

Left Ventricular Assist Device (LVAD) In The Management of Heart Failure, A Single Center Experience

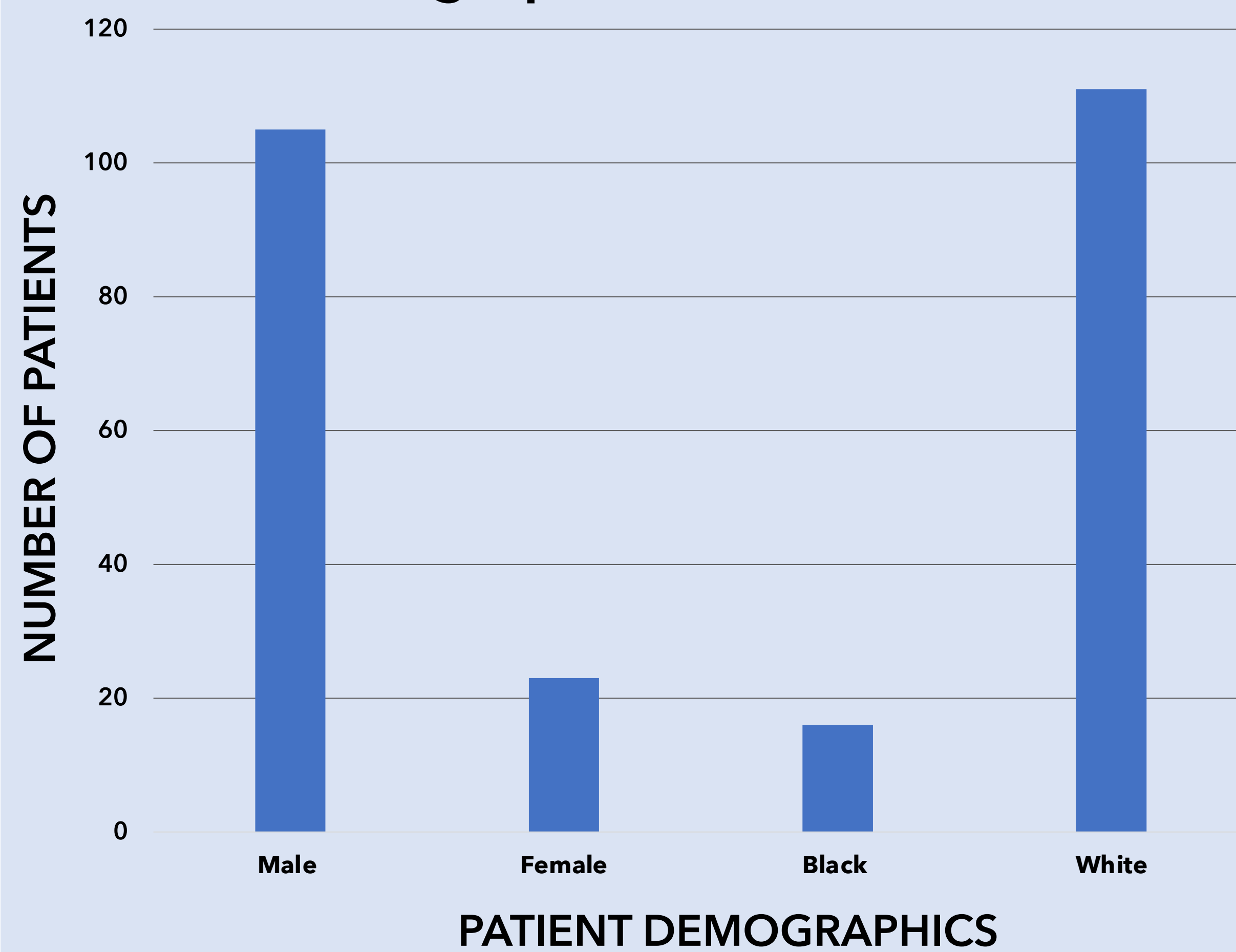
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METHODOLOGY

