



Norwest
PRIVATE HOSPITAL



Transcatheter Aortic Valve Implantation (TAVI) Program

Deciding to have TAVI

Your Doctor has asked the Norwest TAVI Program Team to assess if a special heart procedure called Transcatheter Aortic Valve Implantation (TAVI) would help you. TAVI is a new way of replacing the aortic valve in your heart. In the past, the aortic valve could only be replaced with open heart surgery.

Please read this booklet, share it with your family and bring it with you when you come for your appointment in our hospital. Think about questions you might want to ask and write them down on the last page. We will review the information with you and explain anything you are unsure about.

‘Transcatheter’ means we use a catheter (a small flexible and hollow tube) to place a new aortic valve in the heart. This is done by making a small opening in an artery, then threading the catheter and the new valve into the right position (replacing the valve). Unlike open heart surgery, there is no need to open the chest for this procedure. TAVI is generally performed under conscious sedation known as twilight sedation.

This booklet contains a lot of information about TAVI as a possible option for treating your heart valve disease. This information is to help you understand how to decide which option is best for you and your part in the decision.



Why you may need your aortic valve replaced?

Your doctor has told us that you have a heart valve disease called aortic stenosis.

The aortic valve is one of the four valves in your heart that ensures blood flows through your heart in the right direction. When blood leaves the heart, it flows through your aortic valve.

Stenosis means a narrowing of the aortic valve opening. Aortic stenosis usually occurs as people age. Over time, the valve stiffens and cannot open enough to let blood through. This may cause feeling short of breath, chest pain, or feeling faint or very tired.

Until now, the usual treatment for severe aortic stenosis has been open heart surgery. Open heart means the person's chest and the heart itself are opened so the doctor can operate directly on the heart. The doctor removes the diseased valve and replaces it with a new valve. While this surgery is being done, the person's blood is circulated outside the body through a special machine, called a heart-lung bypass machine. This is called Surgical Aortic Valve Replacement and may be the best option for most people.

A Surgical Aortic Valve Replacement may not be the best option if:

- You are older
- You have other diseases like kidney or lung disease
- You have had one or more open heart surgeries in the past
- You are not well enough for a major surgery
- You have had radiation to your chest.

Is TAVI the best option?

We don't know yet. In order for us to decide whether TAVI would be the best option for you, we need a lot of information about you, your heart, and general health.

Also, it is not just our decision. If we recommend TAVI, you can choose to continue with your current treatment instead, or talk to your doctor about other options. But it is important to make your decision after we have seen you and given you information about your options.

Every person undergoes a thorough review before deciding if TAVI is an option. If you decide that you want to know if TAVI is an option, you will need to come to the hospital for at least two visits (sometimes more). If you are from out of Sydney, you will need to make your own travel and hotel arrangements for these days. If you are in hospital right now, you may have the tests done while you are admitted.

The review process:

Step 1: Appointment for TAVI assessment is scheduled

Step 2: Attend hospital for TAVI assessment. This may take two hospital visits, on at least two separate days

Step 3: The team reviews the results of your work-up and recommends the best option for treating your aortic stenosis

Step 4: You and your doctor are notified with our team's decision. If TAVI is the option of choice, we will book your procedure to have your aortic valve replaced.



TAVI Assessment

In order for us to gain a complete picture of you and your health, we need to see you in our clinic in person. Appointments are co-ordinated over two or three days, but there may be a few days between clinic days. If you are from out of Sydney, we try to schedule your visit over two or three days in a row (remember to book you hotel for at least two or three nights).

During this time, a number of heart tests will be done, either at Norwest or our affiliated hospital. A letter with the days and times of your appointments will be sent to you, with information about where to go for the appointment.

If you are in hospital right now at Norwest Private Hospital, the cardiologist will explain the plan to you and answer your questions.

If you do not speak or understand English well enough to have conversations about your health to make medical decisions, we can arrange for a medical interpreter at no cost.

- Ask someone in your doctor's office (or someone you know who speaks English) to call us at least three to five days before your appointment to request an interpreter.
- To book an interpreter, we need the following information:
 - ✓ Your name
 - ✓ Day and time of appointment
 - ✓ Language you speak and understand the best.

What to bring to your appointment:

- This booklet with any questions written. It is a good idea to keep all your TAVI information and documents in one folder, and bring the folder with you to all of your TAVI appointments.
- A list of all the medicines you are taking. You can either ask your pharmacy to print the list or use the admission forms we send you.
- A list of questions you and your family have for us.
- A person who knows you well, such as your spouse, relative or friend. This person meets the team with you, helps give information about you, and provides support through the assessment process.

What to expect during the clinic visits

- We review what is TAVI, how TAVI is done, and the risks and benefits of this type of procedure
- You will have time to ask your questions
- We provide information about how the team decides which treatment option is best for you
- A range of different heart tests
- Other tests include a walking test and memory test
- Questions about your everyday life, understand what you can and cannot do for yourself, your living situation and your heart symptoms
- A doctor gives you a medical check-up and asks you questions about your heart and your health
- Our heart surgeon reviews your health record. The doctor may wish to examine you further
- Pictures of you are taken to help the team when they meet to discuss your treatment options after your clinic visit. The pictures are kept in your chart.

