Cardiac Resynchronisation Therapy – Pacemaker (CRT-P)

Important information for all patients requiring resynchronisation therapy.
Important contact numbers

If you have any enquiries, please do not hesitate to contact Ward 2C.

Please note that Ward 2C is closed from Saturday at 1.45pm to Sunday at 1.45pm. If you need help during these hours, please contact the Coronary Care Unit (CCU).

Golden Jubilee National Hospital

Switchboard: 0141 951 5000
Coronary Care Unit: 0141 951 5202
Ward 2C: 0141 951 5203

You will have your follow up at:

You can contact them on:

Next of kin:

________________________________________

________________________________________

Other emergency contacts:

________________________________________

________________________________________
About this booklet

The purpose of this booklet is to provide information about Cardiac Resynchronisation Therapy using a Pacemaker and what you should expect during the course of your treatment.

Why a CRT-P device is implanted?

A Cardiac Resynchronisation Therapy Pacemaker (CRT-P) is implanted in patients suffering from some forms of heart failure, to reduce symptoms such as shortness of breath and fatigue.

The CRT-P is designed to treat heart failure by helping your heart pump blood more effectively, which can improve your heart’s function and decrease your symptoms.

How a CRT-P works

The CRT-P device works by sending pacing impulses to both ventricles (pumping chambers of the heart) simultaneously via pacemaker leads which are inserted to the right and left sides of the heart.

This will improve the overall pumping function of your heart and, over time, can improve your heart failure symptoms. Please do not worry if you do not notice an immediate improvement, as it can take between several weeks and a few months for the device to work.
After you have your CRT-P implanted

For the first six weeks following your implant, it is important not to over use your arm on the implant side to allow the leads to settle into the heart muscle and for tissue to grow around them, holding them in place.

You should avoid raising your arm above shoulder height or carrying anything heavy, such as shopping bags, during these first few weeks.

Wound Care:
• Leave your wound site covered for first two days after your procedure.
• On the third day, remove your dressing and shower or bathe as normal, allowing clean water to run over your wound and pat it dry with a clean towel.
• Do not rub the area with soap, perfumed products, or a towel. If your wound site appears to be healing with no signs of fluid/discharge then leave it exposed; there is no need for further dressing. Continue this daily until wound is completely healed.
• To prevent infection, make sure you wash daily, using a clean towel at all times and wearing clean clothes.

If you think you have an infection at your wound site, contact your Pacemaker follow-up centre.

Signs of infection include:
• Heat or redness at site.
• Pus/discharge.
• Swelling.
• Smell.
• Increased pain.

You will be advised about your medication prior to being discharged from the ward.
CRT-P follow up

Your first follow up appointment will take place approximately six weeks after your implant and you will have regular follow up appointments at three months and annually after that. The Cardiology Department at your follow up hospital will keep you informed of your future appointments.

If you do not receive an appointment letter, it is important to contact Cardiology Department at your follow up hospital.

It is important that you attend your appointments as this will allow the team to check your pacemaker lead function and its battery.

You may also be referred for a CRT Optimisation procedure around three months after your implant. This will involve an Echocardiography scan of your heart. This procedure will take place in the Cardiology Department at the Golden Jubilee National Hospital.

Patients with Atrial Fibrillation will not be referred for this procedure.

Pacemaker battery

The battery in your Pacemaker will normally last between five and ten years. As you get nearer to having this replaced, you will need to attend the Cardiology Department at your follow up hospital more frequently.

Having the battery replaced requires a theatre procedure similar to your initial implant. Normally the same scar site is used but the procedure can be much quicker, unless there is a problem with any of your leads.
**Driving**

The Driver and Vehicle Licensing Agency (DVLA) state that you cannot drive for one week following your implant.

**Safety information**

Most household appliances are safe to use with your pacemaker.

Mobile phones should be used on the opposite side to your implant.

All power tools should also be kept at arms’ length.

You cannot undergo a Magnetic Resonance Imaging (MRI) scan unless you have been fitted with an MRI compatible device. If you are referred for an MRI scan, the doctor performing the scan (the radiologist) will need to check with your cardiologist / cardiac physiologist whether your device is ‘MRI safe’ or not. Even if the device is MRI safe, there are still precautions which may need to be taken.

Pacemakers can be sensitive to strong electromagnetic interference (EMI). If your employment requires you to be close to large industrial generators or other sources of EMI, you may need to take extra precautions. You should discuss any issues or concerns with your employer before you return to work.

As a rule if you begin to feel unwell using any equipment, stop and remove yourself from the area.

More detailed information on safety can be found in the Pacemaker manufacturer’s booklet provided to you. If you have any questions or concerns about safety of equipment, please contact the Cardiology Department at your follow up hospital for advice.
CRT-P ID card

You will be provided with a CRT-P identification card which includes your personal information, along with details of the pacemaker, leads you have implanted, the implanting physician and your hospital.

You must keep your ID card on you at all times as you may be required to provide it at any doctor/dentist/hospital appointments.

The ID card is issued by Eucomed Medical Technology. It is folded to credit card size so that you can keep it in your wallet or purse.

Travel

When travelling ensure you:

• take your ID card with you;
• Inform your travel insurance provider that you have a CRT-P implant; and
• obtain information on the nearest hospital to your destination.

Airport Security

You will need to show your ID card when going through airport security so that staff know you have a CRT-P implant and can make a decision on whether to search you by hand rather than using the security gate/metal detectors.

If you are asked to walk through metal detectors it is safe to do so but you will set off the alarms.
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