HWM01_23Sep20_interview transcript

RB: Lovely ok... so the first thing I'd like to have a look at if that's ok is the questionnaire that says University of Toronto atrial fibrillation severity score
HWM01: Yes I have it open in front of me
RB: Lovely so I don't need all-all of the details on here. I've recorded that you're female
HWM01: I am
RB: I know that's less options and we usually get these days when we fill in forms
HWM01: (laughs) Oh crikey yes
RB: And do you mind if I record the year of your birth?
HWM01: No it's 1945
RB: 1945 lovely... and then moving on to question 3 are you in atrial fibrillation currently?
HWM01: No
RB: Lovely. As we fill this in if you have any thoughts or the answers don't quite reflect exactly your experience or what you're going through feel free to talk around it, we don't have to have precise answers at all
HWM01: Ok
RB: So at the present time - we've already mentioned before we began the recording you mentioned that these are strange times because of coronavirus and being in lockdown and so on - how do you feel about your life at the present time?
HWM01: I think it's five [on AFSS scale] to be honest because of the restrictions and the fact I live on my own and my family, erm, don't live close by
RB: That must be difficult…
HWM01: Erm, I, I've lived on my own for I don't know over 20 years, that's not the big issue it's the fact that all sorts of activities are restricted at the moment and also my flat is on the market, I'm planning to move away so I've cut down on my activities in the neighbourhood anyway with a view to moving so..
RB: Right
HWM01: Yeah
RB: Ok so moving on to question 5, on average how often does your irregular heart rhythm atrial fibrillation occur?
HWM01: Right. Now the *real* AF is probably about 2 to 4 times a year but I have these mild fluttery, um, minutes or probably more than minutes which are to do I think with acid indigestion.. um, I want to burp which I don't think is.. I.. my heart rhythm is probably a bit irregular but it's not the AF that, um, I take a tablet for or anything
RB: Mm-hm
HWM01: I just wait until I burp and then it's gone and that can happen, um… oh.. two or three times a week or not for weeks on end
RB: Oh that's interesting...
HWM01: Yeah
RB: Yeah.. and when you've got atrial fibrillation, that you *know* is atrial fibrillation, and when you've got *this,* do you feel the same in terms of breathlessness or tiredness or anything like that?

HWM01: Erm, I feel tired... I don't feel breathless - I've never felt breathless. Um, I just feel, um, edgy when it's out of sync...
RB: ...Sure...
HWM01: ...Um, I can't wait for it to drop back into rhythm, um, er... but that that's not how it's always been, in the past I would have it for 24-hours and I'd go out for a walk and be normal it's now and I think that just perhaps, nervousness about it?
RB: Mmhm Ok... so question 6 - on average how long do the episodes last?
HWM01: Yes um, they last on average between 1 and 4 hours
RB: Right (pause) so would you say several hours but less than a day?
HWM01: Yes definitely
RB: So we'll say, I'll just record 1 to 4 hours as well. I'm just recording your responses on an electronic copy of the questionnaire
HWM01: Yes
RB: Just so that we've got them for reference
HWM01: Yeah
RB: And then question 7 - how severe was your most recent episode of the irregular heart rhythm?
HWM01: One
RB: One - not severe at all
HWM01: No, no
RB: Good... and how severe was your first episode of irregular heart rhythm?
HWM01: One
RB: And when did that occur, your first episode?
HWM01: Oh, it could be 10, 12 years ago.. I'm trying to think how old my granddaughter is but she's 16 so it could be 12 or 13 years ago…? It could even be longer, it was just one Sunday morning um yes
RB: Just suddenly came on?
HWM01: I just suddenly, yes… it was about, it happened for about 20 minutes, I used to have three huge strong cups of tea in the morning and I put it down to that and tied it in with that for quite a while.. it took me a long time to actually have one which took me to the doctor - that was because I was going away that afternoon...
RB: Right...
HWM01: ..so they, they were quite mild but um, left me feeling.. Again, they make me feel jumpy that's all I can say edgy, jumpy
RB: Okay… and have you ever had a cardioversion? An electric shock?
HWM01: No
[pause]
RB: Um.. And you said the first.. It took you.. you went to the doctor after several times...
