Gateshead Health NHS
NHS Foundation Trust

IL35

Information for patients who require an Angiogram or Angioplasty

Why do I need this Investigation?

You may have already experienced pain in your calf when walking or had pain at rest when lying in bed. This is because the blood vessels in your leg have become narrowed, Your arteries are normally smooth and unobstructed on the inside but they can become blocked through a process called atherosclerosis, which means hardening of the arteries. As you age, a sticky substance called plaque can build up in the walls of your arteries. Cholesterol, calcium, and fibrous tissue make up the plaque, and smoking makes it develop very quickly. As more plaque builds up, your arteries can narrow and stiffen. Eventually, as the process progresses, your blood vessels can no longer supply the oxygen demands of your organs or muscles and symptoms may develop. An angiogram is performed to establish the position of blockages and an angioplasty is performed to expand the narrowed vessels

How do I prepare for the investigation?

Your Radiologist or radiology nurse will talk to you about what investigation is and the risks and benefits of having the investigation. You will attend the pre assessment clinic to establish your general health and to check your blood to make sure your blood is not to thin and that your kidneys are functioning correctly and a nurse will talk to you about the investigation.

It is very important that you stop smoking advice can be given to you at the pre assessment clinic and by your practice nurse.

What are the benefits of the Investigation

The investigation lets us find out what the cause of the pain in your leg is due to and if the symptoms you have been experiencing can be improved.

Are there any alternatives to the investigation?

A Duplex scan can be done to assess the arteries in the leg, however this is not suitable for everyone.

What happens if I decide not to have the investigation?

You will be referred back to the vascular consultant and other options discussed.

What complications can happen?

It is possible that this procedure can make the situation worse, and may lead to immediate surgery the risk of this 1-2% this could result in the loss of a limb. There is a risk the puncture site can cause bleeding internally, causing a haematoma (bruise) this occurs in 1-2% of patients**.** There is a risk that you may develop a reaction to the contrast (dye) used during the procedure and this may affect your kidneys. Also there is a rare risk that during an angioplasty plaque could break off and cause problems with the circulation further down the leg, this may lead to further surgery.
If your puncture site begins to bleed once you are home put pressure on it and contact your doctor immediately.

What happens during the Investigation?

The procedure is performed in the x-ray department. There is no special preparation for the procedure. On entering the x-ray room, a radiologist (doctor) or Radiology nurse practitioner,

radiographer (person who processes the pictures) and a nurse will greet you. You will lie on a trolley, wearing a gown which has been given to you. Please lie as still as possible during the test. The staff will ensure you are as comfortable as possible.

The area of your body to be used will b cleaned and some **local anaesthetic** will be injected into you skin. You may then feel a little pressure as the doctor places a **thin catheter** (tube) into the blood vessel. The position of this catheter can be seen on the television screen. When it is in position, the liquid (**contrast medium)** is injected through it. Blood vessels will only show up under x-ray if they contain this liquid.

As the liquid enters the body, you may feel a warm sensation. It may feel as if you are passing water, but rest assured this is only a feeling!

An **x-ray camera** is placed over you. This will take photographs as the liquid travels through the blood vessels of your body. The pictures can be seen on the video screen and will be developed as x-rays. Now it is possible to see if there are any areas where the blood vessels are blocked by clots of blood or narrowed and blocked by atheroma. If it is possible the radiologist will now replace the catheter already in position with one that has a balloon at the end. As the balloon is inflated, it squashes the atheroma and widens the vessel so allowing the blood to flow freely through it.

What happens after the Investigation?

Having removed the catheter through which the substance was injected, pressure will be applied for **10 minutes to ensure bleeding stops.**

You will be asked to lie flat for at least **3-4 hours, and possibly over night.** This is to help lessen the risk of bleeding from the small puncture site. If you need to use the toilet after this procedure, please ask for a bedpan or bottle. It is important to put pressure on your puncture site when moving, coughing, laughing or sneezing.

A nurse will monitor your puncture site regularly and take your blood pressure. If you feel **any swelling or oozing inform the nurse immediately.**

Should you find it difficult to lie flat either because of your breathing or because of pain in your leg, the nurses and doctors will try to find a way to assist you in this matter, ensuring your comfort.

You will be allowed to eat and drink after this procedure, providing the doctors do not wish to move ahead with any other procedures. It is important to drink as much as possible after this procedure to help clear the contrast medium from your system.

How soon will I be back to normal?

You may be in hospital for approximately 2 days, but the doctors will only send you home when they are pleased with your progress.

Be guided by how you feel, If you do have any concerns do not hesitate to contact your GP, or the vascular nurse specialist. Your doctor will let you know when it is time to return to work. Do not drive until you are confident about controlling your vehicle and always check with your insurance company.

Angioplasty does not stop plaque build up. If you have angioplasty, you should make changes in your lifestyle to preserve the success of your angioplasty. You should consider changes that will help lower your blood pressure and decrease the chances that plaque will affect your arteries. These changes include:

- Eating foods low in fat, cholesterol and calories
- Maintaining your ideal body weight
- Exercise, such as brisk walking, for 20 to 30 minutes at least 5 times per week
- Quitting smoking.

Where can I get more information?

The vascular nurse can be contacted on 0191 4452828 (answermachine)

Radiology preassesment can be contacted on 0191 4453260 (Monday to Friday 09.00 till 5.00.)

NHS direct on 0845 46 47

Vascular surgical society of Great Britain and Ireland at www.vascularsociety.org.uk

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