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Gastrointestinal bleeding with continuous flow assist devices

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Continuous flow left ventricular assist devices (LVADs) have become an integral part of advanced heart failure care. Gastrointestinal bleeding (GIB) is one of the major sources of morbidity after LVAD implantation. The incidence of GIB ranges from 15% to 50% in various studies. The mechanisms of GIB include acquired von Willebrand's disease impaired platelet aggregation, GI tract angiodysplasia, anticoagulation therapy, low pulsatility continuous flow devices, previous history of GIB and age. Other contributing factors to GIB are under active investigation.

Management of GIB in these patients involves transfusions, GI evaluation with upper and lower GI tract endoscopy, cauterization of AV malformations, decreasing speed of device to increase pulsatility and octreotide therapy.

Future studies will focus on understanding of the hematologic abnormalities associated with continuous flow LVADs, use of novel anticoagulation and other therapies, and risk stratification of LVAD patients prone to GIB and balancing antithrombotic regimens.

Biography

Geetha Bhat, Ph.D., M.D., F.A.C.C., Medical Director of The Center for Heart Transplant and Assist Devices at Advocate Christ Medical Center and Professor of Medicine at UIC, is a renowned heart failure, assist device and transplant cardiologist with vast experience in research, education, and management of end-stage cardiac disease. Bhat has given multiple presentations at major medical meetings of the American Heart Association and American College of Cardiology. She has been the principal investigator of landmark clinical trials in heart failure, device and transplantation and is the recipient of many honors and research grants including prestigiuous NIH grants.

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