

Patient information factsheet

Adult congenital heart service: patent foramen ovale (PFO)

We have written this factsheet to give you more information about a patent foramen ovale (PFO). It explains what a PFO is, what the procedure to close a PFO involves and the possible risks. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please contact us.

What is a patent foramen ovale (PFO)?

A PFO is a normal, flap-valve opening in the heart. It is situated in the wall (atrial septum) of the heart that separates the right atrium from the left atrium (the top two heart chambers) while in the womb, but usually closes spontaneously (naturally) after you are born. However, in a quarter of people it stays open and can intermittently allow blood flow to pass from the right atrium to the left atrium. This abnormal flow has been associated with stroke, migraine and shortness of breath when the body is in certain positions (positional breathlessness).

Closing the PFO

A PFO measuring less than 40mm (4cm) can usually be closed using a 'double-disc' device shaped like a double-sided umbrella. The procedure will be carried out under general anaesthetic (medicine given to make you go to sleep) in the cardiac catheterisation laboratory under ultrasound guidance with x-ray screening.

We will pass the device through a long tube (catheter) from the femoral vein at the top of your leg, up into your heart, and then position it across the flap valve.

Eventually your heart tissue will grow over the device and it will become part of your heart wall. You will not be able to feel the device once it is in place.

Before the procedure

Do not eat or drink anything for six hours before the procedure.

On the day of the procedure

You will usually be admitted to hospital on the day of the procedure and you are likely to stay for one night, though this may vary depending on your circumstances. Some people may go home on the same day.

When you arrive on the ward, the nursing staff will admit you, check your blood pressure, pulse and temperature, and show you around the ward area. A doctor will then examine you, explain the benefits and potential risks of the procedure, and ask you to sign a consent form.

You will then have:

- a blood test
- an ECG (electrocardiogram - tracing of the heart's electrical activity)

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You may also have a chest x-ray and an echocardiogram, which is an ultrasound scan of your heart.

You will also meet an anaesthetist, as you will need to have a general anaesthetic.

Possible complications

PFO closure is a safe and low-risk procedure. The team treating you will have many years of experience performing the procedure. Significant complication risks are around 2%. However, bleeding, bruising, palpitations (noticeable heartbeats) and a sore throat are more common. We will discuss any possible complications with you when you sign your consent form.

After the procedure

The ward nurses will continue to monitor you and check the small wound at the top of your leg (groin), as there is a small risk of bleeding or swelling. You may be quite sleepy on your return to the ward as a result of the anaesthetic. As soon as you are awake enough, the nurses will get you something to eat and drink. You will usually be given sips of water first.

After a few hours of bed rest, you will be able to get up and move around the ward. You may have some bruising and discomfort in your groin.

The day after your procedure, we will perform another ECG and echocardiogram to confirm that your device is well-positioned. We will discuss your results and any follow-up plans with you before you go home. We may prescribe you tablets to take home, specific to your needs.

Before you leave hospital, the nurses will remove your groin dressing, check your wound and explain how to care for it.

Going home

Do not drive or return to work for at least 48 hours after the procedure.

An outpatient appointment will be sent to you through the post for approximately six to twelve weeks after the procedure. At this appointment, we will assess your device and review your medications.

Contact us

If you have any concerns or questions once you are home, please feel free to contact the following for advice:

Adult congenital heart clinical nurse specialists
Telephone: **023 8120 4739**

Hospital switchboard
Telephone: **023 8077 7222** then ask for **bleep 1481**

Cardiac catheter lab day unit
Telephone: **023 8120 4420**

Ward E2
Telephone: **023 8120 6473**

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Useful links

www.nhs.uk/conditions/congenital-heart-disease

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **023 8120 4688**.

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalneeds**