

Permanent pacemaker and ICD insertion

Information for patients



ST VINCENT'S
HOSPITAL
MELBOURNE

A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA

Welcome to St Vincent's

Thank you for choosing St Vincent's Cardiology and Cardiac Investigations Unit. This booklet has been developed to help you understand what happens when you have a permanent pacemaker or implantable defibrillator cardioverter (ICD) insertion.

It is important for you and your family to read this booklet. If you have any questions please ask the team looking after you – we're here to help you.

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Why do I need a permanent pacemaker?

The heart is a specialised muscle which acts as a pump. Its primary role is to transport blood, oxygen and nutrients to every cell of your body. The heart uses electrical signals to stimulate the heart muscle to make it beat (contract). When the walls contract, blood is pumped into your circulatory system.

Sometimes the electrical system in your heart does not work properly. This can be caused by normal ageing of the heart, or because of damage caused to the heart from a previous heart attack. Some medications may also affect your heart rate.

The result is that your heart can beat too slowly or it can miss beats. For some people, the heart will switch between going too slow and going too fast. This can cause you to pass out (faint) or feel like you might pass out. Other symptoms may include feeling dizzy, feeling tired all the time, or short of breath when you walk.

What is a permanent pacemaker?

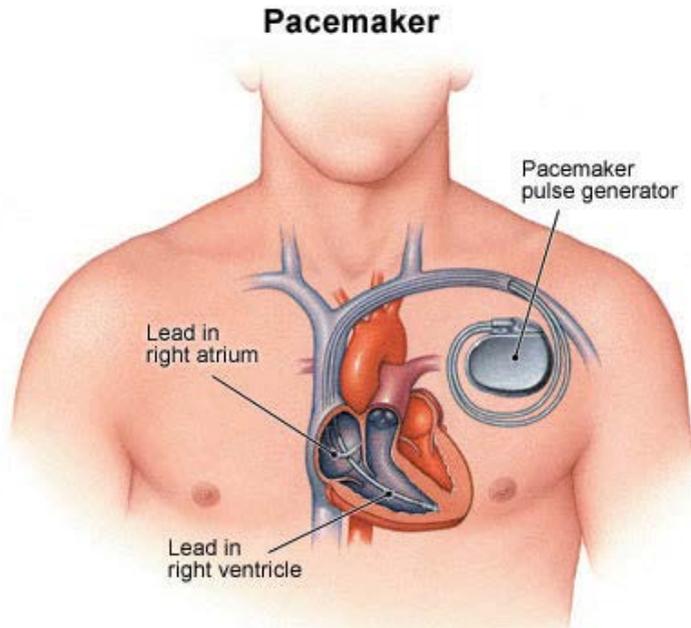
A permanent pacemaker (also known as a PPM) is a small device which is implanted under the skin just below the collarbone. It consists of two parts:

- a battery powered generator
- one (or more) leads which are placed inside the chambers of the heart.

The pacemaker lead(s) monitor your heart rate, sending information back to the generator.

When your heart beats too slowly the pacemaker will generate an electrical impulse to stimulate the heart to make it beat faster.

After you go home you will need to have your pacemaker checked regularly (about every 6 months) to make sure that it is working properly, and to make sure that the battery has enough power left. The battery will last between 5 and 10 years (at which time it will need to be replaced in hospital).



What is an ICD?

ICD stands for internal cardiac defibrillator. An ICD is used to prevent sudden cardiac arrest (a heart attack) in certain people.

An ICD is slightly larger than a pacemaker and is inserted in the same way. An ICD can be used to stop a dangerous heart rhythm by pacing the heart. If necessary it can deliver a small electric shock to the heart to restore it to its normal rhythm. Many ICDs can be programmed to act as permanent pacemakers as well.

You may need an ICD because you are at risk of developing a potentially life threatening heart rhythm or sudden heart attack. This may be because you have already a heart attack in the past and are at risk of having another one.

You may need an ICD because you have previously had a big heart attack which has affected your heart's ability to pump properly.

Rarely, some people are born with a heart problem which puts them at risk of sudden cardiac death.

What does this all mean for me?

You have been booked in to have an elective permanent pacemaker or ICD inserted. Before you come to hospital, we will send you a letter with important instructions about when and where to go on the day of your procedure.

Please read this letter very thoroughly.

The following information explains what to expect before, during, and after your procedure.

Before your procedure

The night before your procedure

Fast from midnight the night before your procedure. This means you **MUST NOT** eat breakfast on the morning of the procedure. You may drink water with your morning tablets.

Please contact your cardiologist for instructions if you take:

- Warfarin
- Dabigatran (Pradaxa)
- Apixaban (Eliquis) or
- Rivaroxaban (Xarelto)

The morning of your procedure (at home)

- ✓ Take all your usual morning medication. This is very important. It ensures you have an optimal blood pressure and heart rate during the procedure.
- ✗ If you are a diabetic, do **NOT** take your diabetes medication or insulin the morning of your procedure. All diabetics should contact (03) 9231 4423 for instructions on their diabetic medication.
- ✗ If you take diuretics (fluid tablets that increase the amount of urine you produce), **DO NOT** take these on the morning of your procedure.

The day of your procedure

Presenting to the Day Procedures Unit

Go to the Day Procedures Unit on the first floor Main Hospital (Building A) at the time listed on the letter you received in the mail.