HWM01: Yes
RB: ...and within the past year have you been to the doctor about it at all? Or have been to the emergency department?
HWM01: No
RB: No. (pause) And you haven't been hospitalised at all this year with it?
HWM01: No

RB: And have you seen a cardiologist at all this year?
HWM01: Um no, he signed me off. I had an ablation about two-and-a-half years ago or three-and-a-half years ago which was totally successful, um, for nearly a year I think but then I had a bad virus. Um anyway I was seeing him six monthly. The last time I never saw him but I saw a doctor who reported to him and basically he said, well, you're signed off and you can get in touch if you ever need to but.. I think he considered that that job done
RB: (laughs) Right! And what did you think about it?
HWM01: Um I would have preferred to have had an annual check-up, um, but as I didn't actually see him it was difficult, it was all relayed to me through the lady, *very nice* lady doctor, who was asking the questions
RB: Yeah and what would you have… if you had had the option to have a yearly check-up what would you have wanted to get from that check-up?
HWM01: If I had to stay on blood thinner for the rest of my life, which I've only been able to discuss with the GP, and he had said - intimated - that I might not have to stay on it forever and whether there was anything I could do that would minimise these one or two events that I have a year
RB: Sure, ok, so you feel like that would have been information that would have been...that you would have got if you'd had ongoing cardiology appointments that you can't get from the GP
HWM01: Yes, they would have been questions. Whether that's a good use of an expensive cardiologist's time I don't know!
RB: Well sounds alright to me but anyway…! (both laugh)
HWM01: He's very nice, he was very, you know, easy to converse with so um yes... just disappointed to feel that there isn't that oversight of where I am
RB: Yeah, yeah, how does that make you feel not having that oversight
HWM01: Most of the time I don't think about it. He did advise that I could carry this-pill-in-the-pocket, flecainide, so that I know I have something that works um, or has worked so far and I know that I can ask to have an appointment with him…
RB: Mmhm, yeah
HWM01: ...so how do I feel? Less than 100-percent about it, but when I think of the NHS burden I think well perhaps that's ok.
RB: Right, yes I understand you. So we're gonna have a look at part C of the questionnaire now…
HWM01: yes
RB: ...and the first questions about palpitations and have you been bothered by this in the past 4 weeks?
HWM01: Bothered is the wrong word, I am aware of my heartbeat sometimes... and I think in the last couple, last perhaps 4 weeks... if this question said have you been *aware* I would probably say 3, but have I been *bothered*, um, 1, very little. I've been used to having the occasional period where I'm aware of my heartbeat. Occasionally if I lie on my right side or at night if I put my left ear on the pillow I can, sort of, feel my heart beating. The actual palpitation of "da-da-da-dah" it's just par for the course, it doesn't happen very often and it doesn't worry me that that's really going to go into AF. And sometimes I think it's just because I'm going through this period where I've got the desire to burp, which makes me feel as if I might go into AF and then I'm more aware of my heart than at other times

RB: Ok. And do you have any shortness of breath with it at all? It sounds like you don't
HWM01: No, no
RB: So would that be a 0 for question 2?
HWM01: Yes unless it means climbing a street.. a *steep* hill too fast for my own liking but um, that's not...
RB: Ok, so question 3 is shortness of breath during physical activity. So would that be a different answer?
HWM01: It, er, I'm not bothered by it because well I don't, I can climb all the steps, stairs with shopping and I don't have any shortness of breath, um, and I can do a salsa tape with no shortness of breath, the only time I might start breathing more heavily is going up hill at a faster pace than I would choose
RB: Right ok if you're having to dash for a bus or something like that?
HWM01: No it's with my walking companion who takes no prisoners! (laughs)
RB: Ah! Ok, ok very good. So what would.. if I had to push you for a numerical answer on that one what would it be?
HWM01: How often have I been bothered? No, I haven't been bothered by it.
RB: Ok great. Ok.
(Pause)
HWM01: Oh sorry that was to number 3 - to number four I'll put one
RB: Ok so a little bit of exercise intolerance
HWM01: I would like to feel fitter than I am
RB: Sure. And why do you think that is that you don't feel as fit as you would like to?
