

If you have any questions or concerns, please ask your cardiologist or nurse.

Transcatheter Mitral Valve Procedure: After Hospital Care

This brochure provides information to help you recover at home.

Your cardiologist inserted a small tube (catheter) into a blood vessel in your groin (femoral vein) to replace the mitral valve in your heart. They removed the catheter after the procedure. As the puncture site heals, stress or strain to your groin or abdominal muscles can cause bleeding or swelling.

Activity

Rest on the day you are discharged from the hospital, and limit your activity. You may resume your usual activities the next day, including normal social activities. Be sure to follow these guidelines closely:

- You may walk and climb stairs as you are able.
- Do not drive for 1 week.
- Do not take tub baths or go swimming for 2 weeks or until the catheter sites are completely healed. You may take showers.
- Do not lift anything weighing more than 10 pounds for 2 weeks.
- Do not do strenuous exercise for 4 weeks. This includes activities such as tennis, running, swimming, golfing, weight lifting and bicycling.
- Avoid sexual activity for 2 weeks.

We recommend cardiac rehabilitation for all patients following valve repair. We will discuss this with you during your follow-up appointment at the Northwestern Medication Bluhm Cardiovascular Institute Center for Heart Valve Disease.

Wound care

After the procedure, your healthcare team applied bandages to the puncture sites. You can take the bandages off when you get home. Do not scrub the wound while showering. Keep the wound sites clean and dry. Do not apply lotions, ointments or powders to the wound sites for 2 weeks.

Wound healing

The healing wound should remain soft and dry. It is normal for it to be bruised or have a marble-sized lump. Please call your cardiologist if you notice any of these signs or symptoms:

- Redness around the puncture site
- Drainage from the puncture site
- Increased swelling around the puncture site
- Pain at the puncture site that makes walking difficult
- Numbness or tingling in your thigh or leg
- Coolness or changes in the normal color of your leg or foot

Medications

After your valve replacement, your cardiologist will prescribe the following medications. These medications will help prevent blood clots from forming on the valve leaflets (valve thrombosis).

Aspirin

Take 1 aspirin tablet (81 milligrams) every day. Continue taking aspirin as instructed by your cardiologist. You will likely need to take it for the rest of your life.

Anticoagulant (blood thinner) medication

Clopidogrel (Plavix®): Take 1 Plavix tablet (75 milligrams) every day. Continue taking Plavix as instructed by your cardiologist. This is usually continued for 3 months.

Your cardiologist may prescribe another anticoagulant medication for you. Follow their instructions for how to take any of these medications:

- Warfarin (Coumadin®)
- Apixaban (Eliquis®)
- Rivaroxaban (Xarelto®)
- Dabigatran (Pradaxa®)

Do not stop these medications without talking with your cardiologist first.

Take all other medications as directed by your cardiologist. Do not take any extra aspirin or anti-inflammatory medications such as ibuprofen (Motrin®, Aleve®) or others. These medications can increase your risk of bleeding. Many over-the-counter medications contain aspirin. If you are unsure about what is in a medication, ask your pharmacist or cardiologist before you take it.

Warning signs and symptoms

Please call your cardiologist right away or go to the nearest emergency department if you have any of the following symptoms:

- Chest discomfort or pain
- Dizziness, lightheadedness or fainting
- Shortness of breath with exertion
- An irregular heartbeat

Contact information

If you have any problems or questions, please call the Bluhm Cardiovascular Institute Center for Heart Valve Disease at 312.695.4965 (TTY: 711).