Implantable Cardioverter Defibrillator (ICD)

What is an ICD?
An ICD (implantable cardioverter defibrillator) is a small device that corrects your heart rhythm. It has a pulse generator that is placed in your body and one or more leads (wires) that are threaded into your heart.

The ICD leads “listen” to your heartbeat and send information to the pulse generator. If there’s a problem with your heart rhythm, the generator creates an electrical pulse and sends it to your heart.

ICDs are a little bit different from a pacemaker. Pacemakers correct a heartbeat that is too slow, but ICDs can also correct a heartbeat that is too fast.

Why do I need it?
An ICD is used to treat heart rhythm problems such as:

• Ventricular [ven-TRIK-yoo-lahr] tachycardia [tak eh CARD ee yah]. This is when the ventricles (lower chambers of your heart) send electrical signals too often and your heart beats too fast.

• Ventricular fibrillation [fih-bril LAY shun]. This is when the ventricles send very fast, irregular signals and your heart starts to quiver. No blood is pumped to the body. If this condition isn’t treated right away, it can kill you.

Ventricular fibrillation is often treated with an external defibrillator (paddles or pads that send an electrical shock through the chest to the heart). However, ventricular fibrillation can come without warning. An ICD can sense irregular signals right away and deliver an internal shock to correct it.

How does an ICD work?
When the ICD senses that you’re having a heart rhythm problem, the pulse generator sends a signal to correct it.

• Pacing signals correct a heartbeat that is a bit too fast or too slow. You will probably not notice these signals.

• Cardioversion is a mild shock given if ventricular tachycardia continues even after the pacing signals are sent. This can feel like a sudden thump in the chest that lasts for just a moment.

• Defibrillation is a strong shock that corrects ventricular fibrillation. This sudden shock can feel like being punched in the chest. The shock may be surprising or briefly painful, but it is intended to save your life.

The ICD can also record your heart’s electrical activity, so that the doctor can adjust its settings during follow-up appointments.

What do I need to do next?

1. Arrange for time off work. You can return to work when your doctor says it’s okay, usually after a week or so.

2. Tell your doctor about all the medicines you are taking. This includes prescription medicines, over-the-counter drugs (such as allergy pills or cough syrup), patches, vitamins, and herbal remedies.

3. Follow your doctor’s directions about medicines. You may be asked to stop taking certain blood thinners before the procedure.

4. Arrange for a ride. You will need someone to drive you to and from the hospital.

5. Follow all instructions on when to stop eating and drinking before the procedure.
What happens during the procedure?
The procedure usually takes 1 to 2 hours. You'll be relaxed but awake. Here's what you can expect:

- Numbing medicine is injected in the area where the pulse generator will be placed.
- A small incision (cut) is made in the skin below your collarbone. This makes a “pocket” for the pulse generator.
- A needle is inserted into a vein in your upper chest to insert each lead. The doctor uses X-ray guidance to move the lead through the vein into your heart.
- Each lead is tested to make sure it is in the right place. The leads may be moved a bit once or twice, and retested each time, until it is perfectly positioned.
- The pulse generator is connected to the leads and inserted into the “pocket” in the skin beneath your collarbone.
- The pacemaker is set to the rate your heart needs. The medical team might also adjust other settings. You'll probably hear them calling numbers to each other as they do this. They might also ask you to take some deep breaths.
- The surgical cut (if you have one) may be closed with stitches or a skin adhesive/glue, and you will be moved to recovery.

What happens after the procedure?
You will probably stay in the hospital overnight, so your healthcare team can monitor your heartbeat. The next morning, your pacemaker will be checked to make sure it is working as expected.

You will get a temporary device ID card that shows the type of ICD you have, when it was placed, and who performed the procedure. You will get a permanent card in the mail in a few weeks. Carry the ID card with you at all times.

What are the possible benefits, risks, and complications?
The table below lists the most common possible benefits, risks, and alternatives for this procedure. Other benefits and risks may apply in your unique medical situation. Talk with your doctor to learn more about these risks and benefits. Be sure to ask any questions you might have.

<table>
<thead>
<tr>
<th>Possible benefits</th>
<th>Possible risks and complications</th>
<th>Alternatives</th>
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<tbody>
<tr>
<td>• Relief of symptoms such as racing heartbeat, dizziness, or fainting</td>
<td>• Bleeding or infection where the pulse generator was inserted</td>
<td>Before recommending an ICD, your doctor:</td>
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<tr>
<td>• Prevention of rhythm problems that can cause sudden cardiac arrest</td>
<td>• Problems related to the anesthetic</td>
<td>• Will run tests such as an electrocardiogram, Holter monitor, echocardiogram, electrophysiology study, or stress test.</td>
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<td>• Nerve or blood vessel damage</td>
<td>• May use medicine to treat your heart rhythm problems before recommending an ICD.</td>
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<td>• Problems caused by electronic devices</td>
<td>• May recommend a pacemaker instead of an ICD (depending on your heart rhythm problem).</td>
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How do I care for myself at home?

**Medicine**
Take any medicines exactly as ordered by your doctor.

**Activity**
- Keep your arm still the first few days. You might need to wear a sling for the first 24 to 48 hours.
- Don’t lift any objects or drive until your doctor says it’s okay.
- Don’t do any activities that involve raising your arms, such as golfing, bowling, tennis, swimming, or diving until your doctor says it’s okay.
- Don’t do any activities that could bump or jar the ICD site, such as contact sports, using an air hammer, or firing a rifle, until your doctor says it’s okay.
- Ask your doctor about when it’s okay to have sex again. You may need to avoid sex for the first week. ICD activity will generally not interfere with sexual activity after the first 7 days.
- Do any exercises that are prescribed to help you gradually increase your range of motion.

**Wound care**
- **Keep the incision clean and dry.** Don’t take a bath, swim, or use a hot tub until your doctor says it’s okay. Cover your incision with plastic if you shower. Don’t soak or scrub your wound. Clean it with antiseptic as directed by your doctor. If the dressing becomes wet or soiled, take it off and clean the site with antiseptic or soap and water, as directed by your doctor. Don’t use creams, ointments, or lotions on the site.
- **Skin adhesive/glue.** If your doctor used skin adhesive on your incision site, don’t apply any liquid or ointment medicines or any other product while the adhesive film is in place. Don’t scratch, rub, or pick at the adhesive. The adhesive will usually remain in place for 5 to 10 days, then naturally fall off your skin.
- **Wear loose clothing.** If you need to wear a bra, place a gauze pad over the pulse generator to reduce rubbing on the stitches or skin adhesive/glue.

**Life with an ICD**

**Let people know**
- **Carry your ID card at all times.** Your ID will give healthcare providers important information in an emergency. It will also be helpful if the ICD sets off an alarm.
- **Tell your healthcare providers.** They need to know you have an ICD before doing any procedures that involve needles or incisions.
- **Tell your dentist.** Your dentist can avoid using devices that produce electromagnetic fields that can interfere with the device.

**When should I call my doctor?**
Call your doctor if you have:
- Redness, swelling, or drainage around the wound.
- A wound that separates or isn’t healing.
- Fever over 101°F (38°C).
- Joint pain, stiffness, or weakness in your arm.
- Fainting or feeling light-headed or dizzy.
- Very fast or slow heartbeat.
- Swelling in your hands or ankles.
- A constant tired feeling.
- Hiccups that won’t go away.
- Chest pain, or a kicking sensation in your chest.
- Twitching muscles in your chest or belly.

**What should I do if I get a shock?**
- If the ICD gives you a single shock, sit or lie down for a few minutes. Call your healthcare provider to report the event.
- If the ICD gives you several shocks in a row, call 911.
Protect the ICD

• Avoid letting anything hit or rub your ICD.
  Be careful about contact sports or other activities
  that may jar the pulse generator under your skin.

• Avoid strong electromagnetic fields.
  Stay away from:
  – Magnetic resonance imaging (MRI) equipment
    or other high-powered magnets.
  – Arc welding equipment, industrial equipment,
    and induction furnaces
  – High-intensity power lines or radio towers
  – Combustion motors. Don’t lean over the hood
    of a running car, or touch the spark plug or
    distributor on a running car or lawn mower.

• Don’t linger around anti-theft detection
  devices at store or building entrances. Walk
  through them at a normal pace.

• Be careful with your cell phone or MP3 player.
  Keep it 6 to 12 inches away from the pulse
  generator. Hold the cell phone against the opposite
  ear, and don’t keep the phone or player in your
  shirt pocket.

• Computers and small household appliances
  are safe as long as they are in good working order
  and grounded.

• Airport screening is safe. Screening devices may
  set off an alarm, but they won’t harm the device.
  If you set off an alarm, show your device ID.
  Ask them not to search you with the hand-held
  screening wand, since it contains a magnet.

Monitoring and maintenance

• Follow-up appointments. Your healthcare
  provider will set up follow-up appointments. To
  check the ICD, you might have various kinds of
  tests, including electrocardiograms and battery
  checks. Your doctor might adjust the ICD settings
  based on these tests.

• Checking the ICD over the phone. A transmitter
  might be used at home to send ICD signals to
  your doctor.

• Replacing the battery. The average battery life
  is around 5 years. Follow-up appointments and
  other checks will tell your healthcare provider if this
  is needed.

• Replacing leads. In rare cases, the leads can
  become cracked. Your healthcare provider will
  check the leads and possibly replace them if needed.

Questions for my doctor

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