At Home After Your TMVr with the MitraClip

Self-care and what to expect

This handout explains what to expect after your transcatheter mitral valve repair (TMVr) with the MitraClip and how to care for yourself at home.

Plan Ahead for Your Return Home

A successful TMVr with the MitraClip means that you return home to a better quality of life. Planning ahead is the most important thing you and your family can do to help make your TMVr a success. Start planning for your return home as soon as you know you will be having TMVr.

- You will need help when you first go home. We suggest that you arrange to have someone stay with you for 1 week after you return home. Plan ahead so you are sure you have the help you need.

- It is hard to know how much help you will need or how long you will need it. Coping with mitral regurgitation may have affected your overall health. Depending on your level of strength, mobility, and nutrition before the procedure, you may need 1 to 4 weeks to fully recover after a successful TMVr.

- If are not sure you will have the help and support you need at home, you may need home healthcare or may need to stay in a skilled nursing or rehabilitation facility after TMVr. Please ask to talk with one of our social workers for help.

Care Timeline

- **First 30 days:** Your UWMC Heart Team will manage your care for the first 30 days after your procedure. After you go home, we will monitor you closely to make sure your recovery is going well.

Plan ahead so you are sure you have the help you need at home after your TMVr.
We want to make sure that you will not need to be readmitted to the hospital, so we will:

- Manage all of your cardiac medicines, adjustments, and refills.
- Work closely with your local doctors so they know what medicines you are on and are prepared to take over your care after the 30 days.

- **In the first few days after discharge:** A nurse will call you to follow up on your symptoms, medicines, and overall well-being. If you feel that you need to be seen sooner than the scheduled follow-up visits, please call us and we can help coordinate an appointment with one of our providers.

- **2 weeks after discharge:** You will have a follow-up visit with one of our providers to talk about your symptoms, medicines, and activity restrictions.

- **30 days after TMVr:** You will have a follow-up visit at UWMC with your TMVr cardiologist and nurse practitioner. At this visit, you will:
  - Have an echocardiogram (ultrasound of the heart) to check how well your valve is working
  - Do a walk test. **Please bring to this appointment any device you use to walk such as a cane or a walker.**
  - Fill out a questionnaire about your symptoms and quality of life.
  
  These tests provide important information about your heart, the MitraClip, your symptoms, stamina and quality of life.

- **6 weeks after TMVr:** Please make an appointment with your local primary care provider and primary cardiologist about 4 to 6 weeks after your TMVr. If you have other health issues, or if the team advises you to, you may need to see your local care providers sooner than 6 weeks.

- **Every year after your TMVr:** Once a year, you will have a follow-up visit at UWMC. This visit will include an echocardiogram, a walk test, and a questionnaire about your symptoms and quality of life.

**Research Study Participants**

If you are part of a research study, you may have follow-up visits more often.

**Dental Work After MitraClip**

Please tell your dentist that you have had a MitraClip procedure. In the 6 months after the MitraClip procedure, you must have antibiotics before any dental work, even a dental exam. This is done to prevent any infection in your valve. If your dental office has any questions, please tell them to contact us.
Mitral Regurgitation and Congestive Heart Failure

People with mitral regurgitation often have *congestive heart failure* (CHF). This is when your heart does not pump blood as well as it should.

Some symptoms of CHF are:
- Ankle and leg swelling
- Shortness of breath
- Fatigue
- Increasing weight gain

Your medicines may be changed after your TMVR to help ease symptoms of CHF.

**Your Fluid Balance**

If you have CHF, your body may retain fluid after your TMVR. We will manage this fluid buildup with medicines called *diuretics* (water pills).

Weight gain is one sign of fluid buildup.

Even if you have too much fluid in your body tissues, you must still drink fluids for good health. Most people need to drink about 1 to 2 liters of liquid a day. Ask your doctor about how much liquid you should drink each day.

If you start retaining more fluid or are having more symptoms, we may place you on a fluid-restricted diet. We will talk with you about this in your follow-up phone calls and office visits.

