

Mitral Clip Procedure

Why do I need a mitral clip procedure?

The mitral clip procedure fixes a problem called **mitral valve regurgitation**. Mitral valve regurgitation is when parts of the mitral valve — the leaflets — don't close all the way. This causes blood to flow backward in your heart. This sheet explains the basics of what you need to know.



What happens during a mitral clip procedure?

During the mitral clip procedure, the doctor uses a catheter (a thin, flexible tube) to place a tiny clip onto the leaflets of your mitral valve. The clip helps the valve close more tightly and keeps blood from flowing backward.



This should ease your symptoms and keep them from getting worse over time. Mitral clip procedure is a way to fix your valve without having open heart surgery.



What are the benefits of the mitral clip procedure?

Your mitral valve will work better. This may ease symptoms caused by mitral valve regurgitation, helping you breathe easier and be more active.

What to ask your doctor about the mitral clip procedure:

Ask your doctor:

- How this procedure may help you.
- If there are any other surgeries or procedures that can help you
- What the risks are

Keep asking questions until you are sure you understand all of the benefits and risks.

What are the risks and potential complications of the mitral clip procedure?

Major complications are uncommon. Some of the risks and potential complications are:

- Continued regurgitation in your mitral valve. This may require another procedure or surgery.
- Damage to the heart muscle or valve. This may require open heart surgery to repair.
- Bleeding, infection, or damage to a blood vessel where the catheter(s) were put into your body.
- Abnormal heart rhythm
- Blood clots
- Heart attack or stroke
- A reaction to anesthetic or dye
- Death (rare)

What can I do instead of the mitral clip procedure?

Open heart surgery is another way to fix your mitral valve. It's not recommended for people with certain health problems. You may also choose to be treated with medicine only. See the other side of this handout to learn more about what happens before, during, and after your procedure.

Before your procedure

- You will need someone to take you to the hospital on the day of your procedure and to bring you home the next day.
- You are not allowed to eat or drink anything after midnight (12:00 AM) the night before you go to the hospital.
- You should not take any medications after midnight (12:00 AM) the night before your procedure.
- Patients with diabetes are treated at the hospital with the insulin sliding scale.

During your procedure

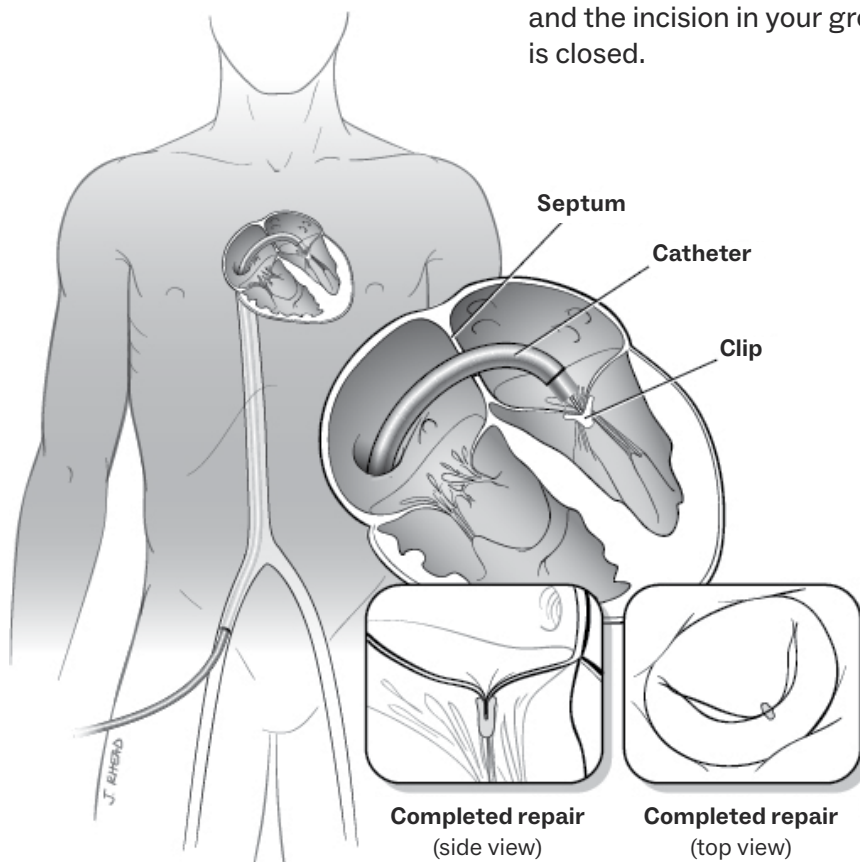
- The procedure takes 2 to 4 hours.
- You are given medicine to make you sleep.
- The doctor makes a small incision (cut) in your groin.
- A thin, flexible tube called a catheter is moved through the opening and up to your heart.
- A tiny hole is cut in the wall between the chambers of your heart (septum).
- The catheter is moved through the cut to the mitral valve.
- The doctor uses the catheter to put the mitral clip on the leaflets of your mitral valve.
- The catheter is taken out and the incision in your groin is closed.

After your procedure

- You are taken to a recovery area immediately after your procedure.
- You will need to lay flat for at least 6 hours.
- You will stay overnight in the hospital.

At home

- You can expect some mild discomfort in the incision area for a few days.
- You need to take your medications exactly as your doctor ordered to manage your pain and prevent infection.
- You may need a laxative for constipation.
- You will have a bandage on your groin for about 4 days. You will need to keep this clean and dry.
- You may not take a bath or go swimming until your doctor says it's okay.
- You may not lift anything that weighs more than a gallon of milk for several days.
- You may not do any activities that include bending or squatting for at least 1 week.
- You may do light exercise, such as walking, but no running, for at least 1 week.



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