

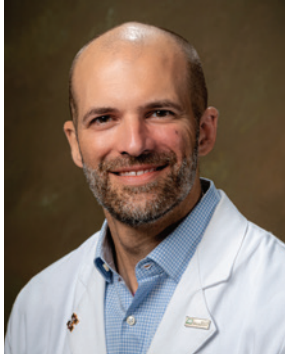
Preparing for LAAC

Left Atrial Appendage Closure



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TABLE OF CONTENTS

Welcome

The Heart Program at Huntsville Hospital is one of the most experienced cardiac programs in the Southeast and the largest in North Alabama. Our top priority is to deliver safe, quality patient care with exceptional service.

This booklet will help you prepare for LAAC, plan your return home, and provide you with information to use after the procedure is performed.

Please read and discuss it with your loved ones. We have included information about the different steps

Definitions.....	4
<i>Atrial fibrillation</i>	
<i>What is a stroke?</i>	
<i>Anticoagulant (blood thinner)</i>	
<i>Anti-platelet (blood thinner)</i>	
<i>What is the left atrial appendage and how do we close it with LAAC device?</i>	
<i>Other medications needed after LAAC</i>	
Waiting for LAAC	6
<i>While you are on the waitlist</i>	
Preparing for LAAC.....	6
Planning ahead.....	7
Coming to Huntsville Hospital	8
<i>Scheduling</i>	
<i>The day of your procedure</i>	
Frequently asked questions	9
During your stay	10
Going home	11
Activity at home.....	11
You've had your LAAC...now what?	12
Follow-up appointments	13
Questions and important dates to remember.....	13
Huntsville Hospital campus.....	14
Inside Huntsville Hospital	15

Definitions



Atrial Fibrillation

Atrial fibrillation (AFib) is a problem with the heart rhythm (heartbeat) that causes an off-beat or irregular heartbeat. Many patients do not experience symptoms, although a fast heartbeat may be felt. Other typical symptoms include tiredness, shortness of breath, chest pain, and dizziness. This heart rhythm occurs in 1-2% of the population and is more common as we age.

One problem with AFib is it can cause blood clots to form inside your heart. These clots can travel to your brain and cause a stroke. If you have AFib, you are 5x more likely to have a stroke. Taking a blood thinner can help lower the risk of stroke when you have AFib.

What is a stroke?

A stroke happens when blood flow is stopped to your brain. With AFib, a blood clot travels from the heart to the brain. This causes part of the brain to die. A stroke can cause you to lose the ability to care for yourself (dress, eat, and bathe). It can cause you to lose movement on one or both sides of your body, lose the ability to talk and understand words, and even cause death.



SIGNS OF A **STROKE**



B

BALANCE

Loss of balance, headache or dizziness



E

EYES

Blurred vision



F

FACE

One side of the face drooping



A

ARMS

Arm or leg weakness



S

SPEECH

Speech difficulty



T

TIME

Time to call for ambulance immediately

Anticoagulant (blood thinner)

Anticoagulants, or blood thinners, help to lower the risk of stroke caused by blood clots from the heart. A side effect of blood thinners is an increased risk of major bleeding. A person has to consider their risk of increased bleeding while on a blood-thinner and talk to their doctor about it. Some people are not able to take blood thinners long-term due to the bleeding risk or for other reasons. Common blood thinners include warfarin (Coumadin), apixaban (Eliquis), dabigatran (Pradaxa), and rivaroxaban (Xarelto).

Anti-platelet (blood thinner)

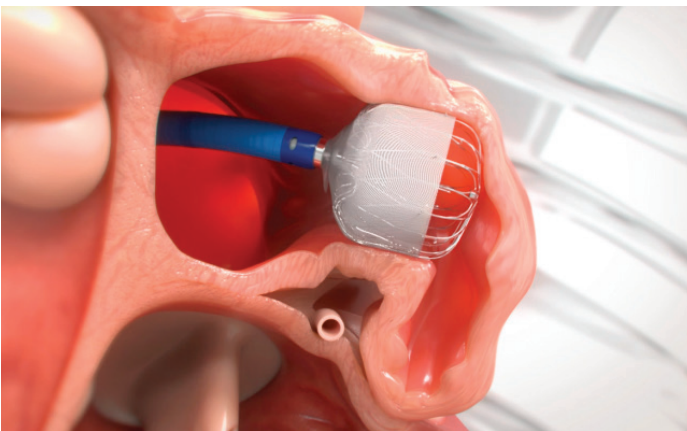
Anti-platelet drugs prevent platelets from sticking together which can decrease your body's ability to form blood clots. This can help prevent heart attack and stroke. The main risk associated with anti-platelets is excessive bleeding. Common anti-platelets are clopidogrel (Plavix) and Aspirin.

What is the left atrial appendage and how do we close it with LAAC device?

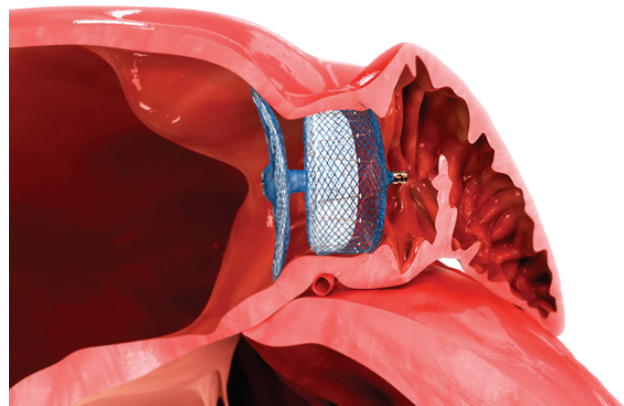
The left atrial appendage is a pouch on the upper left chamber (left atrium) of your heart. This is the most common place for a clot to form if the person has AFib, with over 90% of stroke-causing clots coming from the left atrial appendage. By closing the appendage (pouch), it reduces the risk of stroke. During the LAAC procedure, a permanent closure device is placed in the appendage through a minimally invasive procedure. Having a minimally invasive procedure allows for a quicker recovery and faster healing. This device will only prevent strokes that start in the left atrial appendage of the heart. The LAAC device is placed using a catheter, or small tube, that is inserted into the upper leg vein and then guides the device to the heart. This is usually done using general anesthesia while the patient is fully asleep. Most patients will go home the same day or the next day after their procedure.

Types of LAAC devices:

Currently, there are two FDA-approved devices available (as of 12/2024):Types of LAAC devices:



WATCHMAN™ FLX PRO device (Boston Scientific)



Amplatzer Amulet™ (Abbott)

Medications needed after LAAC

Once you have an LAAC device put in your heart, your doctor will prescribe a form of blood thinner for at least 6 months. This helps to prevent forming a clot on the LAAC device as your body heals. You will be provided specific instructions after your LAAC procedure on which medications to take and for how long. After 6 months, most patients will be instructed to take only an aspirin 81mg once a day. If you have questions at any time about your medications, please call the program coordinators.

Waiting for LAAC

- Our program coordinators will contact you when there is an available date on your doctor's schedule, which can change depending on your overall health and scheduling availability.
- Your insurance benefits will be reviewed and an authorization will be initiated if needed. This can sometimes cause a delay or create a need to reschedule your procedure.
- Two doctors must make a recommendation that you would benefit from LAAC. This usually includes your primary cardiologist (heart doctor) and your LAAC doctor.
- Bleeding issues may need to be addressed before your procedure, such as a visit with another specialist.

While you are on the waitlist

Looking after your medical health

Your primary care doctor and primary cardiologist continue to be responsible for your medical care while you are awaiting LAAC.

Our LAAC physicians will oversee your care when you come to the hospital for the procedure. After discharge, your primary care doctor will address any non-LAAC-related medical issues.

Health changes you should monitor

If you have any problems with bleeding on your prescribed blood thinner while waiting on LAAC, please call your primary cardiologist.

Preparing for LAAC

Here are some guidelines on what to do while awaiting LAAC.



Take your medicines

Continue to take the medicines your doctor has prescribed. If you are on blood thinners, the LAAC program coordinator will instruct you on what to do for your procedure day.



See your dentist

If you need dental work done, schedule it before your procedure date. Dental work done right after LAAC could cause a heart infection. Your Heart team recommends taking antibiotics for any dental work for up to six months after your LAAC procedure. This reduces your chance of infection.

Planning ahead

For most patients, LAAC is a same-day procedure with same-day discharge OR can include a one-night hospital stay.

Our goal is for you to walk and perform basic activities (like eating, drinking, and going to the bathroom) on the day of your procedure. Planning for a safe and prompt return home from the hospital is one of the most important things you and your family can do to ensure the procedure is a success.

Your going-home plan should include the following:

Getting home

You must make your own arrangements for the trip home, including transportation.

Even if you came to the hospital by ambulance, you must arrange for your own departure. Ambulance services are not available to return people to their homes. Arrange to have someone travel with you after discharge. If this is not possible, let the program coordinator know.

Help at home

You will need help when you first get home. After discharge, you should arrange for someone to stay with you for the first 24 hours of recovery. If you do not have family or friends to help you, speak to the program coordinator.

Recovering after LAAC

Most patients are fully recovered after about a week.



Coming to Huntsville Hospital

Scheduling

The program coordinators will call to provide you with the proposed date for your LAAC.

You will need to call pre-registration before your procedure date. Our goal is to let you know early enough to allow you to plan ahead. However, we may call you on short notice if there is a change in our waitlist. Keep in mind that some procedures occasionally have to be postponed due to other surgeries, emergencies, or delayed approvals from insurance companies.

The day of your procedure

Where to go

Your LAAC procedure will be performed at Huntsville Hospital Main, located at 101 Sivley Road, Huntsville, AL 35801. Your family member may park in the Visitor Garage located on Gallatin Street. You will check in directly on the third floor at the Heart Institute. Take the public elevator C on the ground floor, just past the gift shop, to the third floor. Once you exit the elevator, you will see the sign for the “Heart Institute” entrance.

Additional instructions

Do not eat or drink anything after midnight the night before your procedure.

The program coordinators will give you specific instructions about your medications.

Certain medications must be STOPPED before your procedure, some examples include:

- Glucagon-like peptide-1 (GLP-1) receptor agonist which will need to be held 1 week prior to your procedure: Examples: Wegovy® (semaglutide), Zepbound® (tirzepatide), Saxenda® (liraglutide), Mounjaro® (tirzepatide), Ozempic® (semaglutide), Rybelsus® (semaglutide), Trulicity® (dulaglutide), and Victoza® (liraglutide).
- On the morning of the procedure, you will not take any medications unless otherwise instructed.
- Blood thinners are often stopped a day before the procedure. You will be given specific instructions based on your doctor’s recommendation by the coordinator.

While in the hospital, you might need the following:

- Glasses
- Hearing aids
- Overnight essentials
- Reading materials
- Your home CPAP machine
- Walking aid, such as a cane or walker

Personal belongings (ie dentures, glasses, wallet) will be left with your support person while you are in the procedure room.

Frequently asked questions

What happens before the procedure?

You will check in to the Heart Institute which is on the third floor of Huntsville Hospital Main. From there, you will be taken to a pre-procedure room where you'll be asked to change into a hospital gown.

While there, you will be placed on a heart monitor and have two intravenous lines (IV's) started. The nurses will clean and prep your groin area (which may include shaving), draw blood for routine tests, and obtain an electrocardiogram (ECG). You will also get a chest X-ray.

Once completed, you will meet the anesthesiologist who will help with anesthesia/pain control throughout the procedure and the post-operative phase.

Please leave any personal belongings (dentures, glasses, wallet, etc.) with your support person while you are in the procedure room.

Will I be completely asleep during the LAAC procedure?

This procedure is performed under general anesthesia. This means you will be given medicine to fall into a deep sleep so that you don't feel any pain or discomfort.

You will have a tube placed in your throat to help you breathe while asleep. Your vital signs will be closely monitored by the anesthesia team.

What will the LAAC doctor do?

- A small opening is made in the femoral vein in the groin.
- A catheter (small, flexible, and hollow tube) is threaded through the vein and up into the heart.
- The doctor uses a special X-ray machine (fluoroscopy) to guide the catheter.
- The LAAC device is placed into your left atrial appendage.
- Once the LAAC device is in place, the catheters are removed and the leg sites are closed with stitches or a closing device.
- A dressing is placed over the small closed incision in the groin.

How long does the procedure take?

LAAC takes on average about 45 minutes.

Will I be off all my blood thinners as soon as I have the LAAC done?

No. You will have a customized plan **that will include a blood thinner for the first 6 months** while your body heals around the LAAC device. Please take them as prescribed for the instructed timeframe. If not followed correctly, this can cause a clot to develop on the LAAC device and lead to a stroke.

Will the LAAC implant cure my Atrial Fibrillation?

No. The LAAC implant is designed to reduce your risk of stroke by preventing blood from pooling into the left atrial appendage (a heart structure where blood clots can form in patients with atrial fibrillation).

Will my insurance cover the LAAC procedure?