At home, you will weigh yourself every day and keep a record of your weight. You received a handout called “Heart Failure Daily Weight Log” to record your weight and vital signs before you left the hospital. This log is also attached to this handout. **Please bring this log of weights and vital signs to your follow-up visits.**

If you gain more than 2 pounds over what you weighed when you went home from the hospital, or if you have symptoms of congestive heart failure (see below), please call us:

- During clinic hours, call **206.598.VALV (8258)** and ask for the nurse or nurse practitioner
- After hours and on holidays and weekends, call **206.598.6190** and ask for your TMVR Cardiologist to be paged.
Symptoms of Congestive Heart Failure and What to Do

**OK**
I am OK if I can do my normal activities without a problem:
- No shortness of breath
- Weight is stable
- No new swelling
- Normal appetite

**Warning**
I need to call my healthcare provider if my symptoms are getting worse:
- Gained 3 pounds in 1 day or 5 pounds in 2 days
- New or increased swelling in my legs or ankles
- Harder time breathing, new cough, or I need to use more pillows to breathe while sleeping
- Nausea that will not go away, or I cannot eat
- Fatigue that is getting worse
- Increased heart rate (*palpitations*)

**Emergency!**
I need to call 911 right away if my symptoms are very bad or get worse quickly:
- Chest pain that does not go away
- Severe dizzy spells or have fainted
- Severe or sudden shortness of breath
- New confusion or I cannot think clearly
Incision Care

After TMVr with the MitraClip, you will have a small puncture wound on your groin. This may be bruised but it should not have any drainage, bleeding, or pain.

A few patients have just a small suture (stitch) in their groin area at the puncture site. This suture is usually removed before leaving the hospital, but if it is not, please call our office and make an appointment for us to remove it.

While your incision is healing:

- It is best to leave the area open to the air.
- If your clothing rubs or irritates your incision, you can cover the area with dry gauze. Remove the gauze at night.
- Do not apply lotions or creams to the area until the site has healed.

Signs of Infection

Watch your incision closely for any signs of infection. These include:

- Redness around the incision
- New drainage
- Warmth or heat at the incision
- Fever of 101°F (38.5°C) or higher

If you have any of these signs, call one of these numbers right away:

- During clinic hours, call 206.598.VALV (8258) and ask for the nurse or nurse practitioner.
- After hours and on holidays and weekends, call 206.598.6190 and ask for your TMVr Cardiologist to be paged.

Showering and Bathing

- You may shower when you get home, unless your doctor tells you not to. When you shower:
  - Gently wash your puncture site with mild, unscented soap and water.
  - Pat your puncture site dry (do not rub it).
- Do not take very hot showers. Hot water may lower your blood pressure and make you weak or dizzy. This could cause you to faint. (Please note that fainting may also occur from the medicines you are taking.)
- For 1 week after TMVr, do not take a bath, sit in hot tub, or go swimming for 1 week after TMVr. This will help lower your risk of infection in your puncture site.
Activities

After you get home, you can expect to slowly return to a normal lifestyle. But, be careful not to do things that make your heart work too hard.

Your activity level after you leave the hospital will depend on:

- Your condition before the procedure
- Your recovery in the hospital after procedure
- Your activity level and energy should be slowly increasing everyday

Please call a nurse or provider if your stamina starts to decline or you have new or worsening symptoms that limit your activity.

As soon as you wish, you may:

- Shower (unless your doctor has told you not to), wash your hair, and shave.
- Walk on level ground at an easy pace. Remember to slow down when you walk up hills.
- Walk up and down stairs at your normal pace. Since going up takes more energy, slow down or stop if you become short of breath.
- Ride a stationary bicycle for exercise.
- Ride in a car, go out for meals, or visit friends.
- Prepare meals.
- Wash dishes and clothes, as long as you follow the lifting restrictions under “Precautions” below.
- Do light housekeeping, such as dusting. See “Precautions” below.
- Resume sexual activity (see page 9).

Precautions

- **For 1 week** after TMVR with the MitraClip, **do not:**
  - Lift, push, or pull anything heavier than 10 pounds. (A gallon of water weighs 8 pounds.) This includes carrying pets, groceries, or children.
  - Work in the garden, including lawn mowing and raking.
  - Push hard or strain when having a bowel movement.

- **For 2 weeks** after TMVR, your doctor and care team will check your progress. They will tell you if you need to follow any other restrictions.
Driving

- Most patients who were driving before TMVr can start driving again **48 hours after discharge**.
- Some people have other medical reasons that make it unsafe for them to drive. If this is true for you, your primary doctor(s) may need to decide if you can drive after TMVr.

