Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Having Angioplasty-Stent v12

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Having Angioplasty/Stent

Patient Information

Cardiac Catheter Laboratory

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Introduction

- You will be welcomed onto the unit by a nurse who will check your details are correct; the nurse will also record your observations.

- A gown and disposable underwear will be provided for the procedure.

- One of the doctors will see you and explain the procedure to you and ask you to sign a consent form.

- When it is time for your procedure, a member of the team will escort you to the Catheter Laboratory.

- You will be in the Catheter Laboratory for approximately 1 to 2 hours, then return to recovery for a period of 4 hours.

- If you have been advised that the procedure is from your right groin, please shave this the night before.

- Patients who take Warfarin, Sinthrome or a direct oral anticoagulant such as Rivaroxaban (Xarelto), Edoxaban (Lixiana), Apixaban (Elequis) or Dabigatran (Pradaxa) need to follow specific instructions given at the pre-admission clinic.
- **DO NOT STOP TAKING ANY OF THESE MEDICATIONS UNLESS YOU HAVE BEEN GIVEN INSTRUCTIONS TO DO SO**. If you are in any doubt, contact the Cardiac Catheter Laboratory on 01942 773392.

- **If you are a Diabetic on Metformin** – please **do not** take it on the day of your procedure. You will be advised when to restart it by the doctor or nurse after the procedure.

- **If you are on insulin,** please take as normal.

PLEASE ARRANGE YOUR TRANSPORT TO AND FROM HOSPITAL, PRIOR TO THE DAY OF YOUR TEST

Your Procedure

- You will be lying down for this test; you will be awake throughout the procedure and asked to lie flat and keep as still as possible. Initially, some ECG electrodes will be attached to your chest to record your heart rhythm. Depending on the Cardiologist, he/she will use the right groin, right arm, or right wrist as the approach route to your heart. This area will be cleaned with some iodine - this will feel cold.

- You will be covered with a sterile drape, and the procedure will be carried out under local anaesthetic, which is used to freeze the skin. After a few minutes, the area will be numb, and the test can be started. The Doctor introduces a fine flexible tube into the blood vessel; this should not be painful, but you may feel some pressure. A fine catheter will be passed through the tube and dye will be injected to outline the coronary arteries, to assess the severity of any narrowing and to assess the pumping action of the heart.
- The procedure is used to widen blocked or narrowed coronary arteries (the main blood vessels supplying the heart).

- The term "angioplasty" means using a balloon to stretch open a narrowed or blocked artery. However, most modern angioplasty procedures also involve inserting a short wire mesh tube, called a stent, into the artery during the procedure. The stent is left in place permanently to allow blood to flow more freely.

- Coronary angioplasty is sometimes known as percutaneous transluminal coronary angioplasty (PTCA). The combination of coronary angioplasty with stenting is usually referred to as percutaneous coronary intervention (PCI).

- If the tube has been introduced from your right groin, it may be possible at the end of the procedure to seal the opening in your artery by a special device called an angioseal . Alternatively, you will be taken to the recovery area where the tube in the circulation will

be removed. Pressure will be applied to stop any bleeding that may occur and to seal off the opening of the artery by natural means, which is by formation of a clot.

When a coronary angioplasty is used

- Like all organs in the body, the heart needs a constant supply of blood. This is supplied by the coronary arteries.
- In some people, these arteries can become narrowed and hardened (known as atherosclerosis), which can cause coronary heart disease.
- If the flow of blood to the heart becomes restricted, it can lead to chest pain known as angina, which is usually triggered by physical activity or stress.
- While angina can often be treated with medication, a coronary angioplasty may be required to restore the blood supply to the heart in severe cases where medication is ineffective.
- Coronary angioplasties are also often used as an emergency treatment after a heart attack.

What are the benefits of a coronary angioplasty?

In most cases, the blood flow through the coronary arteries improves after an angioplasty. Many people find their symptoms get significantly better and they're able to do more than they could before the procedure.

If you've had a heart attack, an angioplasty can increase your chances of surviving more than clot-busting medication (thrombolysis). The procedure can also reduce your chances of having another heart attack in the future.

How a coronary angioplasty is performed

A coronary angioplasty is performed using local anaesthetic, which means you'll be awake while the procedure is carried out.

A thin, flexible tube called a catheter will be inserted into one of your arteries through an incision in your groin, wrist or arm. This is guided to the affected coronary artery using an X-ray video.

When the catheter is in place, a thin wire is guided down the length of the affected coronary artery, delivering a small balloon to the affected section of artery. This is then inflated to widen the artery, squashing fatty deposits against the artery wall so blood can flow through it more freely when the deflated balloon is removed.

If a stent is being used, this will be around the balloon before it's inserted. The stent will expand when the balloon is inflated and remains in place when the balloon is deflated and removed.

A coronary angioplasty usually takes between 30 minutes and 2 hours. If you're being treated for angina, you'll normally be able to go home later the same day or the day after you have the procedure. You'll need to avoid heavy lifting, strenuous activities and driving for at least a week.

If you've been admitted to hospital following a heart attack, you may need to stay in hospital for several days after the angioplasty procedure before going home.

Contact Telephone Numbers

Cardiac Catheter Lab: 01942 773392 or 01942 773394 Monday to Friday 8am until 7pm

Cardiology Department: 01942 822445 or 01942 822845 Monday to Friday 8:30am until 4:30pm.

Patient Transport Contact Numbers

Wigan patients: 01942 482990

Out of area patients: 0800 092 4020

Please ring the Cardiac Catheter Lab or Cardiology Department to confirm you have booked your transport if required.

Please ensure you book your transport by 3pm, the day before your procedure

Cardiac Catheter Lab telephone 01942 773392 or 01942 773394

or

Cardiology Department telephone 01942 822445 or 01942 822845.

At Home

You must have somebody at home with you on the first night of your procedure. This is in case you need any help.

You will be given discharge instructions from the Cardiac Catheter Lab team. For the 48 hours following the procedure, we advise you to rest. Do not do anything strenuous i.e. lifting or hoovering, for 1 week.

If you are on Metformin, **only restart it 48hrs** after the procedure unless otherwise instructed.

Do not have a bath or shower on the evening of your angiogram - leave it to the following day.

You may eat as normal

Do not drive for 1 week after your angiogram.

If you are taking Warfarin or a direct oral anti-coagulant, you may re-start that evening unless the doctor/nurse tells you otherwise.

You may get some slight bruising around the puncture site; this is acceptable as long as it is not swollen or painful. If there is any bleeding from the puncture site, you need to apply pressure to the area and telephone immediately for an ambulance, which will take you to the nearest casualty department. The same applies if you get a large swelling or a lot of pain at the puncture site.

Acknowledgement

Coronary angioplasty and stent insertion-NHS (www.nhs.uk)



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