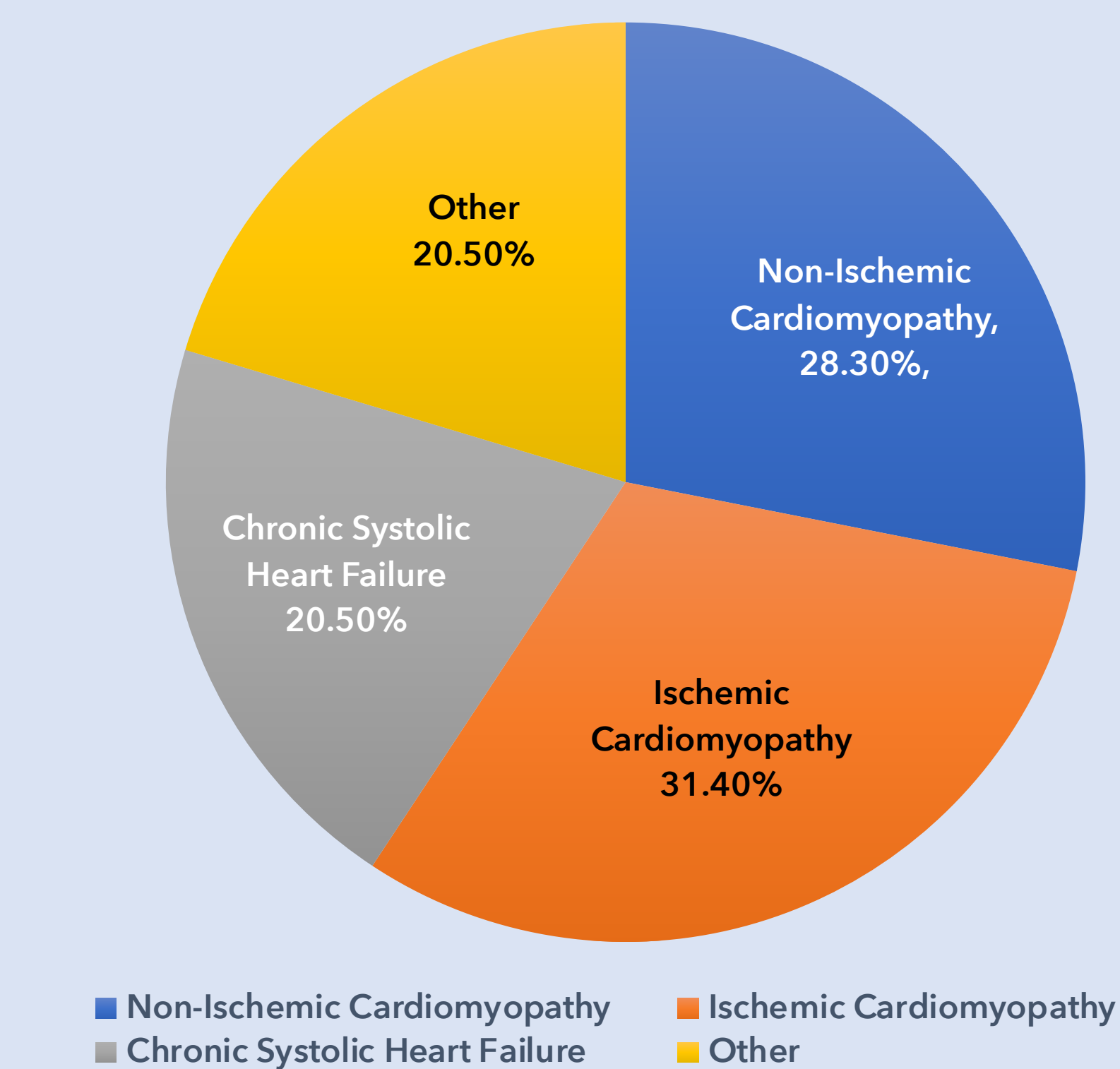
This retrospective study reviewed patients treated with Left Ventricular Assist Devices from 1/1/2017 - 12/31/2021.

