

# Percutaneous balloon mitral valvuloplasty

Your doctor has recommended a procedure called a percutaneous balloon mitral valvuloplasty.

You might not have heard this medical term before now and may be feeling unsure about the nature of the procedure.

This information sheet will outline what the procedure is and what risks are involved.

After you read this information sheet, you might still have questions. If you do, please contact the team at Heart HQ. We're here to help.

## 1. What's a percutaneous balloon mitral valvuloplasty?

The mitral valve helps to regulate the flow of blood from one heart chamber to another. Sometimes the two flaps of the valve (leaflets) get stuck together. This is called mitral stenosis, and it causes a back-up of fluid into your lungs. This makes you feel puffed and short of breath.

A valvuloplasty is a procedure that widens the valve using a balloon, allowing blood to flow more easily. The procedure starts with an intravenous line (IV) being put into your arm. An IV is simply a needle with a tube attached. You will receive an injection of local anaesthetic before a catheter (a very fine tube) is placed into a vein in your groin or wrist. Sometimes a sedative will also be given.

The valvuloplasty will involve passing a wire along a blood vessel up to your heart until it reaches the mitral valve.

Your doctor will use x-rays to see the wire. Once the wire is in place, a balloon will be passed along the wire and into the damaged valve. The balloon will then be pumped up where the valve is narrowed to widen it and release the blood flow. The balloon may be pumped up several times during the procedure.

Once finished, the wire and balloon will be removed. For more than 90% of patients, the procedure will provide immediate relief from symptoms and this improvement may last for up to 20 years. Most patients have relief for around 5–10 years.

## 2. What kind of risks are associated with this procedure?

Any kind of procedure carries some element of risk, often very small and rare.

Your doctor has balanced the benefits and risks of carrying out the test against the benefits and risks of not proceeding. If your doctor has recommended this procedure, they believe there is benefit to you going ahead.

It's important you understand the risks involved so you can make an informed decision.

Here are the most commonly reported risks and complications associated with a percutaneous balloon mitral valvuloplasty.

### Common risks and complications (more than 5% of cases)

- Minor bruising at the puncture site
- Abnormal heartbeat lasting several seconds, which settles by itself
- Major bruising and swelling at the groin/arm puncture site
- A severe leak in the mitral valve can happen—this will need surgery to repair

### Uncommon risks and complications (1–5% of cases)

- A stroke—this can cause long term disability
- Loss of pulse in the arm after a radial artery (wrist) procedure
- Embolism—a blood clot may form and break off from the catheter which will be treated with blood thinning medication
- Accidental puncture of the heart—this may need surgery to repair
- Death is possible due to the procedure

## World-class cardiac care

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### Rare risks and complications (less than 1% of cases)

- Abnormal heart rhythm that continues for a long time—this may need an electric shock to correct
- Surgical repair of the groin/arm puncture site or blood vessel
- Loss of kidney function due to the side effects of the x-ray dye
- Unable to get the catheter into the leg vein—the procedure may be changed to the opposite leg or to a different approach e.g. neck or arm
- Infection—this will need antibiotics
- Heart attack
- An allergic reaction to the x-ray dye
- A higher lifetime risk from x-ray exposure
- Air embolism/oxygen may be given
- Damage to the nerve in the leg
- Emergency heart surgery due to complications with this procedure
- Skin injury from radiation, causing reddening of the skin

### Our commitment to you

As a patient of Heart HQ, you can be assured we will always strive to act in your best interests and we will only recommend tests and procedures we believe will benefit you.

Everyone has questions, and we want to answer yours. Please contact your doctor to discuss any concerns you might have.

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