Baylor Scott & White Heart and Vascular Hospital – Fort Worth reached a milestone with the cardiovascular program by recently implanting the 100\textsuperscript{th} Watchman™ device in a Tarrant County area patient. The device is also known as a left atrial appendage closure device. The only one of its kind in commercial use, this device manufactured by Boston Scientific was approved by the FDA two years ago for patients with non-valvular atrial fibrillation (A-Fib). This implant offers patients who have taken or will be taking blood thinners on a long-term basis an alternative treatment approach. The interventional cardiologists on the medical staff in Fort Worth began offering this treatment option to patients with A-Fib since FDA approval.

“The fact that we reached this volume speaks to our growing ability to offer a wide scope of treatment options to cardiovascular patients,” says Farhan Ali, MD, MA, MPH, FACC, FSCAI, RPVI, Medical Director of Interventional Cardiology for Baylor Scott & White All Saints Medical Center – Fort Worth. “We always worry about patients with A-Fib potentially experiencing a stroke. Research has shown that patients with this type of heart arrhythmia are five times more likely to have a stroke. Blood thinners have been the standard course of treatment, but, for some patients, an alternative such as the left atrial appendage device is a better long-term approach.”

According to cardiologists on the medical staff, A-Fib can decrease the heart’s pumping efficiency by as much as 30 percent. Poor pumping increases the risk of clots forming in the heart chambers, particularly the left atrial appendage (LAA). The LAA is pouch-shaped and about the size of your thumb and located on the top of the heart. The device is designed to prevent blood clots that frequently form in the LAA from traveling in the blood stream to the brain, lungs and other parts of the body. Clots that travel to
the brain typically result in causing strokes, one of the leading causes of death and disability.

The device is implanted in the LAA using a minimally invasive technique. Patients are admitted to the hospital for the three hour-long procedure performed in the hospital’s catheterization lab. The interventional cardiologist uses fluoroscopic imaging to guide a sheath into the LAA. The sheath serves as a duct for the delivery of a catheter that is pre-loaded with the device. The catheter is advanced to the tip of the access sheath and is deployed by a gentle retraction of the sheath. Patients are generally released from the hospital within 24 hours. Medical follow-up continues over the course of time as patients decrease their blood thinner medication under the supervision of a cardiologist.

According to Craig Delaughter, MD, PhD, FACC, FHRS, Medical Director for Electrophysiology at the hospital, the device is suitable for patients with non-valvular A-Fib who:

- are at increased risk for stroke and systemic embolism based on CHADS2 or CH2DS2-VASc scores and are recommended for anticoagulation therapy,
- are deemed by their physicians to transiently tolerate warfarin therapy,
- have an appropriate rationale to seek a non-pharmacologic alternative to warfarin, taking into account the safety and effectiveness of the device compared to warfarin.

“It is also important for patients to understand that, like blood thinning medications, the WATCHMAN device does not cure atrial fibrillation,” says Dr. Delaughter. “It is also important to know that a stroke can occur as a result of factors not related to a clot traveling to the brain from the left atrial appendage. Other causes of stroke can include high blood pressure and narrowing of the blood vessels to the brain. We always encourage patients to discuss their specific situation with their physician and to explore all options to reduce the potential risk of stroke.”
To find a physician with the ability to perform the left atrial appendage device implantation, please call 1.844.BSW.DOCS.

NOTE:

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