HWM01: Because I had the knee replacement
RB: That's, ok, that's the knee replacement is it?
HWM01: Yes. I have not walked properly for 4 years since I tore ligaments in the other leg, which means.. the last physio I saw said it will take you, and he meant at least 2 years to get back to normal, um, so yes it's 4 years of inactivity that have caused this, it's not my heart
RB: Sure, ok, that's fine. As we said though that's still interesting from the point of view of this study because it's good to know not only about people's hearts but about the whole person because we don't wanna just treat, you know, the heart but the person around it
HWM01: Yes
RB: So number five when you're at rest are you bothered by tiredness or palpitations?
HWM01: No
RB: Not at all
HWM01: … I'll say one
RB: Ok
HWM01: Er, or it could sometimes be two. That I think is labyrinthitis I don't think it's anything to do with my heart. I have periods where I know it's labyrinthitis because I've got a very slight dizziness on one side by my ear which is where it's all generated from, and during that period where I feel like that I do feel tired and then it goes away so we could say 1, because I haven't had it much in the last 4 weeks at all
RB: Ok that's good that's good. But again you think that's your labyrinthitis rather than your heart

HWM01: I'm pretty certain because as I say I (inaudible) onset 10 years ago and yes I can't go into all the details because I think I've had a very strange version of it but I usually managed to to pin it down to that because I have very slight problem over my right eye...
RB: Yeah
HWM01: ...and that's very specifically been to do with labyrinthitis
RB: Ok, so question 6 is about lightheadedness and dizziness - do you get that at all?
HWM01: No... I've just talked about dizziness with um… I haven't had it at all in the last four weeks
RB: But if you do, you think it's labyrinthitis
HWM01: If I have labyrinthitis, yes and it's lost its severity - I'm touching wood as I say this - it's, I haven't had a severe episode for well over a year
RB: Good, ok, but occasionally it bothers
HWM01: Yeah
RB: Sure. And do you get any chest pains is the last one on this questionnaire
HWM01: No I've never had any chest pain at all.
RB: That's good. Ok, lovely. So that was interesting about your symptoms. It doesn't sound like your atrial fibrillation causes you many physical symptoms, am I right in saying that?
HWM01: Yes you would be right
RB: Ok. So then we'll have a look at the other questionnaire which is about quality of life
HWM01: Right, yes, that was interesting to me, it made me think… right, it's here...
RB: Right, this is the one called the EQ 5D 5L
HWM01: Yes EQ 5D 5L
RB: Yeah, lovely. Ok. So it asks you to tick one box that best describes your health today so if we talk through them and just, again, just tell me thoughts about the different options and if you feel you're between two options or they don't apply to you then do feel free to differ with the options…
HWM01: Um, the only problem I have in walking about is I get stiff legs and I, which I think is the arthritis, some stiffness after exercise, so I sort of walk that off, but it doesn't, it's not really a problem, it's an annoyance
RB: Sure ok. (pause) And then with self-care…?
HWM01: Oh no problems
RB: No problems, good, ok (pause) I'm just making a note of these answers
HWM01: Yes
RB: For mobility, would you say..., if you *had* to tick one of those boxes which one would you go with?
HWM01: (Pause) Um. It's really difficult because I can have a.. I can have a slight problem probably to do with knee and arthritis not AF
RB: Not AF, that's fine. And then for usual activities, what do you think about that?
HWM01: (wryly) Well, at the moment they're so minimal I have no problem doing my usual activities
RB: (Laughing) And what about usually, when we're not in a coronavirus lockdown
HWM01: Well as I say it's four years since I walked properly and I'd had labyrinthitis before that so I gave up golf, the gym, dancing, all the things that I did, so obviously couldn't do those

things without a bit of practice now, so I just lived very different life for 4 or 5 years now… So I've no problem my usual activities
RB: Ok ...and how about pain and discomfort
HWM01: Um, only discomfort is very slight with my new knee
RB: Sure. And what about anxiety and depression
HWM01: I'm not anxious or depressed. I have days of being, um, looking and thinking oh well it's long time till anything like normality comes but I, I just take myself to task and tell myself that the rest of the world has got so many problems I shouldn't be so self indulgent and I get on and do something. In that sense it's just mood, it's not… It's not depression. I've seen my friends who can't get out of bed in the morning, I mean I've never even thought about staying in bed for the day.
