



PATIENT INFORMATION LEAFLET

HOW THE HEART WORKS

The heart consists of 4 chambers. The upper two chambers (atria) fill the lower chambers (ventricles) which pump blood to the lungs and body. The heart's natural 'beat', the sino-atrial (SA) node, is located in the right atria. In order for the heart to beat, this node sends regular impulses to the atria and stimulates the atria to contract and empty blood into the ventricles. The impulse then continues down a pathway to the atrio-ventricular (AV) node where the impulses spread down the ventricles causing the ventricles to contract and pump blood to the lungs and body.

PERMANENT PACEMAKERS

A permanent pacemaker is required when there is a disturbance in the heart's ability to transmit electrical impulses. This may result in the heart beating too slow. The effect of the heart rhythm disturbance could possibly cause symptoms such as dizziness, fatigue, fainting spells or shortness of breath. A permanent pacemaker delivers electrical impulses to the heart via one or two flexible insulated wires to restore normal electrical rhythm (see picture). In brief, the Doctor will inject local anaesthetic into the chest wall. A small pocket will be made under the skin and the electrodes (wires) are introduced into the right side of the heart via a vein. The electrodes are positioned under x-ray and tested. The pacemaker is then attached and the skin is sealed with dissolvable stitches.



BIVENTRICULAR PACEMAKERS

This type of pacemaker is indicated because of the severity of your heart failure and its effect on how well your heart contracts and relaxes. A biventricular pacemaker is similar to standard pacemaker except it has an additional lead that is placed in the coronary sinus to help improve the pumping action of your heart and the symptoms that you are currently experiencing.

AUTOMATIC IMPLANTABLE CARDIOVERTER DEFIBILLATOR (AICD)

This type of pacemaker is indicated because your cardiologist is concerned about potentially life threatening heart rhythms that you have experienced or that your cardiologist has been able to identify. The AICD will act like a pacemaker but also has the ability to deliver a shock to your heart to terminate potential life threatening rhythms.

For all the procedures above your Doctor will decide if he wants you to stay overnight in hospital, if you are permitted to go home on the same day as the procedure you are not permitted to drive after having sedation therefore you will need someone responsible to take you home.