

# February 2011

## BAD NEWSLETTER

[www.bournemouth.icd-support.org.uk](http://www.bournemouth.icd-support.org.uk)



### **BAD Group Meetings 1:30pm - 16:00pm**

- Monday 7<sup>th</sup> March 2011
- Monday 4<sup>th</sup> July 2011
- Monday 7<sup>th</sup> November 2011

### **THANK YOU TO MEDTRONIC, THE ICD COMPANY, FOR PAYING FOR THE BAD MEETING VENUE IN 2010.**

Following the March 2011 meeting we will be changing the venue of the BAD group meetings from the Village hotel to an alternative venue. To facilitate this process we would like to have a clear idea of the numbers that use the bus to attend meetings. Please let us know when completing the attached invite letter.

If anyone needs a lift to the meetings or would like to offer their services to pick and drop someone who lives close to them please contact the Arrhythmia Nurses.

### **BAD Group Social Events for 2011**

- 7<sup>th</sup> February 10:30 Coffee Morning at Haskins Nursery, Longham.
- 14<sup>th</sup> March 10:30 Coffee Morning at John Brown's Nursery, Three Legged Cross.
- 11<sup>th</sup> April 10:30 Coffee Morning at Stewarts Nursery, Christchurch.
- 9<sup>th</sup> May 10:15 Walk at Upton House, Poole (meet in top car park).
- 7<sup>th</sup> May 7pm Skittles evening at Hamworthy Club, Poole.
- 6<sup>th</sup> June 10:30 Coffee Morning at Stewarts Nursery, God's blessing.

- 11<sup>th</sup> July 10:15 Walk from Baiter to Poole (meet at Baiter car park).
- 1st August 10:15 Walk at Hengistbury Head (meet at cafe by Noddy train).
- 5<sup>th</sup> Sept 10:30 Coffee Morning at Stewarts Nursery.
- 3<sup>rd</sup> Oct 10:30 Coffee Morning at Haskins Nursery.
- 31<sup>st</sup> Oct 10:30 Coffee Morning at Stewarts Nursery.

### **Electrophysiology Consultant Dr Paisey gives an account on "the history of ICDs"**

Hello, I hope you are all well. Gaynor asked me to write an article for the newsletter and I thought it might be useful for you to know how ICDs were developed.

The story starts in the late 1960s when a cardiologist called Michel Mirowski was working with a much loved mentor, Harry Heller. Professor Heller had previous problems with coronary artery disease and developed recurrent episodes of ventricular tachycardia. On each occasion he was admitted to hospital and treated with drugs and electrical cardioversions but it was clear to all that if this went on Prof Heller would surely perish from one of these episodes, inevitably this came to pass. This triggered the thought in Dr Mirowski, where we can identify people at high risk of fast dangerous heart rhythms why not implant a device capable of automatically resuscitating the patient by administering a shock. This idea received much ridicule in the scientific and medical communities, the technical challenges appeared insurmountable. Dr Mirowski however was not deterred; he found a collaborator with the engineering capabilities required in Morton Mower. Throughout the 1970s these two worked on the technical challenges until in the early 1980s the device was ready to be tested in humans. The initial devices were so large they needed to be implanted in the abdomen and the technology did not exist to deliver shock from leads in the heart chamber so patches were sewn onto the surface of the heart. Once established as safe the technology rapidly evolved so that by the end of the 1980s the devices were recognisable as the ICDs we know today. Since then further developments have been drastic reduction in size, the ability to deliver pacing as well as shocks, heart failure treatment devices and remote monitoring. Living with an ICD brings challenges as well as benefits but we should all, professionals and patients, raise a glass to those early pioneers of the technology.

### **Electromagnetic Interference (EMI) By Lee Cooke who works for St Jude- one of the Companies that manufactures ICDs)**

The number of patients with ICDs increases all the time as the indications for these life saving devices changes making them more applicable to more people. The number of electrical items that we have in our homes is also on the increase and on a daily basis we pass or interact with many things that produce EMI. The main worry for many ICD patients is can these many electrical items interfere with my device? The general answer to that question is items in everyday life that patients would come across would have little or no affect what so ever. Modern ICDs have built in 'protection' components that can safeguard against unwanted interference – and they work extremely well.

The effects of interference if detected by the device are on the whole temporary whilst the device is within the Electromagnetic Field. In other words as soon as the patient moves away from the source of interference then the effect would stop. This is true for such things as shop security systems where they emit a magnetic field. As a patient you would not notice anything as the normal behaviour is to walk straight through the barrier without stopping. This then leads back to the 'everyday' life line – and it is very true. Generally if a shop, product or company has any concerns that their equipment may interfere with a pacemaker or ICD then they will warn you! On the whole you can generally get about your everyday lives without having to worry too much. If you are unsure or worried about anything then speak to your Arrhythmia Doctor/Nurse or Cardiac Physiologist for advice and information.

