

# Implantable Cardioverter-Defibrillator (ICD) Decision Making Guide

**Choosing whether or not to get an Implantable Cardioverter-Defibrillator, or ICD, is a difficult decision to make.** There are important trade-offs when considering the procedure. You should discuss your current health status and risk factors with your doctor in addition to the potential outcomes of the procedure including recovery, prognosis, and lifestyle changes. This resource serves to provide you with answers to some common questions surrounding ICDs and guide you in your decision making process.

## Frequently asked questions (FAQs) for patients considering an ICD

### What is an ICD?

- ▶ An implantable cardioverter-defibrillator, or ICD, is a device that detects any life-threatening, rapid heartbeat. This abnormal heartbeat is called an arrhythmia. If it occurs, the ICD quickly sends an electrical shock to the heart. The shock changes the rhythm back to normal. This is called defibrillation.



### Why has my doctor suggested I get an ICD?

- ▶ Your doctor has likely suggested this procedure because you are at high risk of sudden cardiac death from an abnormal heart rhythm that is life threatening. Some common reasons for which individuals are at high risk include ventricular tachycardia, or VT, ventricular fibrillation, or VF, a weakened and/or enlarged heart that does not pump blood well, certain types of congenital heart problems, or other genetic health conditions.

### Will I need surgery to get an ICD?

- ▶ Yes, implantation of an ICD requires surgery. The procedure most often takes two to three hours. Most people who have an ICD implanted are able to go home from the hospital in one day. Most quickly return to their normal activity level. Full recovery takes about 4 to 6 weeks.



### What can I expect should I choose to undergo the procedure?

- ▶ Most patients sleep through the procedure comfortably given the use of IV sedation as well as local anesthesia. The area of your chest wall below your collarbone will also be numbed with anesthesia, so you will not feel pain even if you are not fully asleep. The area of your chest wall below your collarbone will be numbed with anesthesia, so you will not feel pain. The surgeon will make an incision (cut) through your skin and create space under your skin and muscle for the ICD generator. In most cases, this space is made near your left shoulder. The surgeon will place the electrode into a vein, then into your heart. This is done using a special X-ray to see inside your chest. Then the surgeon will connect the electrodes to the pulse generator and pacemaker.

## What are some of the risks of the ICD procedure?

Some of the risks include, but are not limited to:

- ▶ Blood clots in the legs that may travel to the lungs
- ▶ Breathing problems
- ▶ Heart attack or stroke
- ▶ Allergic reactions to medicines (anesthesia) used during surgery
- ▶ Infection
- ▶ Wound infection
- ▶ Injury to your heart or lungs
- ▶ Dangerous heart arrhythmias



## How long does an ICD last?

- ▶ ICDs typically last 5-7 years prior to requiring a battery or pulse generator replacement.<sup>iii</sup>

## How do I know if an ICD is right for me?

- ▶ Choosing to get an ICD is a personal decision but one that is best made after understanding and evaluating all information as it pertains to your health and lifestyle. It is encouraged you have conversations with your doctor, family and friends to help answer questions or concerns during this process.

## What if I choose not to get an ICD?

- ▶ If you choose not to get an ICD, you are simply choosing to live life as you are now. The ICD has been recommended for you because it will benefit your current health status and will likely prevent the occurrence of an abnormal or dangerous heart rhythm that may lead to sudden death.

<https://patientdecisionaid.org/wp-content/uploads/2016/06/ICD-Infographic-Jan2018-1.pdf>

[https://www.ucsfhealth.org/education/implantable\\_cardioverter\\_defibrillators/](https://www.ucsfhealth.org/education/implantable_cardioverter_defibrillators/)

[http://www.heart.org/HEARTORG/Conditions/Arrhythmia/PreventionTreatmentofArrhythmia/Living-With-Your-Implantable-Cardioverter-Defibrillator-ICD\\_UCM\\_448462\\_Article.jsp#.Wq\\_ccuSWyUk](http://www.heart.org/HEARTORG/Conditions/Arrhythmia/PreventionTreatmentofArrhythmia/Living-With-Your-Implantable-Cardioverter-Defibrillator-ICD_UCM_448462_Article.jsp#.Wq_ccuSWyUk)

## Can the ICD be turned off or removed?

- ▶ Yes, the ICD can be turned off or removed. Neither is recommended unless the ICD gets infected, the battery or pulse generator need to be replaced, or if an individual is nearing the end of life from this or an alternate illness and wishes to no longer prolong his or her life.<sup>i</sup>

## Will an ICD improve my condition, such as heart failure?

- ▶ While the ICD is not considered a cure, it can be thought of as a treatment for the abnormal heart rhythm or rates you are likely experiencing.



## What is life like after getting an ICD?

- ▶ Majority of patients are able to resume their normal activities of daily living following the procedure and after the appropriate follow up appointment(s). Each individual varies in terms of recovery and any potential medical problems following the procedure. It is important you speak with your doctor about your capabilities following the procedure.<sup>ii</sup>

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**For more information,  
please visit:**

[UFHealth.org/implantable-cardioverter-defibrillator](http://UFHealth.org/implantable-cardioverter-defibrillator)

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