intake ranging from 150 mg to 500 mg per day, depending on how many demands you are under, your general trend of health, and how old you are. The better health you are in, the younger you are, and the less stress you are under, then the lower your dose needs to be for the purpose of preserving good health.

Once your health starts to slide, reflected by troubles with metabolism such as weight gain or type 2 diabetes and/or once your cardiovascular profile starts to accumulate risk factors, then you need higher doses of DHA. The range should now be between 500 mg to 2000 mg of DHA per day. In general, the worse your health the more DHA you need. And for those who simply want to maximize preservation of good health, a higher dose is probably more beneficial.

In the study patients given a dose of 1.7 grams of fish oil per day for three months did not improve the A-fib. That is partly because the dose of DHA was too low and partly because a lack of DHA was not the only nutrition related problem associated with A-fib. A dose of 1.7 grams of fish oil contains somewhere between 300 to 400 mg of DHA, a dose below the therapeutic threshold for any person with existing cardiovascular disease.

A person with A-fib should comprehensively support the problem in three ways:

Take a variety of nutrients to reduce inflammation while managing life demands. Increasing intake of DHA is the foundation of such a nutrient plan.

Include nerve support nutrition to reduce the effects of inflammatory nerve compounds irritating the heart and electrical system. Increasing magnesium intake is the most basic approach to helping calm nerves.

Provide heart tonic nutrition, which has the net effect of helping the heart overcome being punched in the nose by the problem. In this regard, flavonoids contained in hawthorn berry and grape seed extract are top choices.

It should be understood that A-fib is highly associated with structural problems in the arteries, which are driven to form in response to excessive ongoing inflammation.

These problems are especially associated with obesity, but can occur based on inflammatory issues of any kind for a person of any weight.

In the case of obesity, fat marbleizing in the artery walls and accumulating on the outside of the arteries creates a significant adverse structural change to the arteries. This is the cause of A-fib for the majority of people who have it. The comprehensive nutrients listed above will not immediately fix this problem, but will help keep the lid on how bad the problem is. When a person loses weight, the structural problem within the arteries begins to reverse itself. This takes time to truly fix, but major improvement can be experienced early on once a person establishes the process of weight loss in a healthy way.

Any person of any weight who has A-fib must figure out the long-term sources of inflammation in their life and map a plan for improvement. This is because inflammation in and of itself can make your arteries fatty, even if you are normal weight. This means that a variety of excessive inflammatory factors could be the actual cause of the problem. Issues can range from high levels of emotional stress to chronic low-grade infections, chronic pain to post traumatic stress disorder, just to give a few common issues. These will vary from person to person. The primary cause of A-fib is likely a collection of various inflammatory issues that over time have induced changes to the structure of the main arteries and veins around the heart.

A person with problems such as these needs enough nutritional support to help out the body systems that are under acute stress. And they need to get on a less inflammatory path, which may involve other nutritional support as well as lifestyle adjustment. Such a problem can take many months to fully fix, as it generally took years to develop.

Medical treatment of A-fib is directed at drugs that sedate the cardiovascular or nervous system and rat poison that is supposed to prevent a stroke, while doing virtually nothing to address the source of the problem. Some of these medical approaches may be needed to manage the acute nature of the problem, which is why doctors can be helpful. Unfortunately, the medical profession as a whole grasps almost none of what I have just explained, in terms of the nature of the problem or practical solutions that actually solve the problem over time. The best way to not have to take drugs is to not have the problem in the first place.

As a people begin to improve their A-fib issues it is vital that they gradually increase their aerobic exercise, being careful not to overdo, but doing enough to actually improve fitness. Along with maintaining adequacy of basic nutrition, improved aerobic capacity is the long-term solution that indicates the problem is actually getting fixed.

* http://www.wellnessresources.com/studies/dha_is_low_in_atrial_fibrillation_patients

http://www.wellnessresources.com/health/articles/how_to_improve_atrial_fibrillation/

Highway to Health appreciates this article, but this does not necessarily imply an endorsement of every teaching of this author, company or organization.