- Total Patients: 127
- Age Range: 18-83
- Average Length of Admission: 41 days
- Mortality before 30 days: 12
- Prior CABG: 24
- Return to OR within 30 days: 37
- Hx of Diabetes: 72
- Hx of CAD: 71
- Hx of Hypercholesteremia: 83

Patient Demographics

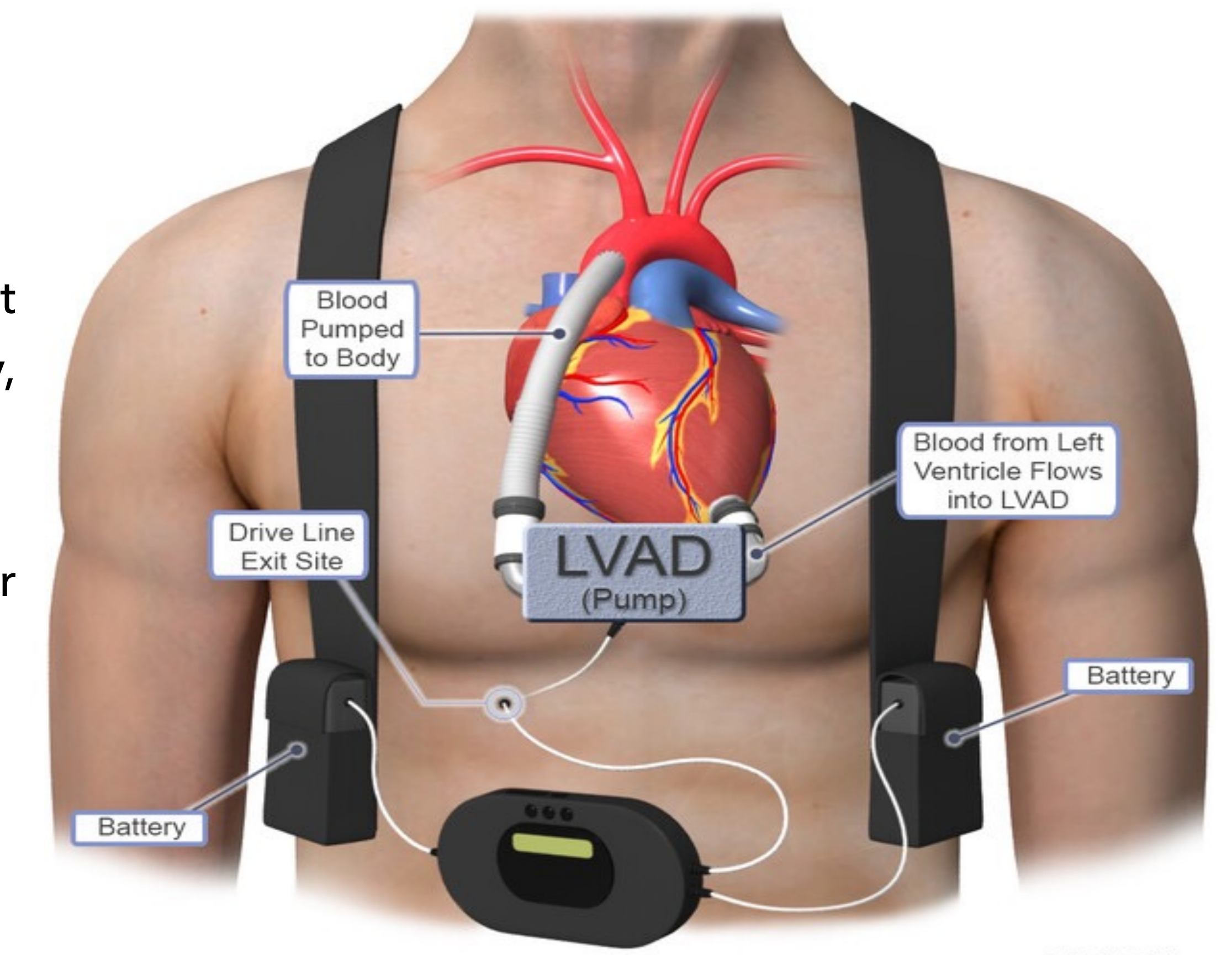


Preoperative Diagnoses



BACKGROUND

Heart failure has become more prevalent today, with the CDC estimating 6.2 million Americans diagnosed with heart failure, and costing around \$40.6 billion in 2020 (Kruse, et.al 2021). Many heart failure patients are successfully managed medically, but with worsening disease the Left Ventricular Assist Device (LVAD) has become more clinically relevant in treating patients with heart failure, either as a bridge to transplant, or destination therapy.



