



More walks...
and long talks.

Our cardiac and vascular clinic offers comprehensive, experienced and patient-centered care so you can get back to what matters most: Living your life.

WHAT IS AORTIC INSUFFICIENCY?

Aortic insufficiency, also called aortic regurgitation, happens when one of the valves in the heart, the aortic valve, is leaky. The heart valves normally work like doors that swing one way and allow blood to flow forward but not back. When the aortic valve does not close properly, blood can leak backward

from the aorta (a large blood vessel that carries blood to the rest of your body) into the heart. Over time, this can lead to other heart problems. Aortic insufficiency is usually caused by a diseased or damaged valve or a widening of the first part of the aorta that is closest to the valve.

WHO IS AT RISK FOR AORTIC INSUFFICIENCY?

There are certain health conditions that can increase your chances of developing aortic insufficiency. The most common ones include:

- Older age
- History of infections that can affect the heart, such as rheumatic fever or endocarditis
- Certain heart conditions present at birth, such as bicuspid aortic valve
- Certain inflammatory or genetic diseases, including Marfan's syndrome and lupus

WHAT ARE SYMPTOMS OF AORTIC INSUFFICIENCY?

Early in the disease, most people do not have any symptoms. Aortic insufficiency is usually found when your doctor hears an abnormal heart sound with a stethoscope during an exam. As aortic insufficiency gets worse, you may experience shortness of breath, chest pain, fatigue, fainting or palpitations

(pounding, racing or skipping heartbeats). You should let your doctor know if you experience any of these symptoms.

WHAT ARE SOME COMPLICATIONS OF AORTIC INSUFFICIENCY?

Complications of aortic insufficiency include:

- Heart failure
- Abnormal heart rhythm



WHAT ARE SOME OF THE TESTS FOR AORTIC INSUFFICIENCY?

Tests for aortic insufficiency include:

- **Echocardiogram** - This is an ultrasound of your heart and allows your doctor to see the chambers and the valves of your heart and how well it is squeezing. This may be repeated over time to see if your aortic insufficiency is changing.
- **Cardiac catheterization** - This is done to get more detailed measurements of your heart if your aortic insufficiency becomes severe and your valve needs to be replaced. A small tube is put into a blood vessel in your arm or leg and is moved up to your heart. Your doctor will then take measurements of the blood pressure and flow within your heart. They may also put dye into the tube to look for any narrowing or blockages in the arteries of your heart.

HOW IS AORTIC INSUFFICIENCY TREATED?

Treatment depends on how severe your aortic insufficiency is, what is causing it and if you have symptoms or not. Your doctor will see you regularly to monitor your condition. If you are symptomatic and have severe aortic insufficiency, you may need a procedure to replace your valve. Your doctor will discuss the risk and benefits of each option. Treatments include:

- **Surgery** - The surgeon will remove your leaky valve and replace it with a new one. This new valve could be made of metal or tissue from a pig or cow.
- **Minimally invasive procedures** - These are done through a small tube inserted into a blood vessel in your arm or leg or through a tiny incision in your chest.
- **Transcatheter aortic valve replacement (TAVR) or transcatheter aortic valve implantation (TAVI)** - Involve placement of a new valve without removing your original valve.



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