

## Carotid Artery Disease Patient Care Guide

### What is carotid artery disease?

The carotid arteries are the blood vessels within the neck that carry blood to the brain and other parts of the head. Normal arteries are smooth inside with no obstruction to blood flow.

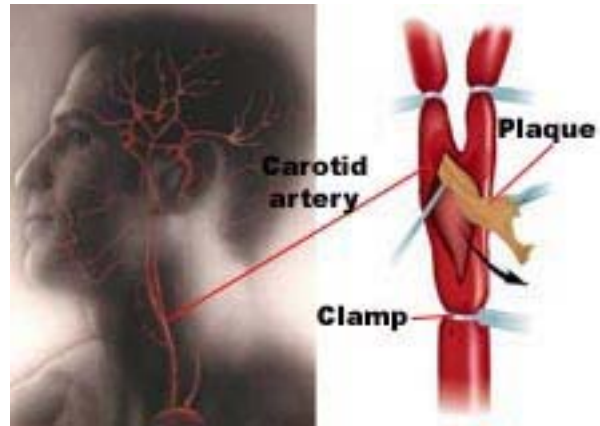
As people age, the blood flow through one or both of the carotid arteries can block due to build up of a fatty substance called plaque. This plaque causes narrowing of the arteries requiring surgical removal. Often blood flow is reduced by 2 to 3 times and in severe cases to a trickle. A blood clot or a piece of plaque may break off from this narrowed area causing a stroke or transient ischemic attack (TIA). Strokes can cause weakness or numbness of the body and face. Vision and speech can also be affected. A TIA is a stroke from which the patient recovers completely within 24 hours. It is a warning of blockages in the arteries.

### Treatment options

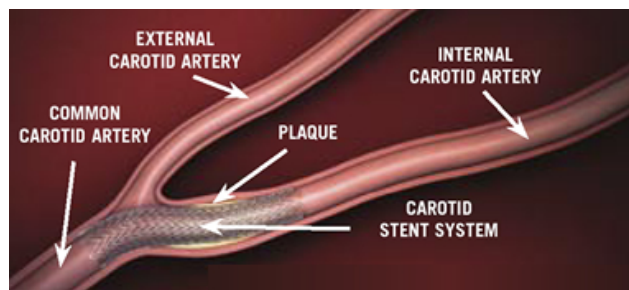
The goal of treatment is to reopen the blocked area and reduce the risk of stroke by improving blood flow to the brain. There are various treatment options. Your doctor will suggest the appropriate choice.

- Medication
  - Medication can be used alone or in conjunction with any of the other treatments. Medication does not eliminate the narrowing of the arteries, but can improve blood flow and/or prevent blood clots.

- Endarterectomy
  - The operation can be done while you are asleep or awake, the doctor will discuss this with you. A carotid endarterectomy is an operation used to remove the fatty build up (plaque) in the arteries of the neck. The surgeon makes a cut along the artery and removes the plaque from the wall of the artery. The cut in the artery is sewn up and a small plastic drainage tube is inserted.



- Stenting
  - The operation can be done while you are asleep or awake, the doctor will discuss this with you. A stent is expanded into the carotid artery wall. This stent will remain in place permanently to keep the artery open.



### **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 night before surgery**

Your nurse will advise you to have nothing to eat from 10pm at night.

### **After the operation**

#### *Surgery*

You will spend one night in the Intensive Care Unit (ICU) before returning to the ward. The nurse looking after you will:

- Connect you to a machine that will monitor your heart rate and rhythm
- Check your blood pressure often
- Shine a torch into your eyes to check your pupil responses
- Check your arm and leg movements
- Check that the tube in your arm and drain in your neck are working

#### *Stenting*

You will spend one night in the High Care Unit where the nursing staff will check the site where the catheter was inserted as well as the pulses in your feet and arms. If your groin was used in the procedure you cannot sit up until instructed to do so.

You will urinate often to get rid of the x-ray dye that was injected into your arteries. You will be instructed to drink more fluids to get rid of the dye more easily.

Before you leave the hospital, your doctor will instruct you about the pharmaceutical therapy and activity levels following the procedure. It is very important to regularly check the condition of your carotid arteries and your doctor will schedule those check-ups with you.

### **Diet and fluids**

You may eat and drink as you like.

### **Activity**

#### *Day One - Post Surgery*

- You will continue to be connected to a heart monitor

- The tube will be removed from your arm
- The drain will be removed from your neck

You will be asked to spend most of the day in bed, however, if you are well enough you may walk to the toilet.

#### *Day Two*

- You can shower and walk freely
- The dressing will be removed from your neck, cleaned and left open

#### *Day Two to Five*

- You will be discharged

### **Information for your use at home**

#### *Activity*

You may start your usual activities and drive as you feel able.

#### *Wound Care*

- Leave the wound uncovered
- Clean the wound with warm water while showering. Pat dry with a clean towel.

#### *Follow up*

An appointment will be made for you to see Dr Tudhope one week after the operation, and six weeks thereafter.