Bring any correspondence (like letters, forms or other paperwork) and blood test results from the person who booked you in to have the procedure – this is usually your GP or cardiologist.

Bring ALL the medication you take, including insulin, in its original packaging. Avoid bringing loose medication or medication that cannot be easily recognised.

Before your procedure

You will speak to a doctor who will ask about your medical history. They will also explain the procedure and ask you to sign a consent form. They will talk to you about the risks and benefits of the procedure and answer any questions you have about it.

An intravenous drip will be inserted into your arm and some routine blood tests taken. This will allow us to give you any fluids and medication you need.

Please note:

You will wait in the Day Procedures Unit until you are called for your procedure. Please note that we cannot give you an exact time the operation will be performed.

Very rarely, for reasons beyond our control, your procedure may be delayed. This usually happens because of a medical emergency that must take priority.

The day of your procedure

During your procedure

The procedure will be done under a local anaesthetic. You will be given medication to make you feel very sleepy.

A small incision (a cut about 5cm long) is made in the skin just below your collarbone. The pacemaker leads are inserted through a vein in your chest into your heart. They are then connected to the generator.

The incision is then closed with internal sutures (stitches). A special waterproof dressing is then applied over the wound.

The whole procedure should take between 30 minutes and 1 hour.

After your procedure

After your procedure you will be transferred to the cardiac ward on the fourth floor. You will stay there for the night. Most people will be discharged from hospital the next day.

While you are in the ward you will:

- be placed on a heart monitor that will continuously check your heart rate
- have your blood pressure checked regularly
- have an x-ray of your chest.

You must stay in bed for 4 hours after your procedure. At this time you may sit out of bed if you feel like it.

Going home

The day after your procedure

- You will be discharged before 10am the day after your procedure.
- You must have pre-arranged transport with a friend or relative, or you can take public transport home.
- A pacemaker technician will check your device to make sure that it is working properly before you go home.
- You will need to have your pacemaker/ICD checked again in approximately 3 to 6 weeks. You will be able to go to a pacemaker clinic near your home. You will be sent an appointment date and time in the mail.
- You will receive a temporary credit-card-size card with the details of your pacemaker/ICD written on it. You will also receive a booklet which contains important information about caring for your device and some future restrictions.
- You will be seen by a pharmacist before you leave. They will supply you with medicine should you need it. You may be given a course of antibiotic tablets to take when you go home.
- Your nurse will talk to you about caring for your wound. You will also be given written information which we encourage you to read carefully. Please feel free to ask any questions.
- You should go to your GP 5 to 7 days after you go home. We will send them a copy of your discharge information including any changes to your medications. Ask them to look at your wound to make sure it is healing well.

Discharge instructions

Wound/ dressing	<ul style="list-style-type: none">- Leave the dressing on for 5 days – this is the best way prevent an infection.- The dressing is waterproof so it is okay to shower, unless your surgeon or cardiologist says that you should not.- After the dressing is removed, keep the site clean and dry. Do not apply any creams or powders to the area.
Monitoring your wound	<ul style="list-style-type: none">- An infection around the wound site is a serious (but rare) complication. It is very important that you check the area every day for any signs of wound breakdown or infection.- If you notice any increased redness, heat, mucky discharge, or swelling, then see your GP as soon as possible.
Bleeding and swelling	<ul style="list-style-type: none">- If you notice a new lump or bleeding under the wound site, place 3 fingers over it and apply firm pressure for 10 minutes or once the bleeding or swelling has stopped. See your GP if bleeding or swelling persists.

Discharge instructions

GP appointment	<ul style="list-style-type: none">– See your GP 5 to 7 days after you leave hospital. All relevant information, including test results, medication changes, and a discharge summary, will be forwarded to your GP. Make sure your GP assesses your insertion site.
Pacemaker Clinic appointment	<ul style="list-style-type: none">– To make sure that your device is working correctly, it will be checked at a pacemaker clinic 3 to 6 weeks after you leave hospital.– There are several pacemaker clinics. Your appointment will be at the clinic closest to where you live. After you are discharged you will be contacted with an appointment date and clinic details.– After your first visit, you will have appointments at the pacemaker clinic every 6 to 12 months.
PPM / ICD identification care	<ul style="list-style-type: none">– Your PPM/ICD identification card holds valuable information about the make, model and settings of your device. Carry it with you at all times– If you are having any medical tests and are unsure if it will affect your PPM / ICD, please show your identification card to the appropriate medical staff; this includes your dentist– The card issued during this hospital stay is a temporary card. You will receive your permanent card at your first pacemaker clinic appointment.

Checklist

Before your angiogram

Pack:

- Toiletries
- Clothes to wear home
- Medicare, VET affairs card
- A list of medication you take and any allergies you have
- All your medication (in the original packaging)

Organise:

- Someone to drive you home the day after your procedure.
- Call the hospital if you need to withhold any medication.

Helpful phone numbers

St Vincent's Hospital

(03) 9231 2211

www.svhm.org.au

St Vincent's Heart Centre

(03) 9231 4423

www.stvheart.com

St Vincent's Aboriginal Hospital Liaison Officer Program

(03) 9231 3436

Search for 'Aboriginal Health'
or 'AHLO' on www.svhm.org.au