### **Driving and ICDs**

If you have an ICD implanted for primary prevention, because you are at risk of an abnormal rhythm in the bottom chambers of the heart or the ventricles, you cannot drive for one month following ICD implant. The DVLA need not be notified. However, if your ICD is implanted for secondary prevention, because you have recurrent unstable heart rhythms or survived a sudden cardiac event, you cannot drive for 6 months. This 6 month ban is also the case following shock therapy from the ICD. Other driving restrictions in relation to ICDs do apply, your Consultant or Arrhythmia Nurse will advise if they apply to you. Once you have been informed to stop driving you should ring the "Drivers medical group" and ask for a declaration of voluntary

surrender form. They can be contacted on (01792) 799080. Once received send both your paper and plastic licence with the completed form to the DVLA. Your licence will then be suspended.

When you meet the health requirements to resume driving get an "application for driving licence" form or D1 form from the post office. Write a cover letter and say you are seeking restoration of the licence, include your licence details. Send the form with proof of delivery. Once your application is received by the DVLA and you are medically fit to drive, providing you surrendered your licence voluntarily, you can resume driving even though you do not have your licence back (section 88 of the road traffic act, 1988). If you are required to show your licence, DVLA will confirm your licence is valid. Please give your electrophysiology consultant as the main point of contact with the DVLA. This will ensure the process is as smooth as possible and avoid frustrating delays.

### **Social Events Update.**

*Mike Ebdon writes:*

2010 enjoyed a good turnout for our coffee Mornings at Haskins. It has been lovely to see so many faces, a good old chat washed down with tea and coffee and for some, a tasty snack/meal. On August 2<sup>nd</sup> we met at Hengistbury head for a walk down to the beach and some yummy ice creams. Only two families came but between us there were five children who had a really fun time. The weather was lovely and we enjoyed fresh air and exercise.

We hope as many people as possible will come along and join us for the 2011's social events. Anybody wishing to come up with new ideas for things to do, I would be really pleased to hear from you. Good luck to all you Baddies out there and I look forward to seeing you at the next meeting.

### **Apologies For Error In Oct 2010 Newsletter.**

The box change article advised that need to be cautious with the arm on the side of the box for a month following a box change. This is not the case, this limitation in arm movement is only necessary if a lead is replaced or moved.

### **Skittles, Vittle's and Shower of Snow**

*by Ken Hadley*



Well the final skittles match of the year occurred at Hoburne Park, thanks to those stout hearted and brave souls who attended, all were at risk from a dusting of seasonal snow, a run on the well stocked bar and the odd thrown ball or two. Over ninety people turned out despite the winter climate, Maureen and Mike Ebdon (M&M), aided by Patsy Voss and Carol Hadley, ensured all ran to plan. To help keep it in the family, M&M's daughter Stephanie, her husband John and friend Andy once again provided excellent management skills too. They actually ran the match, forming twelve teams of eight whilst acting as organizers, scorers, trainers and umpires. The term 'Ducking and Diving' comes to my mind when I reflect on the evening, for that appeared to be the common practice of many, some whilst balancing a glass or two of amber liquid in outstretched hands as they crossed the crowded floor, yet not a drop was spilt. Such dexterity, such nimbleness, such luck, must simply be considered a skill in its own right.

To be fair, not all those who gathered to share their seasonal 'bonhomie' with a happy smile, had an implanted ICD within their chests, many did not even have a simple scar to show, yet for all that, you would never have noticed the difference.

There is a skill to bowling a large heavy ball at a trembling skittle similar to raising a glass of wine or beer to one's lips, practice is what it takes, that and friends to share the occasion with, as long as one does

not try to do both things at the same time then all will be well in the world. Each team bowled three times, there were low and high scores, even suspected mathematical deviousness too, yet the game rolled on until team two were declared the triumphant winners with 184 points, that they were not stoned or beaten with chair legs as they collected their certificates was a blessing. That just left the highest scoring lady and man to be announced, Dorothy Lee stepped forward, a score of 25 achieved including a 'Strike', whilst Terry Sedgewick topped out with 33 points, including two 'Strikes'. A really super evening, great fun, good cheer and a marvellous atmosphere resulted. Well done you M&M, thank you from all of us who took part, here's to the next one. With the snow lightly falling as we left, I thought perhaps next time 'Skittles on Ice' may be a nice idea.

### **FOOD FOR THOUGHT**

*by Ken Hadley*

*EVER WONDERED  
WHY THE SUN  
LIGHTENS OUR  
HAIR BUT DARKENS  
OUR SKIN?*

*WHY CAN'T WOMEN  
PUT ON MASCARA  
WITH THEIR MOUTH  
CLOSED?*

*WHY DON'T YOU  
EVER SEE THE  
HEADLINE "PSYCHIC  
WINS LOTTERY"?*



Ladies and Gentlemen please give a warm welcome to our new ICD Surgeon

### **HELP NEEDED!!**

Are you a whizz with computers? We are looking for someone to edit and format the BAD newsletter for us. We publish three newsletters a year. If you think you can be of help please contact as below.

Do you have a tale to tell or any suggestion for topics that you would like to see covered in future issues of the newsletter?

Please let us know by contacting the Arrhythmia Nurse Specialists on: Tel: (01202) 726154

Email:

[arrhythmia.nurses@rbch.nhs.uk](mailto:arrhythmia.nurses@rbch.nhs.uk)