



Imaging



**Brighton and Sussex
University Hospitals**
NHS Trust

Angioplasty

Information for patients

What is an Angioplasty?

An Angioplasty is a way of opening up a blockage or narrowing in an artery without having surgery. A fine plastic tube, called a catheter, is inserted through a blockage or narrowing of an artery and a special balloon on the catheter is then inflated to open up the vessel and allow blood to flow through.

Why do I need an Angioplasty?

Your doctors know that there is be a problem with part of your circulation to your legs. You may be having symptoms because of this, such as pain, not being able to walk very far or ulcers on your feet. You may have had an MRI scan or Doppler study which has demonstrated this, and in your case it has been decided that an Angioplasty is the best way of proceeding.

Who has made the decision?

The consultant in charge of your case, and the Interventional Radiologist (the doctor who specialises in Imaging Procedures) who will be carrying out the Angioplasty will have discussed the situation, and feel that this is the best option. However, you will also have the opportunity for your opinion to be taken into account and if, after discussion with your doctors, you do not want the Angioplasty carried out, you can then decide against it.

Who will be doing the Angioplasty?

A specialist doctor called a Interventional Radiologist. Interventional Radiologists have are experts in using X-ray equipment and in microsurgical techniques.

Where will the procedure take place?

In the Imaging Department, in a special Interventional Radiology (IR) procedure room which is designed for these specialised procedures. You will be checked into the department by a nurse, who will ask some medical questions and fill out some paperwork. The Interventional Radiologist will then come and talk to you about the procedure. You will have the opportunity to ask any questions or raise any concerns, and only if you are happy to continue with the angioplasty will you be asked to sign the consent form.

What happens during the Angioplasty?

It is performed in the Interventional Radiology (IR) procedure room.

- You will lie on a special x-ray table on your back and be covered with sterile drapes.
- Your groin area will be cleaned with an antiseptic solution. Local anaesthetic will be injected to numb the groin and stop you feeling pain.
- When the groin is numb a needle will be placed into the artery in your groin. A guide-wire is then placed through the needle into the artery and the needle withdrawn.
- A fine tube is then placed over the wire and positioned in the artery.
- A catheter is placed in the artery into the area of interest and x-ray dye injected. This is when the pictures are taken.

- Once the radiologist is satisfied that he/she has identified the area that needs to be treated, an angioplasty balloon will be placed over the guide wire through the narrowing and inflated for a few minutes. The balloon is then deflated and removed and x-ray dye is injected again to check the result. Sometimes the balloon will need to be inserted a few times to get the best result.
- If this doesn't work a stent may be used. A stent is a wire mesh tube which stays in the artery if the artery has not responded to balloon treatment.
- Once the radiologist is satisfied that the procedure has been satisfactorily performed the catheter tube is removed and the radiologist will put a special stitch in your groin area to close the puncture site. This allows you to get back on your feet sooner.

How do I prepare for an Angioplasty?

To prepare for the procedure you will need to make sure you do the following:

You will need to have a blood test before your procedure.

Please let us know if you are taking any **antiplatelet medicines** (for example, Aspirin, Clopidogrel) or any **medicines that thin the blood** (for example, Warfarin), as these may need to be withheld temporarily before the procedure. Call the IR department for advice as soon as you get your appointment letter on **01273 696955 Ext. 4240** and ask to speak to one of the IR nursing team.

If you are taking **medicines for diabetes** (for example metformin) or using insulin, then these may need to be altered around the time of the procedure. Call the IR department on the numbers above for advice as soon as you get your appointment letter.

You cannot eat or drink anything (except water) for four hours before your procedure.

You can drink water up to two hours before your procedure.

You will need a responsible adult to take you home.

Will it hurt?

When the local anaesthetic is injected it will sting for a moment but the stinging will wear off leaving that area of skin numb. After this, the procedure should not be painful: however, if you feel discomfort there will be a nurse with you who will be able to arrange for further anaesthetic or sedation, if it is required. After the contrast medium (x-ray dye) is injected you will get a warm sensation. You will be awake for the procedure and you will be able to tell the nurse or radiologist if you feel any pain or are uncomfortable in any other way.

How long will it take?

Whilst every patient and every patient's situation is different we allow 1 to 2 hours for this procedure.

What happens after the examination?

You will be recovered in our recovery area on a trolley and will stay in the department for 4 hours after the procedure or return to the ward if you are an inpatient. You will need to lie flat for 1 hour after the procedure. The nurses will carry out routine observations, blood pressure, pulse and monitoring of the skin entry point, to ensure there is no bleeding. We will provide you with something to eat and drink

if required after the Angioplasty. If you are a day case patient please arrange for someone to pick you up and take you home and remain with you for 24 hours following the procedure, as you **must not drive or use public transport or be at home alone.**

What are the risks?

Despite the possible complications the procedure is normally very safe. However, the following side effects may occur:

Bruising in the groin area depending upon where the catheter was inserted. This is very rare and usually resolves within a few days.

Some damage to the artery, caused by the catheter (this is very rare). This may need to be treated by surgery or another radiological procedure.

There is a small risk of bleeding after the angiogram, that may include bleeding under the skin (haematoma), this is why there is a period of recovery after the procedure.

In some the artery can leak around the access site which can result in a pseudoaneurysm (a blood filled sac) that may require further treatment.

The radiologist will discuss all risks with you during the consenting process and you can decide if you want to proceed during that time.

What are the benefits?

The recovery time is less than surgery.

It can help treat the symptoms you are experiencing.

Are there any alternatives?

If you are unable to tolerate this procedure your referring doctor will be informed and he/she can decide if an alternate examination is appropriate for you.

After the procedure

Typically, patients are observed for up to 4 hours and go home the same day.

You will need to rest for the remainder of the day, and possibly the next day depending on your recovery. You can then resume your normal activities but should avoid heavy lifting for 48 hours.

You will need to have a responsible adult to take you home and be with you overnight.

Continue with your normal medication as prescribed, unless otherwise advised.

If you are having some mild pain you can take over-the-counter painkillers (follow the instructions on the packet).

Do not drive for 24 hours after the procedure.

The results will be sent to your referring consultant and also discussed with you on the day of the procedure by the Radiologist.

If you feel you need urgent medical attention or are worried about anything please contact the IR department Monday - Friday 9am - 5pm, your GP or go to your nearest A&E department.

What should I do if the puncture site starts to bleed?

- Lie down, and put your fingers on the puncture site and press firmly.
- Call 999
- Tell them what you have had an angioplasty
- Constant pressure needs to be kept on the puncture site by you or someone with you
- We will give you this information before you leave the department.

Finally

Some of your questions should have been answered by this leaflet but remember that this is only a starting point for discussion about your treatment with the team looking after you.

Make sure you are satisfied that you have received enough information about the procedure before you sign the consent form.

**Interventional Radiology:
01273 696955 Ext. 4240**

© Brighton and Sussex University Hospitals NHS Trust

Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

Ref number: 850

Publication Date: February 2018

Review Date: February 2020

