



Endovascular Aneurysm Repair Discharge Advice

This leaflet will give you information on some of the things which may be helpful when you get home after your aneurysm repair.

Helping you plan for discharge home

Preparing for home should begin as early as possible, and ideally you should start to think about this prior to your admission to hospital. Discharge home is dependent on a number of factors including your length of stay. If you do not have someone to help look after you at home it is a good idea to ask someone look after you for a while. Some patients choose to live with a member of their family for a short time.

Think about the tasks, or activities you do, which may be difficult, especially if you have a caring role for someone else. Stocking up on frozen or tinned food items means you do not need to go shopping immediately. You should also consider and make provisions for your transport home after discharge as you are unable to drive.

If there are complications with your recovery you may need to stay in hospital a little longer.

What can I expect when I get home?

Recovery times vary and it can take several weeks to feel fully 'back to normal'. This depends on your health and level of activity before surgery. Your groin wounds will be visible at first but will gradually fade over a few weeks or so. You can wash normally with mild soap and water when you have a bath or a shower. If your wounds becomes red, sore or is oozing please let your GP know as soon as possible, as this could be a sign of an infection.

Managing Pain

Following an endovascular aneurysm repair pain should be minimal. The wounds may feel sore and some mild bruising may be present. Every day painkillers (paracetamol / Ibuprofen) Should manage any discomfort. Should you feel the pain is more sever than this in your wound sites then please contact your GP or the hospital.

Medication

Whilst you are in hospital there may be some changes to your regular medication. Please check the names of medication you are being discharge home with. If you are unsure what they are for please ask a doctor looking after you before you go home.

Your doctor may recommend you take a medication to lower your cholesterol (statin) and a drug to help stop your blood being sticky (aspirin/ Clopidogrel). These are thought to help the blood flow through your arteries more easily and reduce your risk of heart attacks and stroke.

Sleeping and feeling tired

It is normal to feel tired for at least 6 to 12 weeks after your operation and you may feel low in spirits. You will probably find it beneficial to have a short sleep in the afternoon for a few weeks until your body gradually recovers from the surgery and your level of activity increases. It is good for you and your family to be aware of this and not to worry.

Diet/appetite and bowel movement

It can take a few weeks for your appetite and diet to return to normal and to regain any weight you may have lost in hospital or when at home. Try taking smaller regular meals and eat what you fancy when you want to until your appetite returns back to normal. You may find your bowel motions take time to become more regular again.

This is usual after surgery because of pain killers and poor mobility. If you have been given a laxative in hospital for constipation, ensure you take this as prescribed. If not then please contact your GP.

Mobility, hobbies and activity

Do not overdo any activities, as it should be gradually increased. It is important you listen to your body and be guided by this. Taking on light household chores, and gentle walks around your house is a good starting point in the first few days..

You may resume gentle sports or your regular social activities when you feel comfortable to do so.

Driving

For safety reasons patients are advised not to drive for at least 4 weeks after their operation. You may drive when you are able to perform an emergency stop without discomfort or any hesitation and this is usually 4-8 weeks after the operation. If you are in doubt, you should check with your GP and insurance company.

Working

When to return to work will depend on the type of job that you do. Most people need to wait 8 - 12 weeks before returning to work, and may work shorter hours for a few weeks, before increasing to your normal hours.

Your HR or Occupational Health Department will be able to advise you on a phased return to work program.

Sex

You can resume your sex life when you feel comfortable. Up to 10% of men have problems keeping an erection after this operation. It is not known what effect, if any AAA repair has on a woman's sex life. If you experience problems, your GP or consultant will be able to refer you to a specialist.

Complications and what to look out for:

Occasionally complications can occur due to the nature of the operation. Bruising and swelling around the wound may be troublesome but should take 4-6 weeks to settle. Infection can happen and usually settles with antibiotic therapy. If you think that there is something wrong with your wound at home contact your GP.

Aches and twinges may be felt for up to 6 months following surgery. This may include back ache especially if you suffered from back problems before the procedure. Occasionally there are numb patches in the skin which will improve over the following months.

Notify your GP if you have any of the following:

- Fever and/or chills
- Redness, swelling, bleeding or other drainage from the incision site
- Increase in pain around the incision
- Pain in your legs when walking
- Continued poor appetite,
- Continued upset bowel movements.

When to get urgent medical help:

Rarely complications can warrant urgent medical treatment; this may not be directly related to your surgery. Seek immediate help if you experience any of the following:

- Your stitches come apart
- Your incision is swollen, red and hot to touch or has pus coming from it.
- If you develop sudden pain or numbness in your legs that does not get better within a few hours, or your feet become very cold or turn pale or blue.
- You have severe pain in your chest, abdomen or side.
- Trouble breathing that is getting worse over time
- You suddenly feel light headed.

In case of an emergency dial 999

If you have any other concerns or questions during your recovery at home you can contact the vascular discharge helpline on; 0121 424 2879. This is an answer machine service which is listened to daily, Mon – Fri 8-4pm except bank holidays by the Vascular Clinical Nurse Specialist. Message's left after 4pm on a Friday will be answered the following Monday. One of the team will aim to call you back the same day. Make sure you leave your name, telephone number and hospital or NHS number if you know it.

Outpatient follow- up

You will be seen in the vascular clinic 4-6 weeks after your discharge. Remember to bring a list of any queries you might have.

You will have a scan to check your graft and the doctor will ask you a few questions on how you have been doing. Once you have recovered from your operation, we will follow you up at Heartlands hospital, alternatively if you have been referred from outside our area we will endeavour to get your follow up closer to home.

Looking after yourself

Aneurysms are often caused by arterial disease or atherosclerosis also known as 'hardenings of the arteries. There are certain factors that make people more at risk from atherosclerosis of peripheral vascular disease.

These include:

- Age
- Smoking
- High blood pressure
- High cholesterol
- Diabetes
- Being overweight
- Lack of exercise

Part of your medical treatment will be to reduce these risk factors:

Stop Smoking

Smoking is a major risk for arterial disease and having a fatal heart attack or stroke. It also increases the chances of getting a chest infection and slows your recovery. You can get support from your practice nurse at your GP surgery or most local chemists provide smoking cessation services.

Eat Healthily

Being overweight reduces your general mobility and can slow your recovery. Eat well, according to your appetite. Concentrate on low-fat foods and try to include your 5 portions of fruit and vegetables a day.

My notes

Use this space to record anything you wish to make a note of, such as questions you would like to ask your healthcare professional next time you meet.

General information

The vascular team would like to sincerely thank the patients and their partners who helped in producing this information booklet and the Circulation Foundation for permission to use the images shown.

Information for Patients

Additional sources of information:

<http://www.circulationfoundation.org.uk/> The Circulation Foundation provides information on all common vascular diseases and their treatments. Their aim is to provide an educational service and is not designed to offer specific medical advice.

If you have any concerns or questions after your discharge from hospital you can call the:

Vascular Discharge Helpline on 0121 424 2879

Mon-Fri 8am – 4pm except bank holidays / weekends

Outside of these hours contact your GP / walk-in centre / A+E as appropriate

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