RB: Sure, ok, great. And, um, your health today what score would you give yourself on this 0 to 100 scale?
HWM01: Yeeees, that was interesting… I think ooh... I think I'd probably say 6, I was starting at 5 when I thought about the fact I know my blood pressure is normal - I checked that - I know my oxygen levels are normal, I've got a little thing... I went out for a long walk for nearly two hours with a friend yesterday.. Reality tells me that's 6 - it's just I want to be a 10
RB: So this is a scale from 0 to 100
HWM01: Oh funny! I misread that. Well 60 then, oh right in that case probably 63
RB: 63 ok, just a little bit above 60 (both laugh)
HWM01: I think you know the reality is that I'm probably very ambitious to be where I was before this onslaught and so... the last nurse I saw at the clinic thought I was in good health and what have you for my age, so I think it's really how,, what I want to be instead of what I am
RB: Yes that makes sense, that makes sense. Do *you* think you're in good health for your age?
HWM01: Um… No.. in the sense that my friends can all walk further and faster than I can, and that is more to do with my knee I think than AF, well it's n.. and.. and the labyrinthitis that preceded that I think I've had, oh (sighs), *10 years* of poor mobility so.. the labyrinthitis I only get, got rid of by giving up everything - the gym, dancing, the social group I belonged to the whole lot and I just had to rest and that of course that causes problems of its own.
RB: Sure, ok. So if we start to think about your weight management because we spoke a little bit about on the phone and you mentioned it's, it's something you've thought about all your life pretty much from what I've understood from you previously, is that right?
HWM01: Yes I had pneumonia when I was 10, I nearly died. After that my mother did feed me up so I think food was made, flagged up as important and then I think I used it as a comfort habit from, oh, teenage years
RB: Ok and so was that as an emotional comfort?
HWM01: Yes, yes, life at home wasn't particularly happy at times.
RB: And is that something that's carried on?
HWM01: Yes I have rarely been at the weight I would like to be. I have, in my 30s I got there after I'd had children, um, but my weight creeps up very easily if I don't.. if I'm not very careful. I think it's the way my body works, um, and the fact that cooking is a hobby (laughs)
RB: Right (laughs) ok
HWM01: Well its helpful in one way – I eat healthy food, but um
RB: But it's so nice you want some more (laughs)
HWM01: (laughs) yes, it's literally the ratio of activity to calories.
RB: Yes, so you feel like you eat healthily. And do you feel like you eat the right amount?

HWM01: Um, [pause] very difficult to say. I eat the right amount up til 6 o'clock or 7 o'clock. If I have a downfall its snacking in the evenings, because they're long evenings. I very rarely have anything too much to eat before, um, during, oh I have breakfast, lunch, supper, I might have a snack somewhere, usually a banana, um, but in the evening I can just revert to , um, eating crisps, nuts, biscuits, I don't keep many in the house but it's not having them doesn't solve the problem, I will then just eat cheese or something. It's really just a case of living a more interesting life.
RB: Yes, and that's difficult at the moment especially, isn't it?
HWM01: Well it is in the evenings, it's really difficult.
RB Yes, so in terms of knowing how to manage your weight, do you, you… It sounds to me like you know what you need to do if you want to reduce your weight
HWM01: I do and during lockdown, um, because I only had someone doing a bit of shopping once a week for me, um, I wanted to make all my fridge and freezer food last, and that, um I did lose a stone and a half so I know exactly how to do it - eat smaller portions. But as they say there's absolutely no rocket science. Exercise more - I went out for a walk every day - and eat small portions. And it works. And I didn't think it worked!
RB: But you found it did.
HWM01: I did, yes, I was quite surprised. Also I think the anxiety, that um, I felt at the beginning of lockdown I think that revved my metabolism
RB: That's interesting. So when we spoke on the phone initially you mentioned that, um, coronavirus and fear of coronavirus had motivated you to lose weight, um, because you were aware that being overweight was a risk factor for having a worse outcome from coronavirus. But do you feel like the anxiety itself affected your metabolism, is that what you were saying just then?