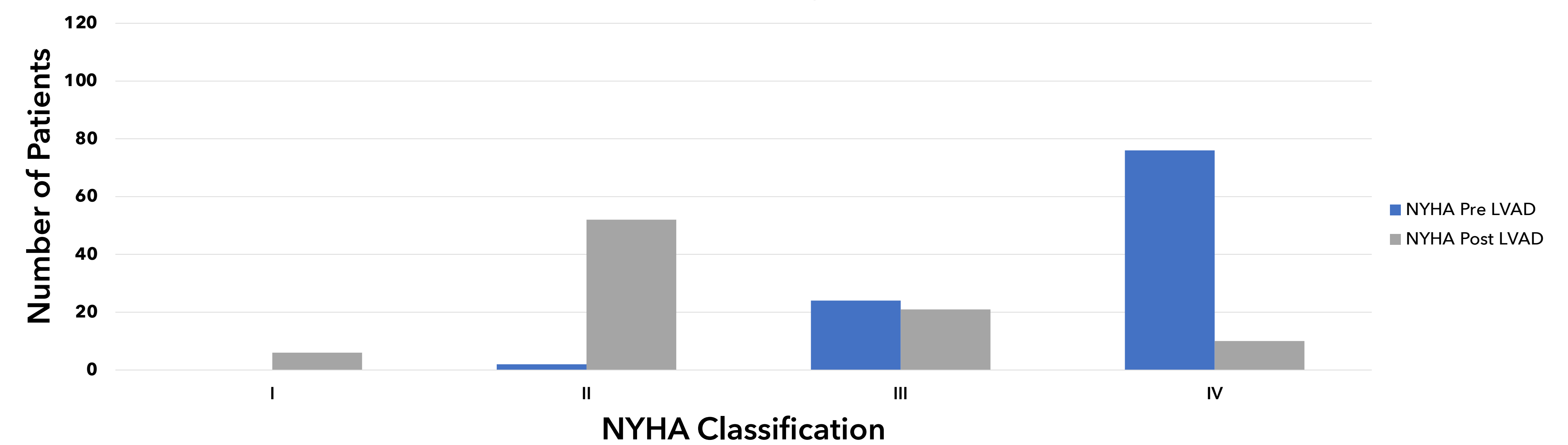
AIM

The aim of this study is to review our experience with LVAD therapy at the University of Kentucky Healthcare system.

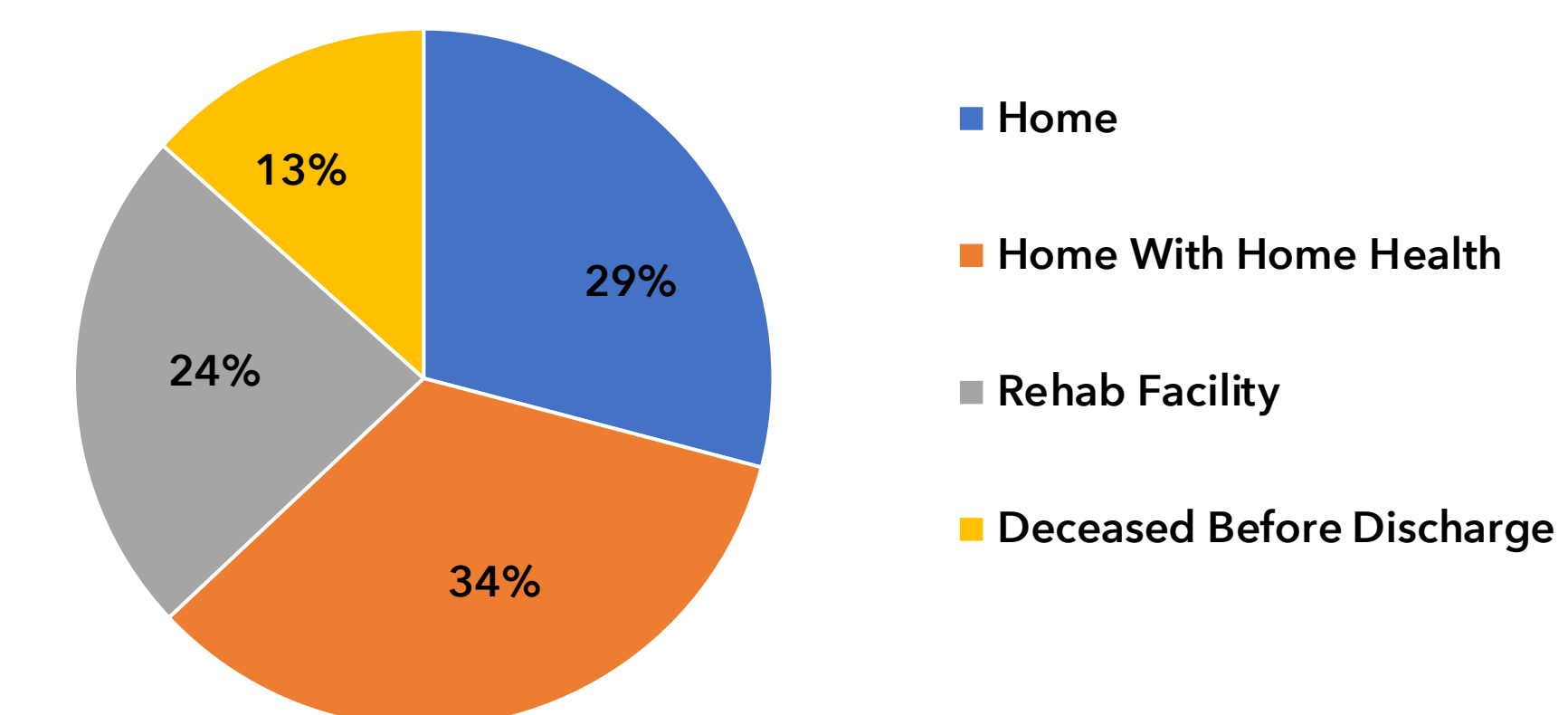
This study was conducted with IRB approval from the University of Kentucky.