The LAAC implant is covered by Medicare and most commercial health insurance plans. If for any reason your insurance denies authorization, an appeal and/or peer-to-peer discussion will be pursued.

Will I feel the LAAC device in my chest?

No, you will not be able to feel the device in your chest.

Can I have an MRI after my implant?

You will receive an LAAC Device implant card that will explain the conditions under which you may safely undergo an MRI.

Will the LAAC Implant interfere with my pacemaker?

No, the LAAC is entirely independent from the pacemaker and will not interfere.



During your stay

You will recover in our specialized Cardiac Short Stay unit. Your support individual(s) will receive updates and have an opportunity to speak to your doctor after the procedure.

Recovery

- You will lie in bed for the first 4 hours after the procedure. The head of your bed will be raised for comfort after the first two hours.
- It is very important to keep your legs straight to prevent bleeding at the incision site in your groin. The nurses will frequently check this area as you recover.

Discomfort or pain

- Most patients who have LAAC do not have a lot of pain.
- If you have any pain, please let your nurse know so that she can assess the situation and notify your doctor if needed.
- You will have a bruise in your groin area, which can be large, but will slowly go away in a week.

Activity

- Goal: 4 hours after your procedure, you will be repositioned to an upright position in bed.
- Goal: 4-6 hours after your procedure, you will take several short walks with assistance.
- You may eat and drink once the head of your bed is raised.

Going home

Please follow these steps to remain as safe as possible during your recovery process:

- Check your groin incision every day.
 - Bruising is expected.
 - A small soft lump or knot may be felt in the groin and is expected.
- If you feel the lump becoming larger or hard, this may mean you are bleeding:
 - Lie down.
 - Have someone press down hard on the area right above the puncture site on your groin.
 - If the bleeding does not stop after 15 minutes, call 911 for an ambulance.
 - Do NOT drive yourself to the hospital and do NOT ask anyone to drive you.
- Call your doctor immediately if you experience any of these problems:
 - Redness and warmth at the incision site.
 - Yellow or green drainage from the incision site.
 - Fever or chills.
 - Worsening numbness in your legs.
 - Pain around the incision site, groin area, or in your back that is getting worse.
- Clean the incision site with warm water and mild soap and gently pat dry. No baths or submersion in a pool / hot tub until completely healed.
- Do not drive for 48 hours after LAAC, unless directed otherwise by our Heart Team or your regular doctor.

Activity at home

Daily activity and exercise are an important part of your recovery. You can follow these steps to safely stay active and healthy once you go home:

- Do NOT lift, squat, push or pull anything that weighs more than 5 pounds for the first week. This includes NO heavy housework like vacuuming, lifting groceries, or strenuous gardening.

You've had your LAAC...now what?

Call the Program Coordinator (256) 801-6881 if:

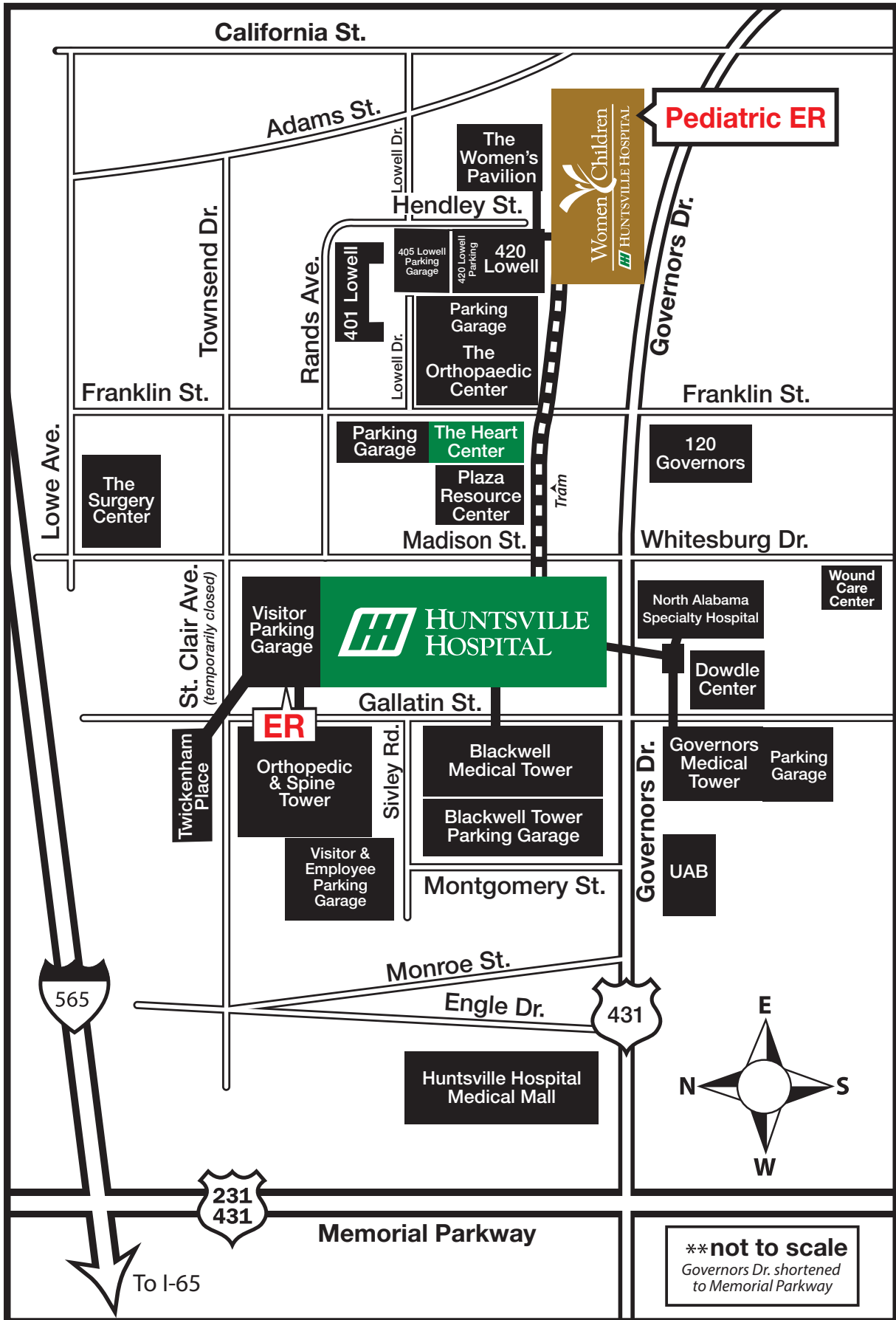
- You have pain, redness, swelling, or foul-smelling drainage near your procedure site.
- You experience nausea, vomiting, or diarrhea.
- If you experience any oozing of blood at your leg site, dark or black tarry stools, red blood in your stool, or a nosebleed that won't stop, please call the coordinator.
- **Call Emergency Services:** If you experience bleeding at your leg site or anywhere else that is moderate or severe, call 911 and go to the nearest Emergency Department.

After you get home

You may feel tired and sore on your first day home. Remember to take it easy today!

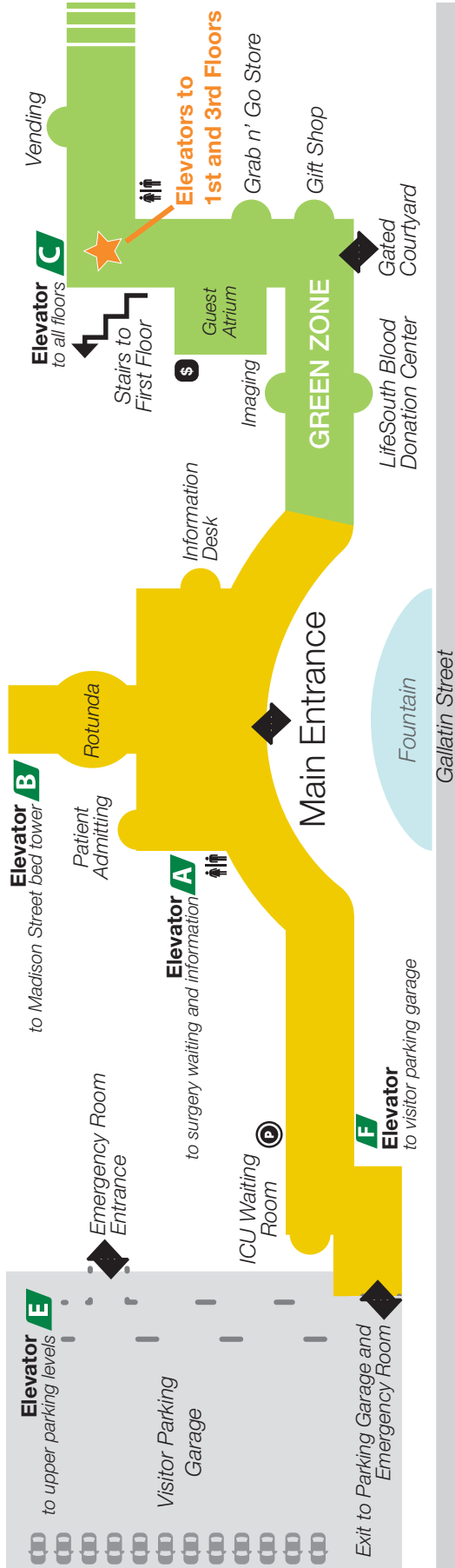
- Remove the dressings from your legs once you get home. It is easiest to do this while showering or right after.
- Review your discharge medication list and take all medicines as prescribed. It is VERY important to take your blood thinners as instructed. Call us if you have any questions.
- Increase your activity level each day.
- Antibiotics are required to be taken before any dental cleanings or procedures for six months after your LAAC to prevent possible infection of your heart device.
- Do not forget to come to your follow-up visits at The Heart Center!