HWM01: Yes it did, it definitely did, it has done in the past - I don't know if it's a rush of cortisol or what but er, certainly leading up to lockdown, trying to get all the jobs done, um I think I burnt off five pounds in a couple of days…
RB: Gosh!
HWM01: …it just.. and then, yes, just nervousness about the food that was brought to the house washing it, everything like that… It was a degree of anxiety which obviously dissipated over the weeks, um, but I still, I still lost weight because I was eating less.
RB: Yes, yes. And you maintained your physical activity during that time by going out for a walk is that right?
HWM01: Yes, I had a… call it a pavement walk – um, I don't live very near green fields - and went out for between half-an-hour and an hour every day
RB: And was that with a friend as well?
HWM01: No, that was on my own
RB: So you felt motivated to do that?
HWM01: Yes, apart from anything else it was the only reason I was leaving the flat at all, so it was, um, very welcome
RB: I'm sure it was! It was nice weather as well wasn't it at the beginning of lockdown?
HWM01: It was! It was lovely. The downside is I can't face those same pavements again with any equanimity, so I've gone further afield taking the car to a park or up to the Downs, so…
RB: And you wouldn't have been able to do that at the beginning of lockdown would you? You'd have had to stay in your local area, wouldn't you?
HWM01: Yes, I haven't really used the car
RB: Do you think that not having parks and things nearby affects your desire to go out for a walk
HWM01: Yes definitely and it's one of many the reasons I want to move nearer to the coast because, um, down by the sea a woman can walk on her own easily, whereas here there's areas of countryside very nice that I walk through with my friend and that I would not walk

through on my own since my knee, since I've lost fitness I feel more vulnerable and so that, that's a function of… yeah, yeah..
RB: That's interesting – what is it that makes you feel vulnerable there that wouldn't make, you wouldn't feel vulnerable about at the sea?
HWM01: Um, oh… (pause) I think just being in the countryside on my own, someone… You are often on your own, whereas down by the sea walking along the seafront in most places you've just got people walking…
RB: Ok so you wouldn't feel so isolated
HWM01: I wouldn't feel that I was suddenly going to be confronted by an unpleasant person
RB: Yes! Ok, that's understandable! That's absolutely understandable. Just thinking about the weather as well, we mentioned that the weather was very lovely at the beginning of lockdown. As the weather changes do you feel your motivation to go outside and and take a walk would change?
HWM01: No, I was brought up in the North. I love rain, I love windy weather, I love wild weather, I love inclement weather, the only thing is I don't like ice on the pavement anymore because of my, um, knee.
RB: Sure, yeah that's understandable, absolutely. So talking now about information that the you've had from health care providers from doctors and nurses who you've seen for your various health problems but particularly for your atrial fibrillation..
HWM01: yes
RB: ..when we spoke on the phone you said nobody had ever talked to you about the connection between weight and atrial fibrillation, is that right?
HWM01: That's correct, no-one. Not in hospital, not in the GP surgery, not even when the nurse does weight, measurement. No… I mean, I'm quite surprised that they don't, but…
RB: What do they, do they… well, you said the nurse weighs you - does she discuss your weight with you at all?
HWM01: Um, no. She thought it was acceptable and that was at over 13 stone and I'm 5-ft 5, which is varying on the you-really-should-do-something-about-it, but no I think partly, partly I don't carry weight on my face, on my wrists, on my neckline, on my ankles - the bits of me that people can see, um, look slimmer than… I carry almost all my weight on my thighs, stomach and bottom…
RB: Right ok
HWM01: … and that, if you've sort of got nice clothes on it doesn't, doesn't show up hugely. Put it like this - I think people probably think I'm smaller than I am
RB: …than you are, ok. So you don't feel that there's any sort of judgement on you for your weight - it sounds like it's coming from you very personally wanting to do something about your weight
HWM01: Well yes because needing a knee replacement and everything like I would have thought because weight, you know obviously, really affects your knees... No, not the surgeon, not the nurse in the hospital, not even in the rehab centre that I went, to rehab place. No no, *no-one's* mentioned it
RB: How would you have felt about it, if somebody had talked about it?