RESULTS

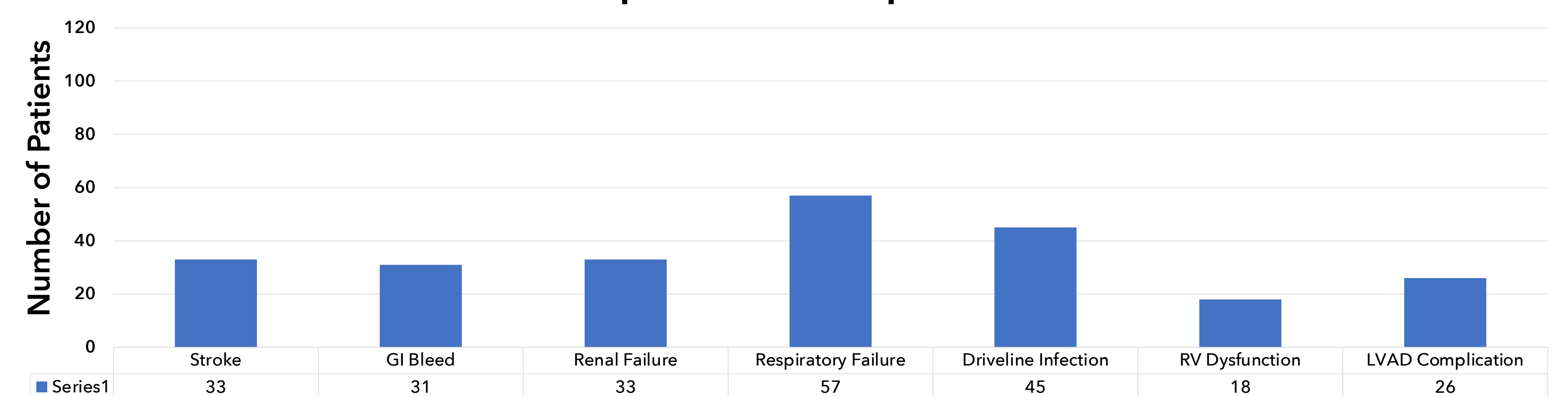
NYHA Class



Discharge Location



Post Operative Complications



CONCLUSION

Heart failure is becoming a more common disease with increasing number of admissions into the hospital. While most heart failure symptoms can be managed medically, LVAD has been implemented to try to successfully manage late-stage heart failure symptoms, prolong life, and bridge patients to transplant.