

WATCHMAN® Left Atrial Appendage Closure Technology



Nabil Dib, M.D., M.Sc., F.A.C.C., director of Cardiovascular Research at Chandler Regional and Mercy Gilbert Medical Centers, has performed the medical centers' initial implant of the WATCHMAN® Left Atrial Appendage Closure Technology, an investigational device for patients with atrial fibrillation. The medical centers are two of 41 locations in the United States participating in the PREVAIL clinical study, which aims to compare the WATCHMAN® device to long-term warfarin therapy in patients with atrial fibrillation.

What is Atrial fibrillation?

It is an irregular, disorganized, electrical activity of the upper chambers of the heart (atria) resulting in ineffective pumping action of the atria.

“It is the most common rhythm disorder affecting more than five million people worldwide,” said Dr. Dib. He notes that this ineffective pumping action can cause blood to stagnate or pool in the left atrial appendage placing patients with atrial fibrillation at a six-fold increased risk of stroke versus patients in normal sinus rhythm. “Current practice guidelines indicate that 15 to 20 percent of all strokes occur in patients with atrial fibrillation. The rate of embolic stroke among patients with atrial fibrillation averages five percent per year, which is two to seven times the rate for people without the disorder.”

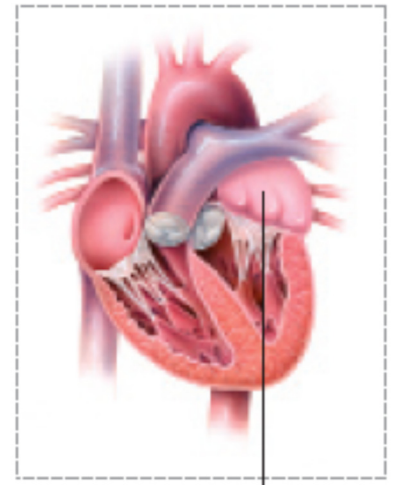
Most strokes associated with atrial fibrillation are thought to be due to migration of blood clots that form in the left atrial appendage (LAA). In a normal heart, the appendage contracts along with the rest of the atrial muscle, allowing the blood to move in and out. When the atrium loses its ability to contract in atrial fibrillation, blood pools in the appendage, providing an environment for blood to clot. These clots can then break loose and migrate through the bloodstream and up to the brain causing a stroke. Typically patients with atrial fibrillation take blood thinning medications, such as Coumadin® or warfarin, to prevent these clots from forming.

Researchers are hopeful that this procedure and technology may greatly reduce the need for blood thinning medications and decrease the number of strokes in this at risk patient population.

As with all clinical research, it's important for research volunteers to understand the general principles that apply to anyone taking part in the study:

- Participation is entirely voluntary;
- While research volunteers may not experience personal benefits as a result of taking part in the study, knowledge may be gained from their participation that may benefit others; and
- At any time, research volunteers may decide to discontinue their participation without any negative consequences.

For more information, please call 480.728.9979. You may also visit our online listing of research studies by visiting ChandlerRegional.org/ClinicalResearch or MercyGilbert.org/ClinicalResearch.



Left Atrial Appendage

