

NEWS FROM FORT SANDERS REGIONAL MEDICAL CENTER

## Woman's heart blockage treated with procedure thru wrist

Judith Hodge sees people with heart disease every day. As a staff member of the Fort Sanders Heart Center, she well knows the signs and symptoms of a heart attack. But, when Judith herself began experiencing chest pains off and on, she dismissed the warning signs.

"It's called denial," Judith admits now. "I figured it was just indigestion. I'm pretty healthy, so I didn't think I could be having heart problems."

Judith ignored her chest pain for several weeks until one Thursday afternoon, she suddenly felt unable to walk to her car after work.

"I asked one of our nurses to take my blood pressure, and it was very high," remembers Judith. "When my EKG was also abnormal, Dr. Todd said, 'You're going straight to the ER.'"

She spent the night in the hospital and in the morning interventional cardiologist Dr. Joshua Todd performed a transradial cardiac catheterization. Judith learned that one of the arteries at the back of her heart was 95 percent blocked. Dr. Todd placed a stent to open the



Judith Hodge is back at work at the Fort Sanders Heart Center shortly after undergoing a heart catheterization procedure through her wrist.

artery and restore blood flow to her heart. The transradial procedure is performed through a pa-

tient's wrist instead of the groin, as done in a traditional heart cath.



Judith Hodge shows the tiny "battle scar" on her wrist from her recent transradial heart catheterization procedure.

"It was so quick," says Judith. "I didn't have to lie still for hours and not move my legs. It was very easy on me."

Judith is amazed at how quickly she recovered from the procedure. "I was back at work on Monday, with just a tiny battle scar on my wrist," she says, proudly displaying her arm. "If you have to have a heart cath, this is the way to go!"

Judith is continuing her recovery by adopting a new healthy lifestyle and attending classes in the Fort Sanders Cardiac Rehabilitation Program.

"They've got me exercising

and eating what I'm supposed to," explains Judith. "I've already lost weight and now am building muscle."

Judith knows that her heart blockage could have been diagnosed much sooner if she hadn't ignored her symptoms. "Don't ignore chest pains like I did. Get it checked out immediately," she advises. "I almost waited too long. It was way too close."

**For more information about transradial catheterization and other cardiac procedures available at Fort Sanders Regional, call (865) 673-FORT (3678).**

## A quick flick of the wrist?

### A new way to open blocked heart vessels

Heart catheterization procedures can save lives. Commonly called "balloon" angioplasty and stenting, these minimally invasive procedures use tiny, balloon-like catheters inserted through a patient's artery to reach the heart, where they facilitate a number of procedures to prevent and treat heart artery blockages.

Joshua W. Todd, M.D. Interventional Cardiologist

Currently, the majority of those catheters are inserted through the femoral artery, which is in the groin. But at Fort Sanders Regional Medical Center, a number of heart catheterization procedures are being performed through an artery in the wrist, a process called transradial cardiac catheterization.

This new technique can benefit patients with special health concerns. "It can be more comfortable for people who are morbidly obese, those who have chronic back pain, or patients who are on blood thinners have a higher risk of bleeding," explains Dr. Joshua Todd, an Interventional Cardiologist with Knoxville Heart Group at Fort Sanders Regional. "With the wrist procedure, patients are sitting up immediately afterward with only a



small wrist bandage in place."

While only five percent of cardiologists in the United States do transradial catheterization versus the traditional femoral approach, the use of this technique is growing and evolving.

"European countries perform fifty to ninety percent of their catheterizations through the wrist," says Dr. Todd. "I think it will become more popular here and possibly become a standard of care

in the U.S. Transradial access has also been shown to reduce hospital length of stay and lower health care costs."

One drawback to the transradial access is that in some patients (around 10-15%) the procedure may take a little longer than transfemoral access. Also, a quick, non-invasive bedside test must be done first on the wrist to make sure the artery has a dual blood supply in order to safely perform the procedure.

But, with comparable patient outcomes for both methods, using the wrist does give physicians another option for catheter insertion.

"There are clear benefits for many patients with a transradial access catheterization, not just for heart procedures, but for any place in the body that needs a stent to open a blocked artery," says Dr. Todd.

Although the transradial catheterization procedure may not be suitable for everyone, it is a new cardiac approach available at Fort Sanders Regional that offers benefits for those who do qualify.

**For more information about the cardiac catheterization procedures available at Fort Sanders Regional, please call (865) 673-FORT (3678).**

#### Benefits of transradial cardiac catheterization:

- Less bleeding
- Less pain
- Quicker recovery
- Earlier return to work
- Low complication rate
- Lower cost
- Improved quality of life

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