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Covenant Health gives new hope to elderly heart patients

James Braxton, 94, has always been “moving and shaking.” A retired Lubbock high school band teacher, Braxton has always played the saxophone and violin and been involved with his church.

But several months ago, he began to lose energy, experience shortness of breath and have trouble getting around. “My dad never complains about aches and pains,” said his daughter, Ruby Braxton. “When he started complaining that he wasn't feeling well, we knew something was wrong.”

Braxton was suffering from aortic stenosis, a progressive heart disease in which the aortic valve becomes hardened, forcing the heart to work harder to circulate blood. This disease, common in older patients, can result in decreased energy, difficulty breathing, fainting and eventually heart failure.

Normally, a patient like Braxton, deemed too high-risk for open heart surgery at the age of 94, would essentially be sent home to die. But, thanks to a new procedure at Covenant Hospital called the TAVR—or, transcatheter aortic valve replacement—Braxton's heart was repaired through a small incision, and he was discharged two days later.

Braxton's January surgery was the first TAVR procedure at Covenant, and Braxton's cardiologist, Dr. Marc Levine, couldn't be happier with the results: “Mr. Braxton went home in 48 hours, and when he went home, he was already feeling dramatically better. He came back in two weeks after in a suit, walking on his own power, and pulled out the saxophone and played for all of us.”

How does Braxton, a man of few words, feel now? “I feel alright,” he said.

“He is able to do things normally again now and doesn't need a cane, doesn't need a walker,” Ruby Braxton said. “God has blessed him. Thank goodness this procedure was available at this time. No cutting open of the chest, no braking of the bones.”

Traditional heart surgery requires surgeons to open the patient's chest and move bones. The invasive procedure requires a week-long hospital stay for the patient, followed by six weeks of recovery.

In contrast, the TAVR procedure only requires only one incision in the leg, through which a catheter is threaded into an artery and up to the heart. A collapsible aortic heart valve is then placed within the existing diseased valve—without stopping the patient's heart.

With TAVR, “we're replacing an entire valve in the heart without open heart surgery,” Levine said. “The gold standard for this disease is open heart surgery to replace the older valve. It's tried and true. But we know that the older and sicker people are, the harder it is to recover and the higher risk.”

TAVR is uniquely suited to help the elderly because it takes advantage of the hardened aortic heart valve, using it to hold the replacement valve in place.

“The reason this procedure works is because the old valve that has become 'calcified'—similar to being full of rocks—will hold the new valve in place. In much younger people, if there isn't all that calcification, that valve may not stay in place. For right now, the TAVR procedure is only approved by

the FDA in the U.S. for the high-risk and inoperable. As time goes on and as these valves get better, I think one day you might not need heart surgery at any age if you need a valve replacement,” Levine said.

A second TAVR success story for Covenant is Henry Wise, 81, a retired Roswell resident and self-described handy man, who is also testament to the fact that TAVR can be a good solution for older, sicker patients.

Wise is the kind of man who has “gotta keep moving. Whether it's in the yard or what, I can't be a couch pillow at home,” he said. In July 2013, Wise had been out enjoying his regular Sunday activities but felt like he couldn't get enough breath after he got home. A trip to the Roswell ER revealed a number of problems with his heart and lungs.

According to his interventional cardiologist at Covenant, Dr. Juan Kurdi, Wise was a good candidate for TAVR “because he was deemed to be high-risk for surgical aortic valve replacement due to the facts that he had previous open heart surgery, he has leukemia, he's getting chemotherapy treatment for his leukemia, he is immunosuppressed, and he has severe lung disease.”

In February of this year, Kurdi “became like a hero to me,” Wise said. “In 2001 or 2002 I had a quadruple bypass (at Covenant), and I knew that I was going to trust my life to anybody it would be them because they were so careful and considerate ... Since I'm 81 years old, they were a little dubious about what type of correction I should have. I went to a meeting with (the cardiologists in Lubbock). They decided because of my age and because I had had the quadruple bypass before, they didn't want to open my chest up again. They thought going through the artery (with the TAVR) would be the best way.”

The complex TAVR procedure requires the consultation of a special multidisciplinary team—including interventional cardiologists, heart surgeons and other specialists—that becomes a “hybrid O.R.” during the surgery. The unique team readies for any contingency, including the need to perform traditional open heart surgery. The hybrid O.R. is a surgical “safety net” that prevent delays in getting patients life-saving surgical services should the need arise.

Covenant Health System is the first medical facility in the West Texas-Eastern New Mexico region to develop a hybrid O.R., another cardiac achievement for Covenant, which has consistently been ranked by the Society of Thoracic Surgeons in the top 1 percent of the nation’s heart programs.

One day after Wise's surgery, he was up and walking around again. He has been impressed with the results: “After the operation in February, my system was just so much better. I was still taking oxygen at night, but I don't do that anymore. I could feel the difference with the added circulation of the blood. I was hoping that's what was going to happen, but I was surprised at the extent that it did.”

He feels so good now he has a new problem: “I still have to be careful. I'm a handy man. I'm always doing something around the house. I feel so good, I tend to overdo it sometimes and get too tired out.”

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