Exercise Safely

Daily exercise is vital to your healing. Regular exercise:

- May help strengthen your heart muscle so that it pumps blood better
- Improves muscle tone and blood flow in your body
- Helps with weight loss or maintaining your weight
- May help you feel better overall

When you exercise:

- If your doctor or physical therapist recommends that you use a device such as a cane or walker, **be sure to use the right device needed to keep you safe and prevent falls**. It is important to stay active, but staying safe is more important than walking on your own without a cane or walker.

- Take your pulse to see how hard your heart is working. **Tell your providers if your pulse is more than 20 to 30 beats per minute above your resting heart rate.** See “How to Take Your Pulse” on the next page.

- Stretch your muscles before and after exercising. This will help you get the most from your exercise and keep you from getting injured.

- Wait 1 hour after eating before you exercise.

- If you are going to walk a long distance, stay on level ground. Going up hills and stairs is OK if you go slowly and keep your heart rate within your safe guidelines.

- Wear loose clothing. Any clothes that restrict your movements may affect your breathing.

- Wear comfortable, flat shoes with good foot support and non-slip soles.

- Avoid being outside on very hot or very cold days during your recovery. Very high and very low temperatures stress your heart.
  - In the winter, walk in the afternoon or the warmest part of the day.
  - In the summer, walk in the morning or the coolest part of the day.
How to Take Your Pulse

As your heart pumps blood through your body, you can feel movement in some of the blood vessels that are close to the surface of your skin. This pulsing is called your pulse, or heart rate.

When you feel your pulse, you are actually feeling your heart pushing blood through your blood vessels. The higher your pulse is, the harder your heart is working.

To take your pulse:

• Use your fingers (not your thumb, since it has a pulse of its own) to find your pulse on the inner part of your other wrist, just below your thumb.

• If you cannot find your wrist pulse, gently find the pulse in your neck. Do not press too hard, or you could reduce blood flow to your head, making you dizzy or faint.

• For 1 minute, count the times you feel pressure under your fingers as your blood pulses through the blood vessel. This number is your heart rate. You can also count your pulse for 15 seconds and multiply that number by 4.

When to Take Your Pulse

Take your pulse:

• As directed

• If you have these symptoms:
  - Hard or thumping heartbeats
  - Palpitations (rapid, fluttering heartbeats)
  - Dizziness
  - Shortness of breath that does not go away when you rest

Slow-Down Signals

Your body will tell you if the exercise you are doing is too hard for you. Slow down or stop what you are doing, write down what happened, and talk with your nurse or doctor if:

• Your pulse is more than 20 to 30 beats above your usual resting pulse.

• You cannot talk while you are exercising. Slow down your activity until you are breathing easily and can have a conversation without being breathless.

• Your pulse stays high for 10 minutes after you stop exercising.
• It takes more than 10 minutes to catch your breath after you stop exercising.
• You are tired for up to 24 hours after you exercise.
• You have pain in your joints, shins, or heels.
• You have pain or cramping in your calf muscles.

**When to Stop Exercising**

Stop exercising and talk with your doctor before you start your exercise program again if you:

• Have an abnormal heart rhythm, such as:
  - An irregular pulse or palpitations
  - Pulse suddenly gets very slow
  - A sudden burst of rapid heartbeats

• Have new pain, pain that lasts a long time, or pressure in your chest, arms, or throat
• Are dizzy, confused, or lightheaded
• Lose control of your muscles or faint
• Have cold sweats or become pale
• Feel sick to your stomach or are vomiting

Do **not** exercise if you:

• Have a bad cold, flu, or fever
• Are very tired

**Your Walking Program**

How long and how far you walk will depend on how well your body is handling the exercise. Remember to use your pulse as your guide to tell you how hard your heart is working.

As you get stronger, you will start walking a little farther and a little faster. It is best to first increase how far you walk, before increasing how fast you walk.

**Warm-up Exercises**

Warm-up exercises help your body get ready for activity. If needed, do warm-up exercises – marching in place or leg stretches – twice each day, once in the morning and once in the afternoon. Do them slowly and steadily, and keep breathing slowly. Do not hold your breath.
Begin by doing each warm-up exercise 5 times. Each time you do an exercise is called a *repetition*, or “rep.” Over time, you can increase the number of repetitions, but do not do more than 20 repetitions at a time. Do **not** add more repetitions if you have any of the symptoms listed in the “Slow-Down Signals” section on page 8 and “Warning Signs” on page 12.

