



Dr. Angelo Volpe talks with Dr. Mariano Battaglia during a follow-up exam.

Imaging Studies Help Diagnose, Treat Heart Conditions

Variety of Modalities Helped Dr. Angelo Volpe After His Heart Attack



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— Dr. Angelo Volpe

When former Tennessee Tech University President Dr. Angelo Volpe went to his primary care doctor complaining of indigestion and shortness of breath, he didn't even realize he had already had a heart attack.

But with help from the variety of cardiac imaging modalities available at Cookeville Regional, Dr. Mariano Battaglia, a cardiologist with Tennessee Heart, was able to determine what had happened and give Dr. Volpe the best possible chance for recovery.

"The first thing they did was take an EKG, and when they looked at it, they didn't even put me on the treadmill for the regular stress test," said Dr. Volpe. "Instead they did a chemical stress test."

An EKG is used to help determine whether someone has had a heart attack, and a stress test can help detect major blockages in the arteries. From the results of those two studies, Dr. Battaglia, who was on call that day, determined that Dr. Volpe had had a significant heart attack several days prior with a major blockage, and an echocardiogram showed an almost complete blockage in the left anterior descending artery.

Dr. Battaglia then performed a PET scan, which

showed that the surrounding tissue was still viable and, based on that information, placed two stents to open the blockages and placed Dr. Volpe on several medications.

Other cardiac imaging technologies such as the MUGA (multigated acquisition) scan, which determines the ejection fraction, or how well the patient's heart is pumping out blood, aided Volpe as he worked to rebuild his health. Because the scan showed that his ejection fraction had gone up 16 points to 45, he was able to stop using his external defibrillator.

"If he had had an ejection fraction between 35 and 40, I would have had them do an electrophysiology study, which is another type of imaging modality that checks for the possibility of the patient having a deadly cardiac arrhythmia," said Dr. Battaglia.

In addition to all of the imaging studies used to help Dr. Volpe, Cookeville Regional also offers arteriogram, cardiac catheterization and several more as part of their comprehensive cardiac care program.

"I couldn't be more pleased with the care I got from Dr. Battaglia, his staff, and the staff at the cardiac rehabilitation center," said Dr. Volpe. "I can't imagine why people would want to go elsewhere when we have such good medical care right here."



Dr. Mark Wathen, left, visits with cardiac ablation patient Julie Haun.

Cardiac ablation at CRMC can help patients with arrhythmia problems

Cardiac catheter ablation "is a powerful therapy," says Dr. Mark Wathen, an arrhythmia specialist with Tennessee Heart, affiliated with Cookeville Regional Medical Center.

Julie Haun, who recently had the procedure performed by Wathen at CRMC, agrees.

Cardiac ablation is a procedure used to correct heart rhythm problems, or arrhythmias, and a procedure regularly performed by Wathen.

Haun suffered from persistent atrial fibrillation (AFib), described as a quivering or irregular heartbeat. AFib causes the heart to beat irregularly and can increase the number of beats to as high as 350-400.

"That's just total chaos, and can lead to a number of very serious problems," said Dr. Wathen, adding that AFib can also manifest with a slower than normal heart rate.

"AFib can be felt in patients by what many describe as their heart 'skipping a beat,' by fatigue, and shortness of breath," he said. "The most troublesome outcome, obviously, is the increased risk of stroke, through the formation of blood clots due to the irregular beating."

Haun was on blood thinners for roughly a year as Dr. Wathen discussed other options

with her. She also underwent multiple electrical cardioversions, with limited success.

"We perform ablations when medications don't work well," Dr. Wathen said. "The procedure usually takes three to four hours and often takes two sessions to complete."

Dr. Wathen performed the ablation on Haun, using catheters (long, flexible tubes) inserted through veins in the groin and threaded to the heart. There, circles are either frozen or burned around certain veins that lead to the heart chamber to deaden some cells, and keep the veins from being a trigger point for AFib.

In an extremely high-tech process, CT scans and heart catheterization create a 3-D image to help cardiologists during the procedure.

"I've noticed improvements in several areas of my life since the procedure," Haun said. "What had been a persistent problem with my ankles swelling vanished almost immediately. I had no pain or problems of any kind associated with the procedure, and no recovery issues at all."

"I'm really happy with my care at Cookeville Regional and have the utmost respect and appreciation for my care with Dr. Wathen, Tennessee Heart and CRMC," she said. "They're a great team."

Firsts!

New Heart Monitor First in State

Tennessee Heart, through electrophysiologist Mark Wathen, M.D., now offers patients a new kind of heart monitor and is the first in Tennessee to do so. The new BodyGuardian Heart Monitor is a small, lightweight, wireless, non-intrusive monitor worn by the patient that delivers data from the patient via smartphone technology.

CRMC First in the UC to Use TactiCath™

CRMC is the first facility in the Upper Cumberland to use the TactiCath™ Quartz irrigated ablation catheter, a new ablation technology available for use in patients being treated for paroxysmal atrial fibrillation.

"If medications don't work well for the patient, it often requires cardiac ablation, a minimally invasive procedure that can correct heart rhythm problems," said Dr. Wathen. "This new TactiCath technology improves the efficiency and effectiveness of the procedure. As the only electrophysiology lab between Nashville and Knoxville, we are committed to providing the most effective treatment solutions for heart rhythm problems."

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