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1st English Edition, Zaandam, 2014 (Translation of 2nd edition, Zaandam, 2013) © Stichting ICD dragers Nederland

Introduction

If your cardiologist has suggested that you need an ICD, you may have experienced or be at risk of experiencing an abnormally, fast heart rhythm (cardiac arrhythmia). An ICD (implantable cardioverter defibrillator) is programmed to detect an abnormally fast heart rhythm and to correct it by delivering a brief electrical impulse to the heart. Not every ICD is the same, some are connected to the heart with one lead but others have two or three leads. An ICD with three leads can sometimes improve the heart's ability to pump, but not every patient requires this. Currently, ICDs without a lead in the heart also exist; these are called the subcutaneous ICD (S-ICD). The ICD and lead system are inserted entirely underneath the skin (subcutaneously, hence the name). Each system has its advantages and disadvantages. Your cardiologist will be able to advise you which ICD is most suitable for the treatment of your specific heart condition.

The implantation of an ICD can complement other possible treatments such as medication, balloon angioplasty and/or a bypass operation. The implantation of an ICD requires many considerations, not only for you as a patient but also for your family and those close to you. It is normal to have lots of questions. How will I experience a shock and how will I react to it? What does the implantation involve? What are the risks associated with it? How will the ICD implantation impact my social life in areas such as work, driving, travelling and insurance?

This guide will help you to formulate questions and find answers. We have tried to list the most frequently asked ones. When preparing for the discussion at home, you can tick what is most important to you. A space is provided at the end of each section to make notes or add questions of your own.

The cardiologist will not be the only person preparing you for the ICD implantation. An extensive care team is involved in this process: arrhythmia nurses, nurse practitioners, cardiac physiologists/technicians and rehabilitation experts. These are all healthcare practitioners who can give you the correct information and can help you feel comfortable with the prospect of living your life with an ICD.



General questions in preparation for the implantation:

Before: Can I record this discussion?

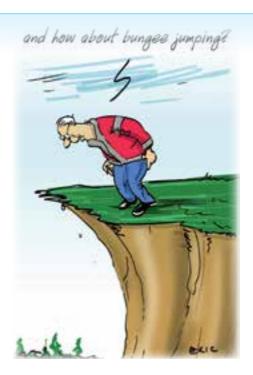
About the ICD

00000000 000000	Why do I need an ICD? How does an ICD work? Will I be getting an ICD with 1, 2 or 3 leads or an S-ICD? Why did you choose this type? Where will the ICD or S-ICD be implanted? What type of lead(s), if any, will be implanted in my body? How long does an ICD and its leads normally last? What is the risk of infection? How many functions does this ICD have and which ones will be switched on? How will I know if the ICD is working properly? Will the ICD be visible from the outside? Will additional examinations be required and if yes, why? What will these involve? Do I still need to take medication? Do I get a manual with the ICD? Does your hospital organise contact and information sessions for ICD recipients and their relatives?
Sp	ace for notes:

Consequences

- What are the possible disadvantages of an ICD?
- □ Can I continue to do my job?
- Am I allowed to drive a car?
- ☐ Am I allowed to sail?
- ☐ Can I travel by plane?
- Can I still go on holidays?
- □ Can I still play sports and/ or go to the gym?
- ☐ Can I undergo all other medical treatments/diagnostic tests?

Space for notes:



The implantation itself

- When and where will the ICD implantation take place?
- ☐ Should I continue to take my medication, particularly blood thinners?
- Will the implantation require local or general anesthesia?
- ☐ How long will the surgery take?
- Who will be carrying out the implantation?
- What risks are associated with the operation?
- □ Is the ICD tested? If yes, will I notice anything?
- ☐ How will the ICD be programmed?
- What ward will I be in?
- ☐ How long do I need to stay in the hospital?



Space for notes:
After the implantation
 What should I look out for regarding the healing of the wound? Will I be sore after the implantation? How long will this last? Who should I contact in case of an emergency? Can I get help from a social worker? Can I ask for psychological support? Can I participate in a rehabilitation programme? Who will be issuing my ICD identity card?
Space for notes:

Patient follow-up

In the hospital

How many times a year do I need a checkup?
Can I go to a different hospital to have my device checked
Where should I go in case of an emergency?
When abroad, how do I know where I can go in case of an
emergency or for a checkup?
When does my ICD need to be replaced? How will I know?
Will the leads be replaced then too?

Space for notes:



At home: tele-monitoring
 What is remote monitoring? Do all ICD systems have this function? How often and at what time will the monitor be reading my data and transmitting it? How often and at what time will the data be assessed? Who has access to this data? In what cases am I contacted? Does tele-monitoring also work when I'm abroad? Can I ask for a print-out of my data and/or settings to take with me when I'm travelling?
Space for notes:



Miscellaneous

Can you give me brochures about the	ICD	so	that	I can	go	throu	ugh
everything you just told me at home?							

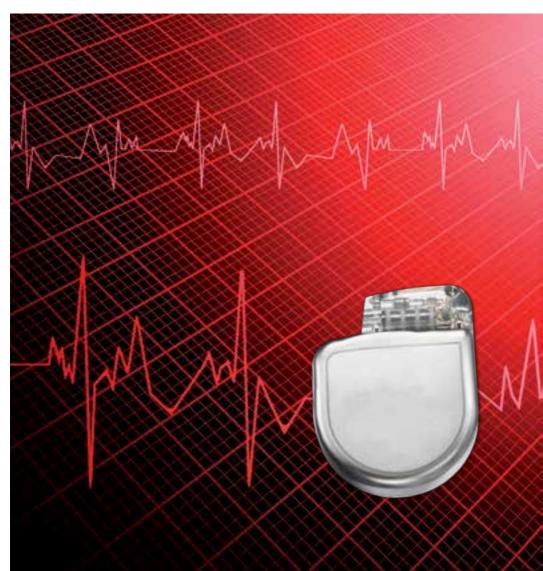
- ☐ What patient organization can I contact for getting in touch with people in similar situations?
- □ Can my partner also participate?
- ☐ Can I have the same sexual relationship with my partner as before?

Space for notes:



Only for women				
 Will having an ICD in my body affect my pregnancy? Are there any objections to having a breast examination? Can I still wear a bikini or swimming suit? 				
Space for notes:				
The last stage of life In every human life there comes a time that death is near. The circumstances, however, are different for everyone. There is then the question about what needs to happen to the ICD, you may want to raise the matter during this discussion.				
More information				
www.stin.nlwww.aa-international.org				
Space for notes:				





www.stin.nl