HWM01: Um, I think I would have just accepted it like anything else - professional advice. I think, what... I'm not sure that any one of them could have given me *really* helpful advice, um, in the sense I know what to do - I know all about food, I know a huge amount about nutrition, I know a lot about exercise - one of my daughters did a sports science degree. It's literally applying it, applying it and also putting yourself top of the priorities. I've never put my weight issue where it should be i.e. top of the list - deal with that and everything else will improve
RB: That's interesting. What have you prioritised instead of that?
HWM01: Family? One daughter was very ill at one point and that was a very anxious time. Another daughter got divorced and had, her.. my granddaughter has special needs - neither

would thank me for talking about it but... Deep anxieties - my ex who quit a really good job just wasn't there when my daughter was ill, not there physically, mentally when.. to support me, to support us - I just feel that I have *carried* a whole weight of problems, um, and at once he had left I didn't know he'd continue helping financially so I had 5 part-time jobs. I, I look at the rolling scale of things that happens and on the stress level I've outdone most of the stress tables, you know, add 70 for this, add 90 for that, no no, I'm in the hundreds. I moved out of the house, I was burgled, then I ended up in hospital with AF, um, yes. And I think it's always being difficult, and food is a nice part of my life so to actually cut that down, and it's been difficult.. I did go to the gym throughout my 50s which is my saving grace. I might not have got down to the weight but I was fit in my 50s
RB: That all sounds amazing. And you said as well that you're quite an emotional eater going through that I should imagine that you possibly leant on food
HWM01: I don't.. yes, I don't.. again it's only ever been sort of evening snacking. If you took up the calories from 8 o'clock onwards I would be slim.
RB: So as you said before, more interesting evenings would help you
HWM01: Yes, I need to find some sort of hobby, activity, something that really engages my imagination
RB: ...and takes you out of yourself in the evenings
HWM01: Yes and just gives me some level of real enjoyment and distraction.
RB: And if you were to change anything about the health services that you've experienced in terms of helping you with your weight, is there anything that you would want, or not want?
HWM01: Um, I don't know, I'm not very good at being told what to do so someone telling me you have to lose half a stone by following, following this diet probably wouldn't have worked. Um I think, I think if somewhere someone had said "You can avoid more severe forms of arthritis by getting your weight down, you are risking perhaps having AFib" - which I wouldn't, I didn't even know what it was... *Fear* is something that I'm more likely to use as a motivator, um, and I don't know what what sort of message a GP could have given me, or a health.. but perhaps if a nurse at.., if.. If the GP surgery perhaps if they'd said "Come for a weigh-in once every 6-weeks" that might have helped. It wouldn't have been stressful like a weekly weigh-in, but it would have been something to keep me on the straight and narrow in the evenings and that, yes, I've never thought about it but that could have worked, just a gentle "Look, it will help your general health; go home do what you know you should do and come and have a professional check you out every 6-weeks" yes, I think that for me would be the way forward.
RB: That would be something that you think would work for you
HWM01: *Could* work for me
RB: Do you think - this is something I'm quite interested in the idea of, um, fear as a motivator - do you think if someone had 20-years ago had said to you if you don't reduce your weight you'll be at higher risk of atrial fibrillation, that would have been frightening enough for you to motivate you, or do you think you would be more likely to be motivated by being hospitalized or something actually happening that would be a bit of a wake-up call as it were
HWM01: No I think that if years ago I'd been told what atrial fibrillation was, to know I was at risk of it that would have worked because when my daughters were small my husband smoked 30-40 a day and I, I said I wanted him to give up and he said he would give up if I lost the extra weight that I'd had from my second baby. And over period of a year I lost 3 stone. He unfortunately only gave up smoking for about 12 hours...
RB: Oh right. That's a bit different (both laugh)
HWM01: ...but my fear that my children will be left without one of their parents... *that*, that worked for me. And that was what helped me – [name of relative] knew about this because I lived near them at that time - and I would go probably like Dr Mosley's idea - I would be down to about 500, 600 calories a day for as long as I could stand it and then after that I'd have to eat

normally for another period of time and over a year, yes, I lost 3 stone. I think if someone at that point had frightened me over my health, or, while I had young children that could have worked.
