

Having an Angiogram or Angioplasty

Information for Patients

What is an angiogram?

An angiogram is a scan that uses X-rays to show a detailed picture of your blood vessels. A special dye, known as contrast medium, is injected into your artery through a small tube called a catheter. This allows the blood vessels to show up on the X-ray.

If the angiogram shows that your artery is narrowed or blocked, we may be able to offer you a further procedure, known as an **angioplasty**, to treat it there and then. If this is the case, the radiologist will discuss it with you.

What is an angioplasty?

An angioplasty is a procedure used to treat narrowed or blocked arteries. A catheter with a special balloon at the end is passed into the artery to the area with the narrowing or blockage. The balloon can then be inflated to stretch the artery and improve blood flow. Sometimes a stent can be inserted to keep the artery open. A stent is a small mesh tube that remains within the artery and becomes part of the vessel wall.

What happens during an angiogram/angiography?

The radiologist will explain the procedure and ask you to sign a consent form, if you are happy to do so. This is a good time to ask any questions you may have.

During the procedure, you will be asked to change into a hospital gown and lie on the X-ray table, usually flat on your back, with the X-ray machine above you. This is a sterile procedure and the radiologist and nurse will be wearing sterile gloves and gown. Your skin will be cleaned with an antiseptic and part of your body will be covered with sterile sheets.

A local anaesthetic injection is given to numb the skin over the artery. This may sting a little first. You will usually be awake for the procedure but if you are feeling anxious, you can discuss having some light sedation beforehand. A needle is inserted into the artery, followed by a wire and a thin plastic tube, called a catheter. The dye is then injected through the catheter and the images are taken.

What happens during an angioplasty?

If you are having an angioplasty a balloon will then be inserted through the catheter and, once the narrowing has been found, it will be inflated to open the artery.

Once the radiologist has completed the procedure the catheter will be removed and firm pressure or a small device will be applied to the injection site to reduce the risk of bleeding.

Will it hurt?

Local anaesthetic is injected into the area before we start and this may sting a little until the area goes numb. The dye can give a warm sensation as it goes in, but this should pass within minutes. There can be some discomfort when the balloon is inflated during angioplasty but, again, this shouldn't last long.

Are there any risks?

Angiography is very safe but all medical procedures have some risks or complications that can arise.

It is common to have some bruising where the needle was inserted. This should disappear in a few weeks. A larger bruise may develop which might need a small operation to drain it, but this is rare.

Occasionally there can be ongoing leakage from the injection site which forms a swelling called a false aneurysm. This can be usually be treated with an injection which will cause the blood to clot.

On very rare occasions, the material causing the blockage can dislodge when the catheter is inserted, resulting in a blockage in smaller arteries further downstream. This is called an embolus. If this happens, you may need another procedure.

The dye used can interfere with kidney function; this is normally temporary. If you are thought to be at risk of this then you may be admitted to hospital the night before your procedure for fluid therapy through a drip.

Occasionally the dye can cause a mild reaction, typically an itch. This is usually treatable with a medication. In some cases a more serious allergic reaction called anaphylaxis can cause dizziness or difficulty in breathing. This is very rare and you will be closely monitored before, during and after the procedure for any complications. You should tell a member of staff immediately if you start to feel unwell.

The possibility of these complications arising is different for each person and will be discussed with you before signing the consent form.

What happens afterwards?

You will stay lying flat for 4 hours after the procedure. For the first 24 hours after the procedure you should try to lie flat, except for short periods, such as getting up to use the toilet. We encourage you to drink plenty of fluid. You should check the wound site regularly for bleeding or bruising, and contact the ward if bleeding doesn't stop after applying firm pressure for 5 minutes.

You should not do any lifting, bending or stretching, climb stairs, have a bath/shower or do strenuous exercise for the first 48 hours after the procedure.

We would advise you not to drive for at least 3 days and after this only once you are comfortable performing an emergency stop. You should also inform your insurance company.

It would also be beneficial to stop smoking as continuing to smoke greatly reduces the chances of the procedure working which can make things worse. If you haven't stopped already, we are able to provide advice and various forms of support to help.

Keeping your Appointment

If you cannot keep your appointment, or have been given one that is unsuitable, please change it by phoning the number on your appointment letter. Your call will give someone else the chance to be seen and will help us keep waiting times to a minimum.

Cancellation

While we make every effort to avoid this where possible, there is always a risk that your operation may be cancelled at short notice. This is due to either emergency patients who require urgent surgery or other reasons which are beyond our control. We realise that this can cause distress and inconvenience, but in the event that your surgery is postponed, you will be offered a new date as soon as possible.

Public Transport and Travel Information

Bus details available from:

Lothian Buses on **0131 555 6363** www.lothianbuses.co.uk

Traveline Scotland on **08712002233** or www.travelinescotland.com

Train details available from:

National Rail Enquiries on **03457 484 950** or www.nationalrail.co.uk

Patient Transport

Patient Transport will only be made available if you have a medical/clinical need. Telephone **0300 123 1236** *calls charged at local rate up to 28 days in advance to book, making sure you have your CHI Number available. Hard of hearing or speech impaired? Use text relay: **18001-0300 123 1236*** (calls charged at local rate). To cancel patient transport, telephone **0800 389 1333** (Freephone 24 hour answer service).

Interpretation and Translation

Your GP will inform us of any interpreting requirements you have before you come to hospital and we will provide an appropriate interpreter. If you are having this procedure as an existing in patient, staff will arrange interpreting support for you in advance of this procedure. This leaflet may be made available in a larger print, Braille or your community language.