

# HEART SURGERY

## Healing Hearts Through the Leg



When Agnes Hourihan's heart valve began to fail three years ago, she dreaded the thought of surgery and enduring a long recovery process that would slow her down. The active 82-year-old grandmother of 19 always enjoyed cooking, spending time with her family and taking vacations in Maine, Vermont and Florida.

"I didn't have any symptoms, until it finally hit me last November," Ms. Hourihan explains. "I thought that when the time comes, dear God will take me."

Ms. Hourihan worked closely with Jeanne DeMoss, DO, an attending cardiologist at Robert Wood Johnson University Hospital (RWJ) who is a member of Cardiology Associates of New Brunswick, to manage her condition and discuss the progression of her aortic valve disease and treatment options.

"Valve disease grows progressively and when the symptoms (chest pains, shortness of breath) surface, the valve must be replaced," Dr. DeMoss explains. On November 28, 2012, it became clear that medical management was no longer an option. "It was 3 a.m. and I wasn't feeling good at all, I couldn't breathe," Ms. Hourihan recalls.

Fortunately, Ms. Hourihan lives with her daughter, who drove her to RWJ immediately. "I knew RWJ was a good hospital because my daughters had their babies there," Ms. Hourihan notes. "The nurses there were genuinely caring and they treated me like I was a member of their family."

Because of her failing health, doctors at RWJ believed Ms. Hourihan was an ideal candidate to receive TAVR (Transcatheter Aortic Valve Replacement). TAVR is a groundbreaking aortic valve replacement technique that provides new hope for patients diagnosed with severe aortic valve disease who are also suffering from end-stage heart disease.

RWJUH was selected in 2012 by Edwards Lifesciences to be among the first sites in the nation to offer TAVR.

TAVR allows a multidisciplinary team of cardiac surgeons, vascular surgeons, interventional cardiologists and cardiac anesthesiologists at RWJ and Robert Wood Johnson Medical School to replace a patient's diseased aortic valve without using traditional open-heart surgery while the heart continues to beat.

In performing TAVR, the replacement valve is pinched and inserted into the body through a small cut in the patient's groin area. It is then threaded with a catheter up the femoral (thigh) artery. Once delivered to the site of the patient's diseased valve, the replacement valve is expanded with a balloon and immediately functions in place of the patient's existing valve. Major surgical incisions are not required, which creates less stress on medically compromised patients and can lead to faster recovery times.

"This innovative technique provides a new option for patients who may be too ill to undergo traditional open heart surgery," explains Leonard Lee, MD, Associate Professor of Surgery at RWJMS and Chief of the Division of Cardiothoracic Surgery at RWJ. "TAVR can contribute to an enhanced quality of life for these patients, many of whom had few other surgical options."

Dr. Lee performed Ms. Hourihan's TAVR procedure on December 19. She left the hospital for cardiac rehabilitation on Christmas Day and returned home on January 5.

"I just love to live and I feel very lucky," Ms. Hourihan says. "I think this (TAVR) is something people should know about and have."

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