

Vascular Surgery

EVAR (Aortic aneurysm stenting)

1. Why do I need the operation?

The main artery (aorta) in your abdomen has stretched and weakened, forming an aneurysm. This operation is to repair the stretched section so that it will not burst (rupture). Your consultant will request a CT scan to assess whether your arteries are suitable for this type of operation. This type of aneurysm repair is less invasive than the traditional open surgery and thus carries less risk of complications. Approximately 70% of abdominal aortic aneurysms are suitable for stenting.

2. Before your operation.

To ensure you are fit for surgery, a special fitness test (CPEX) will be requested which may involve cycling on an exercise bike. If this is satisfactory you will be invited along to a pre-admission clinic which includes blood tests, chest x-ray and a heart tracing. You will be admitted into hospital either the day before or the morning of your operation.

3. Coming into hospital.

Please bring all your current medication with you. The doctor who will give you the anaesthetic and your surgeon will visit you prior to your operation. If you have any questions about the operation, please do ask.

4. The operation.

You will be taken to the anaesthetic room where you will be given your anaesthetic, and from there into theatre. While you are asleep under anaesthetic, incisions will be made in one or both groins and the stent will be inserted through this into the artery, and positioned in the aorta. Special x-rays will be taken to make sure it is in exactly the right place.



Patient Information

A small tube will be inserted into a small artery in your wrist to measure your blood pressure. A urinary catheter is usually inserted. The groin wounds are often closed with a stitch under the skin that dissolves by itself, or by clips which will need to be removed about 10 days after surgery.

5. After the operation.

When you leave the operating theatre you will either be taken to the PACU (Post Anaesthetic Care Unit, in the theatre recovery department), or to the Enhanced Care Unit so that we can keep a special eye on you overnight. After this you will return to a surgical ward.

Following this surgery, you will be able to start eating and drinking the next day. A nurse will help you to get out of bed. You should tell the nurse if you have any pain so that painkillers can be given. Most people are discharged home one or two days after surgery.

6. Going home.

Before you leave the ward nurse will explain possible arrangements for the removal of your skin clips or stitches. If dissolvable stitches have been used, it will not be necessary to have these removed.

You will be sent an appointment for an outpatient review. (Regular exercise such as a short walk combined with rest is recommended for the first few weeks after surgery, followed by a gradual return to your normal activity level. You should not drive for 4-6 weeks following surgery.

7. Complications

The wound in your groins can fill with a fluid that may discharge between your stitches, this usually settles with time. Many of the complications involved with traditional open surgery are much less likely with stenting and you will probably be able to return to normal activities more quickly.

Following this type of surgery, you will need to attend for a CT scan 4 weeks after surgery, again at 6 months and then yearly for the first 5 years. This is to check that the stent has remained in the correct position.

Patient Information

8. What can I do to help myself?

If you are a smoker, you must make a sincere and determined effort to stop completely. Continued smoking will cause further damage to your arteries and increase your chance of having a heart attack and stroke. General health measures such as reducing weight, a low fat diet and regular exercise are also important.

If you would like to discuss the information in this booklet, please contact a Vascular Nurse Specialist:

Alison Kite 024 7696 5569

Suzanne Davies, Lauren Wells & Zoe Noakes 024 7696 6914

We hope that you have found your treatment by the Vascular Services team to your satisfaction. We welcome your **comments, compliments** and **complaints** concerning the care that you have received, in order to improve our service. This can be done by contacting the Vascular Nurses as above or PALS.

If you would like this information in large print, Braille, audiocassette, video or translated into another language please telephone one of the numbers above.

Useful Contacts

Coventry Patient advice and Liaison Service (PALS): +44 (0) 800 0284203

South Warwickshire Hospital PALS : +44 (0)1926 600054

George Eliot Hospital PALS : +44 (0) 24 7686 5617

Vascular Conditions

www.vascularsociety.org.uk

www.circulationfoundation.org.uk

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