Huntsville Hospital campus

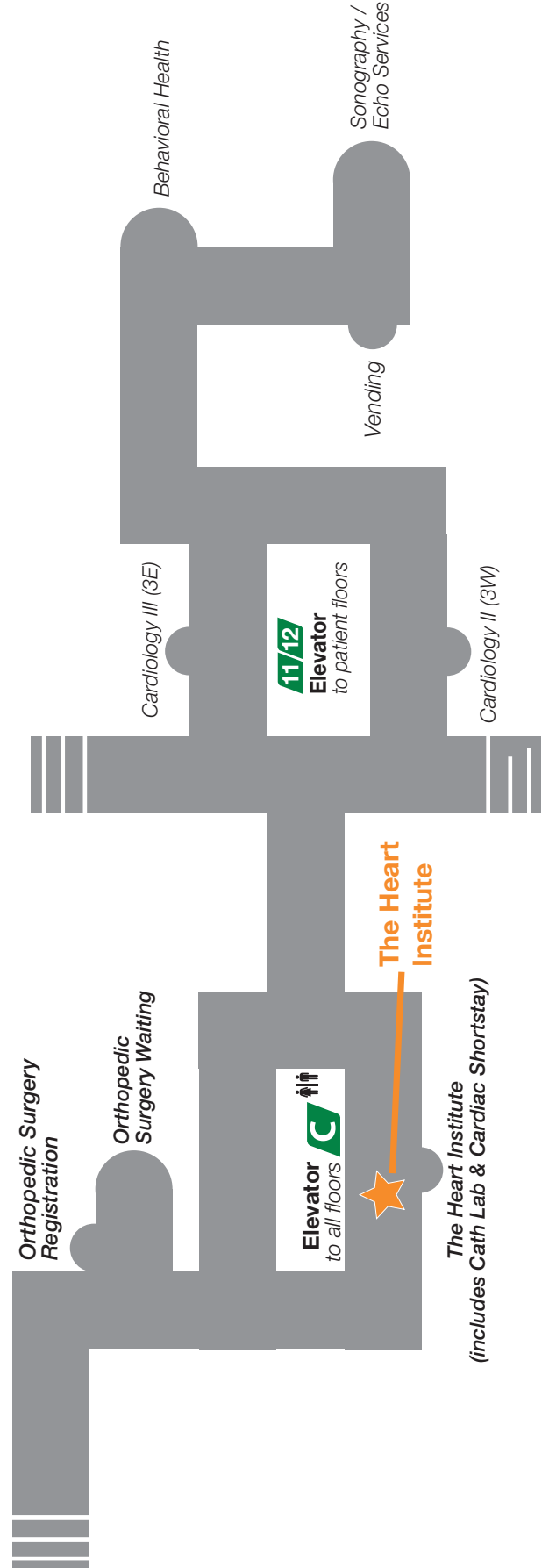


Inside Huntsville Hospital

FIRST FLOOR



THIRD FLOOR





**HEART BYPASS
SURGERY**



HEART FAILURE



HEART ATTACK

**Huntsville Hospital Heart Center
LAAC Program**

LAAC Program Coordinator · (256) 801-6881

Huntsville Hospital

101 Sivley Road · Huntsville, AL 35801
huntsvillehospital.org · (256) 265-1000

Huntsville Hospital Heart Center

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