What heart tests to expect

A number of heart tests are performed to help us decide whether TAVI is the best option for you. You may have already had some of the tests done in the past, however we repeat them because the focus of the test this time is specific to TAVI.

Everyone who is being considered for TAVI have these tests:

Echocardiogram:

(‘Echo’ meaning using sound waves, ‘cardio’ meaning heart, and ‘gram’ meaning a print out.)

An echocardiogram (also called an ‘Echo’) is an ultrasound test. High-pitched sound waves are bounced off different parts of the heart, creating pictures. This test allows us to look at the heart muscle, the valves of the heart, the blood vessels of the heart, and how blood flows through the heart. While you are lying down on a bed, we slide an ultrasound probe (special camera) across your chest with the help of clear gel. It takes about 30 to 60 minutes to complete this test.

Cardiac Angiogram:

(‘Cardiac’ meaning heart, ‘Angio’ meaning blood vessels, and ‘gram’ meaning a print out.)

A cardiac angiogram (also called a ‘cardiac cath’ or ‘coronary angiogram’) is a test to check the blood vessels around the heart and the blood pressure inside the heart. A doctor who specialises in the diseases of the heart (a cardiologist) inserts a long flexible catheter (a small hollow, flexible tube) into an artery in your groin/wrist through a small needle. Contrast (also called x-ray dye) is injected through the catheter so we can see your blood vessels better.

The tests takes about one to two hours, but you stay in the hospital for about four to six hours after the test. To help you learn more about this test and how to prepare, we send you a patient information booklet before the test.

Computed Tomography:

(‘Computed’ meaning using a computer, ‘tomo’ meaning using a slice or section, and ‘graphy’ meaning an image or print out).

Computed Tomography (also called a ‘CT scan’ or ‘CAT scan’) is a special x-ray that takes many pictures of your heart and blood vessels in small “slices”. The computer puts these pictures together to create a three-dimensional (3D) view of your heart and blood vessels.

During the test, you are given contrast (special x-ray dye) to outline the heart and blood vessels so they can clearly be seen. To do this, we start an intravenous (‘intra’ meaning into and ‘venous’ meaning vein, commonly called an IV). Contrast is injected into your bloodstream through the intravenous. It takes about 30 minutes to complete this test.

Other test may include:

Transoesophageal echocardiogram:

(‘Trans’ meaning through, ‘Oesophageal’ meaning the passageway tube from mouth to stomach)

A transoesophageal echocardiogram (also called a ‘TOE’) is done when doctors feel they need a more detailed look at your heart. It is similar to a regular echocardiogram, but the ultrasound probe is passed through your mouth and down your oesophagus. You will be given medication to make you sleepy during the test which takes about 60 minutes.



Deciding the best option – Is TAVI for you?

After your hospital visits, the TAVI team meets to review all the information gathered about you, including your assessment and the results of your heart tests. From this information, the team determines which option would be the best choice for treating your aortic stenosis. Our aim is to recommend the treatment option that is best for you, in keeping with your wishes and goals.

The best option may be:

- **Medical Management:** This means your aortic stenosis is best managed without surgery for now. Your family doctor or heart specialist (cardiologist) will continue to monitor and treat your aortic stenosis with medication. Your doctor may ask you to return to the TAVI clinic in the future.
- **Surgical Aortic Valve Replacement:** This means open heart surgery is the best option for you. Arranged through your referring doctor, a cardiac surgeon's office will contact you to discuss this option more.
- **Transcatheter Aortic Valve Implantation (TAVI):** This means TAVI is the best option for you to have your aortic valve replaced.
 - o **Transfemoral TAVI** – means inserting the catheter into the femoral artery in the groin.
 - o **Alternate access TAVI** – means inserting catheters via alternate routes other than femoral such as subclavian (near the shoulder).

When will you know?

- We call you within two weeks of your hospital visit to tell you what the team believes would be the best option. We also send your doctor a letter.
- Take time and discuss with your family doctor or cardiologist about what we recommend.

If we feel TAVI is the best option for you

Take some time to think about whether you want to go ahead with the procedure. Think about whether you are willing to go on the TAVI wait list and proceed with the procedure should we call you sooner than your expected surgery date. This means that you have to be willing to come into the hospital for the procedure when we call.

Call the TAVI office on 02 8882 8802 when you have decided how you want to proceed.

Three dates determine how long you can expect to wait:

1. Date the medical team meets to review your case
2. Date you let us know you want to go ahead with the procedure
3. Available date at the hospital to do the procedure.

We will let you know how long the wait list is when we talk by telephone.

If you tell us you wish to go ahead with the TAVI procedure:

- An information booklet about preparing for the procedure, and what to expect while in the hospital will be sent to you
- We ask that you continue to have your symptoms of aortic stenosis monitored and treated by your family doctor or heart specialist (cardiologist).

Call Norwest Private Hospital on 02 8882 8802 if:

- You have questions about TAVI
- Your heart condition changes significantly since your last clinic visit
- If we are unable to speak to you when you call, we will endeavour to return your call as soon as possible.

*This book was prepared by **Dr Peter Fahmy.***



Norwest
PRIVATE HOSPITAL

11 Norbrik Drive,
Bella Vista NSW 2153

Phone: 02 8882 8882 | Fax: 02 8882 8883

www.norwestprivatehospital.com.au

ABN: 85 006 405 152

A Healthscope hospital.

V1_03/2018