



## EVENTS

2013

23<sup>rd</sup> March  
Holidays  
Medicines

June  
Healthy  
diet  
Skin care  
TBC

## Event for your diary

In what promises to be a very interesting afternoon on Saturday 23 March 2013 we are holding an informal information session in Haverfordwest Leisure Centre at 1.30pm.

The presentations will be a brief talk and demonstration on concealing scars etc by a qualified beautician and, as the summer approaches, what you and your family need to know about going away on Holiday with your ICD.



After the presentations, why not relax and chat, as refreshments will be available giving you the opportunity to meet and talk with other ICD recipients and their families.

***“We know from past experience this relaxed chatting can be very beneficial to both the ICD patient and their families from others who share the same experiences.”***

## Greetings from your committee in 2013

We would all like to welcome members, young and mature, new and old to the Phoenix ICD support group. Our aim is a simple one.

The group is run by ICD patients and family members who give their time freely to help bring comfort and peace of mind to all in need, including themselves. In addition our local Cardiac nurse Paula Emery is a member of the committee thus providing that essential medical advice and support when needed.

The main focus of the group is to provide support, help and advice for all matters that concern you and your ICD. We all know that the physical aspects of having an ICD heal quite quickly and the body soon adapts. Equally, we know the mental and psychological issues though take much longer to come to terms with.

Whatever your concern, it is likely that you are not on your own. It is also likely that someone within the group has the same concern or found how to deal with it.

In case you don't already know we are;

Paula Emery; Cardiac Nurse  
Laurence Thomas; ICD patient and Treasurer  
Lesley Jones; ICD patient & Secretary  
Vivienne Cotterill; ICD patient  
Barry Cotterill; Chairman

Contact details;  
Email:-phoenixicd@hotmail.co.uk  
Phone No:- 01437 710398 (Lesley Jones)

We also recognise that the success of the group is its ability to provide its members with the information and comfort that we all need. For that reason we welcome your questions and your input. Whether it is for your own personal reasons or the fact that you wish help us improve our means of awareness and/or fund raising.

Your say and your ideas are also very important to the group. In short we want your feedback.

### What is an ICD?

ICD stands for Implantable Cardioverter Defibrillator. If your doctor has suggested that you need an ICD you may have experienced or may be at risk of experiencing an abnormal, fast heart rhythm. An ICD can recognise and monitor your heart rhythm and can deliver various electrical treatments if needed.

It is made up of a small, slim, box-shaped device which contains a battery and electronic circuits, usually placed under the skin below your collarbone, normally on the left-hand side.

### Most modern ICDs have three main functions;

If your heart rhythm is too slow, the device can give your heart extra support by working as a normal pacemaker (anti-bradycardia pacing).

If your heart beats too fast, the ICD can give you a burst of extra beats at a slightly faster rate which should return your heart back to a normal rhythm (anti-tachycardia pacing or ATP).

If the anti-tachycardia pacing doesn't bring your heart back to a normal rhythm, or if the ICD senses a faster, dangerous rhythm called Ventricular Fibrillation, the ICD can then give a shock (defibrillation).

### How is the ICD fitted?

This procedure is performed under a general anaesthetic or a local anaesthetic and sedation. The ICD generator is connected to either one or two leads which pass through a vein into the heart. The doctor may test the device during the procedure to ensure it is working correctly. The implant should take between one and two hours and any stitches that may need to be subsequently removed will be done at your GP surgery.

### What happens after the ICD has been implanted?

You will probably be allowed to go home the next day provided your ICD is checked and there are no complications. You will be given an ICD identity card, emergency information and instructions at this point. You will also be given a helpline number should you have any queries later on.

Normally an ICD battery lasts between six and nine years and the replacement procedure will usually involve changing the ICD generator, not having new leads implanted.

### Will I feel anything different?

Some patients have reported that having shocks can feel like they have been suddenly kicked or punched in the chest. These shocks can be quite painful but the pain will only last for a few seconds, others may not feel anything.

If you do feel unwell after a shock, or if your device has given you several shocks, please dial 999 for an ambulance. Show the paramedics your identity card along with any emergency instructions; this will inform them of exactly which type of device you have and what the best course of action will be.



### Do you know your pulse?

Knowing your pulse is the easiest way to detect a heart rhythm disorder.

Know Your Pulse with our **FREE Pulse Check Guide and iPhone App**

[www.knowyourpulse.org](http://www.knowyourpulse.org)  
+44 (0) 1789 450 787

### Frequently Asked Questions

#### Q. What is an arrhythmia?

A. To enable your heart to beat, electrical impulses travel through the heart via what is sometimes referred to as a conduction pathway. Arrhythmias are disorders of your heart's electrical system, which means there is a change in the regular beat of your heart. This can be as a result of the conduction pathway being damaged or blocked, or because an extra pathway is present. The heart may beat too quickly (tachycardia), or too slowly (bradycardia) or irregularly, all of which may affect the heart's ability to pump blood around the body. These abnormal heart beats are known as arrhythmia. Arrhythmias can occur in the upper chambers of the heart (atria) or in the lower chambers of the heart (ventricles). An arrhythmia may occur at any age, and are most often a nuisance rather than a serious problem.

#### Q. What happens in the heart to cause arrhythmia?

A. Any interruptions in the heart's electrical system can cause arrhythmias. For example, an irregular heartbeat may begin with an abnormal impulse in the part of the heart other than the normal pacemaker (the sinus node), or the sinus node may develop an abnormal rate or rhythm.

#### Q. What can trigger an arrhythmia?

A. Common causes of an arrhythmia can include stress, caffeine, tobacco, alcohol, diet pills and cough and cold medicines. If your heart tissue is damaged as a result of acquired heart disease, such as myocardial infarction (heart attack) or congenital heart disease, you may be at risk of developing an arrhythmia. However for some patients doctors cannot identify a cause of their arrhythmia.

#### Q. How do I know what kind of arrhythmia I have?

A. You will need to visit your doctor and have an ECG. If the ECG does not detect any abnormality it may be necessary to arrange for further monitoring of your heart. This may involve having a continuous ECG for a period of time, usually 24-72 hours. This is done via a small recording device which can easily be carried around with you. You do not have to stay in hospital for this test. Once the recording device is fitted, which involves attaching some small stickers to your chest and connecting the leads of the device, you can go home and return the recorder at the end of the specified period.

There are also other ways of monitoring your heart over a period of time; your nurse, physiologist or doctor will discuss this with you if required.