



*LVAD recipient, Jerry Roberts, with his grandson David and his wife Judy, at David's basketball tournament this summer in Kansas City. It was one of Roberts' goals to attend following his implant, and Judy has been very instrumental in his recovery and success with the device.*

## LVAD surgery restores the life of a heart failure patient

By Amy Bentz Loss

People often tell Jerry Roberts, 69, from Urbandale how good he looks. "I thought I looked good before, but people are always telling me how much better I look now."

Roberts received a left ventricular assist device (LVAD) for treatment of advanced heart failure on May 3, 2013, at the University of Iowa Hospital. Mercy and Iowa Heart Center cardiothoracic surgeon Ganga Prabhakar, M.D., performed the implant procedure with assistance from UI Heart and Vascular Center cardiothoracic surgeon Michael Bates, M.D.

The UI, Mercy Medical Center – Des Moines and Iowa Heart Center are working together as part of the University of Iowa Health Alliance, a regional health care organization dedicated to providing coordinated, high quality health care across the state, to care for people diagnosed with advanced heart failure. UI specialists have been providing training in advanced heart

failure treatments to Iowa Heart Center specialists and Mercy staff so they can bring the technologies to Des Moines. This collaboration unites the clinical expertise of cardiologists from Mercy and UI in a unique team approach to form a regional Advanced Heart Failure Program.

"We are now able to better coordinate the care of our patients impacted by severe heart failure," said William Wickemeyer, an Iowa Heart Center cardiologist specializing in heart failure. "Patients will receive world-class health care from specialists right here in Des Moines. If they need more advanced care, such as a heart transplant, we send them to the University of Iowa Hospital & Clinics in Iowa City, and then seamlessly bring them back closer to home for follow-up care when they are ready."



*A left ventricular assist device (LVAD) is an implantable mechanical pump that helps pump blood from the left ventricle (lower chamber) of the heart to the rest of the body and is used in people who have weakened hearts or advanced heart failure.*

With a complex history of heart disease, hypertension and elevated cholesterol, Roberts eventually developed congestive heart failure which progressively became worse and worse. He could hardly take eight or nine steps without becoming short of breath and feeling fatigued. In September of 2012, his Iowa Heart Center cardiologist, Dr. Michael Fraizer, referred Roberts to his colleague, Dr. Wickemeyer, in the Advanced Heart Failure Clinic at Mercy.

"We tried different therapies and medications and when the options became limited, Dr. Wickemeyer talked to my wife and I about this LVAD device and asked if I wanted to be evaluated to see if I qualified," Roberts said. "It was a difficult decision because it is a lifestyle change, but I really had no other option." An LVAD is an implantable mechanical device that helps pump blood from the left ventricle (lower chamber) of the heart to the rest of the body when the heart is too weak to pump blood on its own. It is not an artificial or replacement heart and the patient's native heart is not removed. The pump is placed just below the diaphragm in the abdomen and is attached to the left ventricle, and the aorta, the main artery that carries oxygenated blood from the left ventricle to the entire body. An external, wearable system that includes a small controller and two batteries is attached by an external driveline.

### Learn more.

For more information about the Advanced Heart Failure Program or the LVAD device, please call (515) 633-3770 or visit [www.iowaheart.com](http://www.iowaheart.com).



*The Mercy and Iowa Heart Center Advanced Heart Failure Team who assisted with Roberts' care coordination. Left to Right: Angela Schulte, RN, heart failure case manager; Ganga Prabhakar, M.D., cardiothoracic surgeon; Sandy Hall, RN, heart failure case manager; Christos Kassiotis, M.D., cardiologist; Susan Johnson Brown, RN, director of cardiac specialty services; William Wickemeyer, M.D. cardiologist; Kimberly Maxson, RN, VAD coordinator; and Jolene Runkel, ARNP, specializing in heart failure.*

"Living with an LVAD is a big lifestyle change because you have to carry around the equipment," said Roberts. "But it is worth it. You also must have a strong support system as someone has to change your dressing every other day so that is very important in the decision process."

Patients may have an LVAD implanted as a "bridge" to transplant or in Roberts' case as a long-term treatment called "destination therapy" for patients who are not good candidates for a heart transplant. Many destination therapy patients experience prolonged life and the ability to do many normal activities – such as spending time with family, hobbies, driving and traveling, that otherwise would not be possible.

One goal Roberts had after his procedure was to watch his grandson play basketball this summer. "I didn't know if I would ever get to see him play again before my procedure," he said. "I was able to accomplish my goal and we recently traveled to Kansas City for three days to watch our grandson's basketball tournament."

Heart failure is a common chronic, progressive condition affecting 5.7 million Americans, in which the heart muscle does not work properly. The heart is unable to pump blood to meet the body's need for blood and oxygen. "I'm glad this option will be available in Des Moines for other heart failure patients to benefit from," Roberts said. "I feel so much better and stronger than I did before. It's not even close."