RB: That could've worked, oh that's interesting
HWM01: But you know I wasn't hugely overweight in those days, um that baby weight, I hadn't had after the first baby, it happened over the second. And then she was hospitalised, I was told at about 5 weeks, I was told she might be terminally ill and I subsequently discovered that the doctor was a paedophile, the consultant she was under. Anyway. I have a long history of rather bizarre happenings in my life.
RB: Yes! You've been through, really you've been through a lot I have to say. Can I just very briefly ask you about your weight cycling because you obviously go up and down a little bit
HWM01: Well it had remained, um I lived in Brazil in the 80s and when I came back I had a hormone imbalance and I put on weight and I ended up at about.. just over 13 stone - this is in the early 80s. And since then I have found it really really difficult to lose that weight.. um, I... but I was fit. I used to play golf, I used to, yes, do all sorts of things and then in my 50s I went to the gym, um, so... And my weight didn't trouble me too much because I was busy, I was living life like a lot of 40-year-old women, you know - work, children, you know, never stopping, so... and as I say I was actually fit although overweight. So it's more recently since my 60s since that first bout of labyrinthitis where I ended up giving up everything that I've lost my fitness and therefore my weight has become something I worry about, it troubles me
RB: Sure, so it's really been down to your physical capabilities that have gone down because of your knee and your labyrinthitis that the weight has started to become an issue more recently
HWM01: Absolutely
RB: Yeah ok, [name] I think that's all the questions I've got for you - was there anything else that you want to talk about in particular?
HWM01: No, I mean it's been very helpful because it's made me analyse, and it comes down to something very simple: Don't eat in the evenings, find some willpower, find something more distracting. It, it's not rocket science and, yeah, try and scare yourself back into it by looking at the virus reappearing, not reappearing it never went away, but reoccurring and you should be scared enough to lose another stone-and-a-half.
RB: That would be your target to lose another stone-and-a-half?
HWM01: Oh that's the, that's the minimum! (laughs)
RB: What would be, for you what would be your ideal weight? Not for medicine but for you personally, what do you feel?
HWM01: Oh back to 9 stone something, um, ideally 9 stone 4 but probably more realistically 9 stone 10. But I'm still well over that, I'm still over 12 stone and... I had crept back up to 13st12, inadvertently half a stone had crept on, I was 13st5 when I had my ablation and the doctor didn't, the cardiologist wasn't worried about my weight, or not enough to say anything, and I stuck around that weight and then I managed to go from the 13st12 to 12 stone 3, which is where I am at the moment, but then it plateaued because I ate some of the things I hadn't been eating so I've just got to get back on the straight and narrow I know, I know now that it can work.
RB: And if you were to achieve your ideal weight, of say under 10 stone, what would that mean - what would that look like for you - what would that mean you could do or how would you feel that's different to now?
HWM01: Well, one, I would come out of the risk factor of being overweight if you get COVID, you know. Two, sometimes I feel there's this slight pressure on my lower abdomen that can make me feel fluttery, related to the heart. The cardiologist did tell me that the nerve endings, gastric and heart, are very close together and that could be, so that could account for why I feel like this and I think well if I lost my stomach fat would that mean that AFib would go away - I didn't know that AFib could go away. Because one registrar at the hospital, oh she was very unpleasant, she turned around and basically hissed at me "You're on a one-way track here, it'll just get worse and worse"...

RB: Charming!
HWM01: … and I didn't find that very helpful and it hasn't got worse and worse. Anyway. How would I feel? I would feel that it was something I should have done years ago and it's too late to be good for my vanity or anything like that but it might help me walk up hills without feeling they're a huge challenge
RB: Ok [name] thank you so much that's really being so helpful and so interesting to talk to you today
HWM01: Well you have been very patient listening to all the ins and outs of my health and life *travailles*, whatever they call it, all the problems. I mean in that sense it's been really helpful to me because I can look objectively and see exactly where, how I've ended that where I have and yeah it's reversible so much of it
RB: I'm going to officially end the interview there (Conversation re medications continues)

[END]