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VERONA HOME HEALTH PATIENT MAKES HEART HISTORY

TUPELO, Miss.—Jackie Kirkman of Verona has a special place in her heart for North Mississippi Medical Center’s doctors and Home Health staff... and her heart is quite a piece of work.

Kirkman, now 43, was first diagnosed with congestive heart failure almost 11 years ago. “I was constantly coughing and short of breath,” said Kirkman, who was working as an assistant teacher. “I had a hard time functioning at work.”

Initially, medicine would keep the congestive heart failure at bay, but over the years her condition steadily declined. Several years ago NMMC electrophysiologist Karl Crossen, M.D., implanted an internal cardioverter defibrillator, a device that monitors the heart and shocks it back into rhythm when necessary. Her prognosis was so grim in 2005 that she was placed on Hospice care—but she refused to give up.

She has been in and out of the hospital numerous times in recent years—and her family was even called in to say goodbye in September 2009. Still Kirkman kept fighting. In October of last year she was referred to NMMC’s Home Health Agency, and Tonya Mathis, RN, was assigned to her.

Realizing how quickly her condition was deteriorating, Dr. Crossen referred Kirkman to Charles Moore, M.D., an associate professor of medicine at the University of Mississippi Medical Center in Jackson, to be evaluated for a heart transplant. “Jackie couldn’t get out of bed without being short of breath,” Dr. Crossen said. “She was alive but couldn’t function. She really had no quality of life.”

Although her initial appointment was in Jackson, all other visits with Dr. Moore have taken place at Cardiology Associates of North Mississippi. Through a partnership between UMMC and CANM, Dr. Moore comes to Tupelo once a month to evaluate potential transplant patients and follow up with current ones.

After an extensive workup, Kirkman was placed on the transplant list and prescribed Milrinone, an intravenous (IV) medication that helps the heart work more effectively and improves blood circulation. Because of its potentially fatal side effects, usually Milrinone is given in a hospital’s Intensive Care Unit. Thanks to teamwork between UMMC and NMMC Home

Health—and special training for Mathis, her nurse—Kirkman became the first to receive this life-sustaining drug at home in March.

Dr. Crossen and CANM nurse practitioner Chris Bell worked closely with Dr. Moore's team and Home Health to monitor Kirkman's condition. Eventually the medication wasn't enough, and Kirkman was seriously ill when she was hospitalized at UMMC on Aug. 3. Her body was bloated from more than 40 pounds of excess fluid, her kidneys were shutting down, and her skin was discolored from poor blood circulation. Her heart was so weak that she couldn't walk without assistance, and she spoke in a barely audible whisper.

As a last resort, on Aug. 11 Kirkman became the first person in Mississippi to receive an implantable left ventricular assist device (LVAD). Called a bridge to transplantation, the LVAD is a mechanical blood pump that assumes some of the work for the heart. It's reserved for end-stage heart failure patients who have run out of other lifesaving options. Kirkman's LVAD is attached to her heart, and an external tube connects to a battery that is stored in a "fanny pack" she wears around her waist.

Detailed planning with a multidisciplinary team is central to the success of the LVAD program. Mathis was trained on the device, as were Home Health nurses Jan Starling and Angela Coggins. EMS and Emergency Department staff were also taught how to care for Kirkman, as LVAD patients don't respond to traditional lifesaving measures, such as chest compressions, because of the continuous heart pump.

"After the LVAD, Jackie has a better likelihood of withstanding a transplant," Dr. Crossen said. "But the Food and Drug Administration has approved the device as a destination therapy, meaning that it can improve a patient's quality of life even if she never gets a heart transplant. Realistically, it might buy someone several more years, even without a transplant."

It has certainly worked for Kirkman, who says she feels better now than she did before her diagnosis 11 years ago. "When I met her, Jackie's goal was to see her daughter Jacques graduate from high school," Mathis said. Jacques graduated in May, and now her mother's goal is to make up for lost time. "We used to go to football games and basketball games together—that was our thing," said Kirkman, already planning similar outings.

She is quick to thank God and everyone involved with her care—both in Jackson and in Tupelo. "I was just strong-willed and determined," Kirkman said of all the setbacks along the way.

"You are just hard-headed," quipped Mathis, "that's the word for you."

Cutline:

NMMC Home Health patient Jackie Kirkman (center) and her fiancé Andy Elzie Jr. say Tonya Mathis, RN, is part of their family now.

Sidebar:

Within days of accepting Kirkman on home Milrinone therapy, 52-year-old Aussie Hubbard Jr., also of Verona, became NMMC Home Health's second such patient. "Mr. Hubbard was sent to us as a last ditch effort," said his nurse, Tonya Mathis, RN. "Milrinone therapy requires extensive teaching and monitoring by the patient, his caregiver and the Home Health nurse. I was welcomed with warmth, but I knew they were watching every move I made, as well they should have been."

Mathis said Hubbard's mother was diligent in assessing critical measures such as his weight, blood sugar, shortness of breath and appetite. It all paid off in June when Hubbard received a heart transplant at UMMC. He has since been discharged from NMMC's Home Health and is enjoying life to the fullest.