**Cardiac Rehabilitation**

You may be eligible for Cardiac Rehabilitation 30 days after your TMVr with the MitraClip. This can be done at your local hospital. This program can help you safely do exercises with trained professionals while monitoring your heart. This can be arranged at your 30-day follow up visit. Do not start an exercise program before then.

**Resuming Sexual Activity**

It is normal to have some concerns about returning to sexual activity after a heart procedure. This is a common area of concern. Ask your doctor or nurse any questions you may have. You do not need to be embarrassed.

There is no reason to avoid sexual activity. Increased heart rate and rapid breathing are normal during arousal. During orgasm, the heart rate may increase about the same as briskly climbing 2 flights of stairs.

The best way to deal with your concerns is to talk openly with your partner. Sexual intimacy can take many forms, and it can provide important physical and emotional satisfaction. Touching, holding, and caressing without intercourse are ways to share intimacy during the early weeks of recovery, if you are anxious about having sex or still feel very tired. As your day-to-day activities your exercise and endurance increase; decide for yourself when you are ready to return to full sexual activity.

Here are some tips for resuming sexual activity:

- Resume sexual activity when you are comfortable and ready to do so.
- Sexual activity will be less stressful when both partners are relaxed. If you are upset, tired, or stressed, it is probably best to wait.
- Talking with your partner about any fears or concerns may help you relax and get in touch again.
- Wait 1 hour after eating meals or drinking alcohol before you begin sexual activity. This gives your digestive system and other body systems time to work without having to compete for blood and oxygen.
Returning to Work

When you can return to work will depend on your recovery and what kind of work you do. Talk about your return to work with your healthcare provider at your 30-day follow-up visit.

Most people can return to full-time work 30 days after a heart procedure. Many people return earlier than that.

Common Responses After TMVr with the MitraClip

Here are some areas of concern that many people have after TMVr:

Sleep Disturbances

In the first week as you recover after TMVr, it is common to:

- Sleep more
- Have a hard time falling asleep
- Wake during the night

These changes may be caused by many things, such as having anesthesia and not sleeping well during your hospital stay. Your body may also be adjusting to medicines you are taking. As you catch up on sleep at home and get back to your normal sleep routine, these problems should go away.

Even if you feel tired and weak from lack of sleep, try to get dressed every day and do your normal activities. Go for a walk, have lunch, then take a nap. Rest between your activities.

You will sleep better at night if you are physically active during the day. Try not to sleep too much during the day, since you are then more likely to lie awake at night.

Being Restless and Not Able to Concentrate

After procedures with anesthesia, it is common to be irritable and restless, and you may have a hard time concentrating. Things you thought you would look forward to doing during recovery may not interest you.

This is common after any major procedure and will not last. As time passes, you should return to your normal interests.

Lack of Appetite

You may not feel like eating much after your procedure, and food may taste different than it did before your procedure. But, your body needs extra calories for healing. Because of this, we advise that:

- You eat what tastes good to you in the first weeks after TMVr with the MitraClip so that you get enough calories.
• After 6 to 8 weeks, you may need to make changes in your diet, such as eating less fat, cholesterol, or salt.
• If you have a history of congestive heart failure, keep eating a low-sodium diet (less than 2,000 mg, or 2 grams, of sodium a day).

Becoming More Independent After Your Procedure
As your health got worse before your procedure, you may have depended a lot on loved ones. After a successful TMVr, you will start becoming more independent and need less help from others. For your safety and well-being, talk with your loved ones about how to balance your independence with having help available when you need it.

Warning Signs
These symptoms are warning signs:
• Chest pain when you are active
• Shortness of breath that does not improve with rest
• Palpitations, fluttering in your chest, or a hard, thumping heartbeat
• Dizziness, feeling faint or like you may pass out
• Unexpected, sudden changes in your vision, strength, or coordination

If you have any of the warning signs listed above:
• Sit down or lie down and rest.
• Then take your blood pressure and pulse.

If your symptoms do not improve after a few minutes of rest, call 206.598.VALV (8258) to talk with a nurse from 9 a.m. to 5 p.m. After hours and on holidays and weekends,

If You Have More Questions
It is normal to feel anxious about going home after your TMVr with MitraClip. If you have questions or concerns about any issues that come up, please call us:
• During regular daytime hours (9:00 AM to 5:00 PM), call 206.598.VALV (8258) and ask to talk with a nurse or nurse practitioner.
• After hours and on holidays and weekends, call 206.598.6190 and ask for your TMVr cardiologist to be paged.