

Aorta Aneurysm Open Repair Patient Care Guide

What is an aorta aneurysm?

The aorta is the main artery leading from your heart. By means of an extensive network of branches, it supplies blood to your organs and your limbs.

As people age, it may happen that the wall of the aorta could weaken and balloon out forming an aneurysm which may rupture. This usually takes place over several years. The larger the aneurysm, the greater the risk of rupture.

For this reason, a repair of the aneurysm is done whereby the dilated portion is replaced with an graft.

The operation

The operation is done while you are asleep. The surgeon makes a cut down the middle of your abdomen. The goal of the surgeon is to replace the aneurysm with an artificial graft. If the arteries supplying your legs are also heavily calcified, you may require a cut in each groin as well, in order to restore good blood flow to your legs.

Before the operation

The following tests would have been performed:

- Chest x-ray
- Blood tests
- Electrocardiogram (ECG)
- Urine test
- You will be seen by the anesthetist

Medications

You should continue taking your normal medications. Please consult your doctor for advice if you are taking WARFARIN or HORMONE REPLACEMENT.

Belongings and valuables

Please bring your own toiletries and pyjamas. Leave any valuables at home.

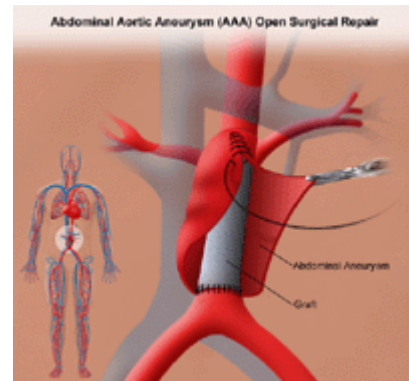
The day before surgery

You will be admitted to the ward for bowel preparation. This will involve drinking fluids only and you will also be given an enema. Nothing is to be taken orally from 10 pm at night. You will also be given lung physiotherapy.

After the operation

You will be admitted to the Intensive Care ward. You will have a tube in your mouth connecting you to a ventilator and a tube in your nose for drainage of your stomach. Over the next few days these tubes will be removed.

You will be connected to a machine that will monitor your heart rate and rhythm and your blood pressure.



You will have a catheter (a tube) in your bladder to measure your urine output.

You will have a drip or epidural catheter that contains medication for pain.

You will receive daily physiotherapy.

Diet and fluids

You will not be able to eat or drink anything until your doctor gives you permission to.

Activity

You will be resting in bed for at least three days. On day 3 the nurse will assist you to the shower. You will be encouraged to walk with the physiotherapist or nurse. By day seven or ten you will be discharged.