

What is a pacemaker?

Your doctor has recommended that you have a pacemaker. A pacemaker is a small, metal battery-powered device that sends impulses to the heart muscle when the heart beats too slow.

In some people it can also treat fast heart rhythms. As with any surgical procedure, there will be a visible scar but every effort is made to minimise this. There may also be a small bump where the pacemaker lies.

The Cardiologist will consider the different types of pacemaker available and select the one that best meets your particular needs and circumstances.

Pacemakers are extremely reliable and sophisticated devices but require monitoring over the long-term.

What happens next?

If the Cardiologist has decided you need a pacemaker, this will be discussed with you. You will then meet with the Arrhythmia Nurse at your pre-assessment appointment.

The procedure will be explained, an ECG (a recording of your heart beat) taken and consent form signed. Any questions you have can be answered here also.

Your admission

You will receive a letter stating the time and date you should come in for your operation. This will be in the Day Surgery Unit which is located on the first floor in the Gwyneth Huelin block.

Do not eat anything in the morning but you may have a drink of water with your medicines when you wake. Any specific advice will be given to you at your pre-assessment appointment.

The nurse will go over your details and you will be asked to change into a hospital gown.

You may bring something to read whilst you are waiting. You may also bring your ipad / tablet / mobile phone although they should be kept silent to avoid disturbing others. The operation usually takes between 45 minutes to an hour and a half.

What happens afterwards?

You will be able to eat and drink and normally you will be allowed to go home early in the afternoon once your checks have been reviewed.

The nurse will keep an eye on your wound and advise you about the care of this. You will have a stitch to close the wound. This may be dissolvable or may need removing (you will be advised before your discharge from the hospital).

You cannot drive for 1 week after your operation. You may feel some discomfort once the local anaesthetic has worn off so simple pain killers may help.

Try to avoid strenuous exercise initially and minimise movements with your arm and shoulder for at least 1 week. Activities like golf, tennis or others involving a swinging like action should be avoided for 6 weeks. This is to prevent the leads moving too much inside in this initial period.

Follow-up

You will be called for follow-up after approximately 8-12 weeks, then yearly to check the pacemaker performance and battery.

The battery will need replacing after some years (between 5 and 10 typically) and this involves a small similar operation whereby the generator (pacemaker box) is disconnected from the existing leads and a new one connected.

Benefits

The main benefit from having a pacemaker is that it protects you from the symptoms and dangers of slow heart rhythms.

Risks

Pacemaker implantation carries the following risks:

- There is a 1-2% (1-2 in every 100 patients) risk of developing a collapsed lung as a consequence of the lead (s) into the vein.

This often requires no treatment but occasionally requires the insertion of a chest drain.

- There is a 2-3% risk of one of the leads becoming dislodged and the lead needing to be repositioned. A chest x-ray and ECG are therefore performed and checked before you go home.
- Bruising over the pacemaker is common. About 1% can develop a collection of blood called a haematoma over the pacemaker. Occasionally this needs draining.
- There is a less than 1% risk of the pacemaker becoming infected after implantation. To minimise this risk all patients are given an antibiotic prior to the operation.

Contact numbers

Clinical Investigations	444032
Arrhythmia Nurse	442002
Cardiology secretary	442790

September 2018

HSS-LFT-0175-2

Patient Information

Pacemaker Implantation

This leaflet is for people who require a pacemaker. It outlines how it is carried out, potential risks as well as benefits, and what to expect afterwards.