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Loop recorder Insertion

Implantable loop recorders are small, wireless monitors that can be implanted under the skin on the left side of the chest which provide continuous monitoring of the electrical signals of the heart. These devices allow clinicians to monitor the heart rhythm over long time frames, gathering data for ongoing treatment recommendations.

The devices themselves are injected under the skin and contain a small battery with a lifespan of around 4-5 years, after which time, the device can either remain in place if it causes no discomfort or be easily removed. Patients live completely unaffected lives while the device is monitoring their hearts in the background and reporting any findings wirelessly to their cardiologist for assessment when remote monitoring systems are in use.

In recommending this procedure, your doctor has made has determined that on balance, the benefits and risks of the procedure outweigh the benefits and risks of not proceeding. As such, your doctor believes there is a net benefit to you going ahead and that the procedure should be successful overall.

Symptoms

Loop recorders are implanted to provide long term continuous monitoring for heart arrhythmia where symptoms suggest there could be a potentially transient condition that would otherwise be difficult to detect. Many patients report experiencing symptoms such as:

- Dizziness / blackouts
- Stroke of unclear cause

What are the risks involved in a loop recorder insertion?

As with all procedures, the insertion of an implantable loop recorder carries its own risk profiles that can range from common occurrences, through to uncommon and rare instances. All Risks should be taken into consideration when considering the insertion of

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a loop recorder to determine if the procedure is an appropriate treatment option for yourself during consultation with your treating cardiologist.

Risks and complications can include but are not limited to:

- Bruising to the insertion site and surrounding tissues that can take weeks to heal
- Infection (about 1 in 200)
- Bleeding (about 1 in 200)

What Can I expect during the procedure?

Once checked into hospital for your procedure, you will be taken through an admission process where a detailed medical history is taken, preprocedural blood tests are collected and your body is prepared by shaving off any hair to your chest. This is undergone to ensure a sterile surgical field can be created to reduce any chance of infection and ensure that any cardiac telemetry electrodes can be appropriately placed on your chest in a way that is both effective for use and easy to comfortably remove.

You will then be taken to the anaesthetic holding bay where your anaesthetist will discuss their part in the procedure and discuss any queries or concerns you may. Upon entering the cardiac catheter laboratory, you will be prepared for your procedure by the nursing staff who will position you on the table and apply various monitoring electrodes to your body prior to the induction of any anaesthetic medications.

At the commencement of the procedure once you have been sedated and surgically prepared by the staff assisting with the procedure, the doctor will inject local anaesthetic to the front left side of your chest. They will then make a small incision and inject the loop recorder under your skin before applying steristrips to the incision and applying a dressing to cover the wound and complete the procedure.

The entire procedure is generally reasonably quick, taking less than 30 minutes to complete as a loop recorder can be inserted under local anaesthetic and light sedation as the use of a general anaesthetic is not normally required. At the completion of the procedure, the patient is then awoken from their sedation and transferred to the post anaesthetic recovery area for observation before being discharged if no complications are observed post-operatively.

Before Your Procedure

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It is important that you fast prior to your procedure in line with your anaesthetists' instructions. Generally, a fast time of 6 hours for solid food and 2 hours for water is required in order to prevent any complications with the use of anaesthesia during your procedure.

For patients taking Ozempic, Trulicity, Saxenda, Wegovy or Mounjaro, the anaesthetic guidelines require you to continue your medication as normal, commence a clear fluid diet 24 hours prior to your procedure and completely fast for 6 hours immediately prior to your procedure to minimise the potential for anaesthetic related complications.

Note: Clear fluids includes water, apple juice, broths, black coffee and black tea. Any non-transparent fluids such as milk, smoothies, juice containing pulp or soups are not considered clear fluids and can cause a delay in your procedure time if consumed.

After Discharge Process

Prior to discharge from hospital, patients are advised of any changes to their regular medications by their discharging doctor and advised of their follow up process. This usually consists of an in-clinic appointment to assess the device with a company technician and Dr. Hunt in 6-8 weeks. If you are unsure if an appointment has been made, please contact the clinic to confirm a date and time after discharge.

The steristrips can be removed 7-10 days after the procedure. For the first 24–48 hours, keep the wound and strips dry. After that, short showers are generally safe, keeping the direct stream away from the insertion site. Pat the area dry gently without rubbing