

# Lifestyle modification for the management of atrial fibrillation

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## 1 Weight loss, achieved and sustained through diet and exercise, is associated with fewer atrial fibrillation recurrences<sup>1</sup>

Trials showing the benefit of weight loss (in combination with other strategies for managing risk factors) in atrial fibrillation have primarily used high-protein, low-glycemic-index diets, along with low-intensity exercise, to achieve reductions in body mass index (BMI).<sup>1,2</sup> Patients with intermittent atrial fibrillation and BMI  $\geq 27$  kg/m<sup>2</sup> achieved the greatest increase in arrhythmia-free survival with a sustained weight loss of  $\geq 10\%$  of body weight (number need to treat [NNT] = 4.8).<sup>1-3</sup>

## 2 Recreational exercise confers cardioprotective benefits in atrial fibrillation independently of weight loss<sup>1-3</sup>

Observational studies show that exercise, at any recreational intensity, is associated with reduced risk of developing atrial fibrillation, and improved symptom control in patients with persistent atrial fibrillation.<sup>1,3,4</sup> A useful goal is to progressively increase to 200 min/wk at moderate intensity (1000 metabolic equivalents [METs]), which is associated with an approximately 10% decrease in risk of incident atrial fibrillation.<sup>1,3</sup>

## 3 Reducing alcohol intake, in individuals who consume $\geq 14$ drinks per week, is associated with a decreased burden of atrial fibrillation and decreased related hospital admissions<sup>1-3,5</sup>

There is conflicting evidence as to whether a linear dose-response relationship or a threshold effect exists between alcohol consumption and risk of atrial fibrillation.<sup>1,3</sup> In a recent randomized controlled trial, abstinence in moderate drinkers ( $17 \pm 8$  drinks/wk) with intermittent atrial fibrillation was associated with reduced recurrence (NNT = 5).<sup>1</sup> For patients who consume moderate to heavy amounts of alcohol, especially with binge drinking, it is appropriate to counsel them to reduce their intake.

## 4 Smoking cessation is recommended as part of strategies for preventing and managing atrial fibrillation<sup>1</sup>

A dose-dependent relationship has been suggested between smoking and atrial fibrillation.<sup>1</sup> Moreover, smoking is strongly associated with the development of chronic obstructive pulmonary disease, an important risk factor for atrial fibrillation.<sup>1</sup>

## 5 Limiting caffeine intake is unlikely to be useful in reducing atrial fibrillation incidence or burden<sup>1,3</sup>

No evidence exists to suggest that limiting habitual caffeine intake confers any benefit in reducing the risk of atrial fibrillation.<sup>1</sup>

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