

# Endovascular Aneurysm Repair (EVAR)

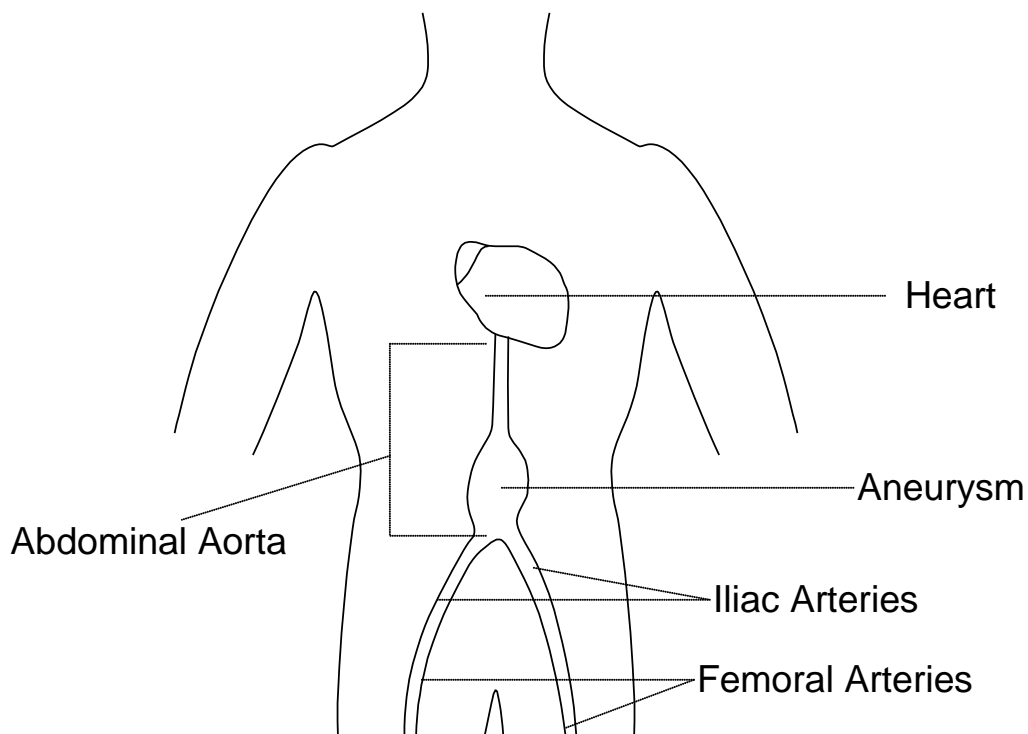
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You are about to have your abdominal aortic aneurysm repaired.

This handout gives you information about your aneurysm, what to expect from surgery, how to prepare for it and what to expect after surgery.

## What is an abdominal aortic aneurysm?

The aorta is the main pipe that carries blood from your heart to the rest of your body. An aneurysm occurs when part of this pipe has weakened and ballooned out.



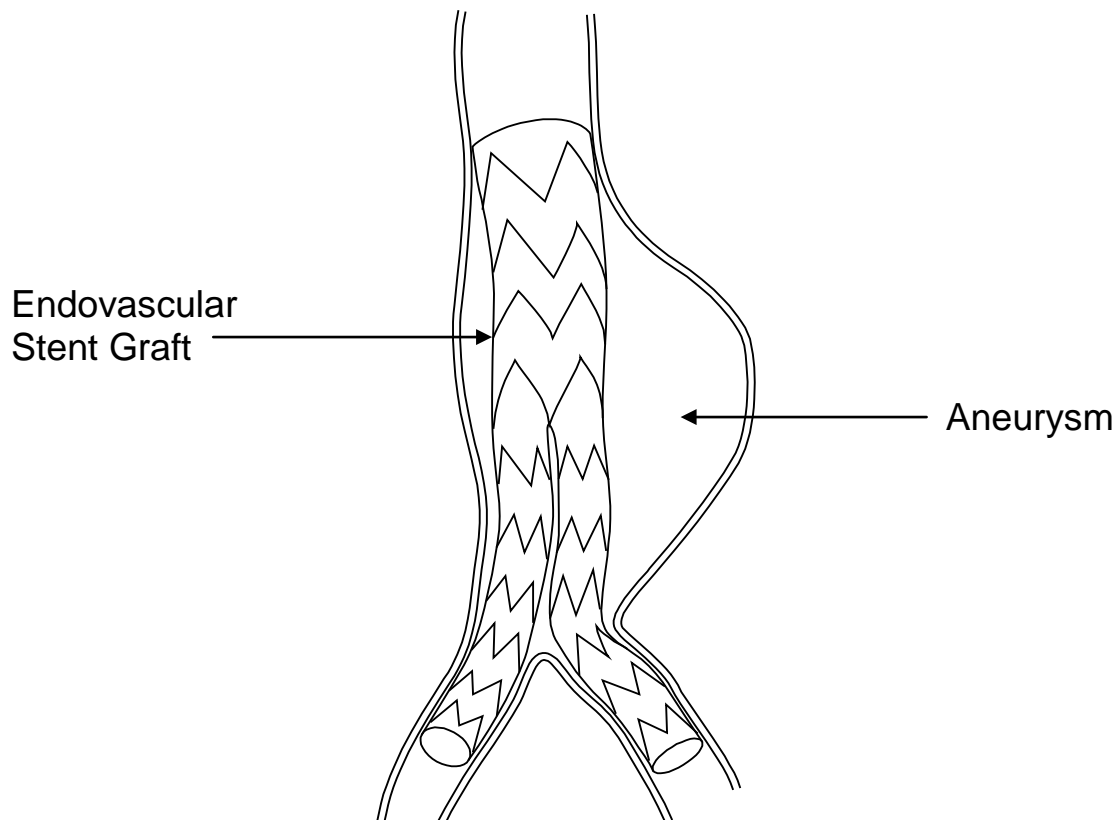
## What is an endovascular aneurysm repair?

Your surgeon has told you that your aneurysm has now reached a size that needs to be repaired. There are 2 ways to surgically repair an aneurysm. The first way is done with an incision through the middle of your abdomen. The second way is getting to the aneurysm through the inside of your arteries, called an endovascular aneurysm repair. Endo means “inside”.

You and your surgeon have decided that an endovascular aneurysm repair is the option for you.

## How is an endovascular aneurysm repair done?

During an endovascular aneurysm repair, an endovascular stent graft is placed inside of your aorta. It is a cloth-covered tube that will strengthen the weak part of your aorta.

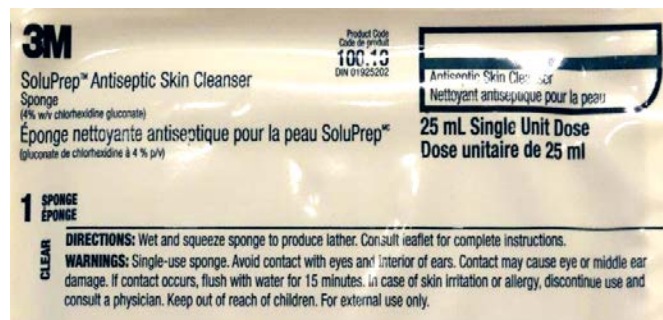


## Before your surgery

You will attend the Pre-Op Clinic at the West End Clinic, 690 Main Street West, Hamilton, before your surgery.

At this visit you will:

- See a nurse who will take your health history and go over your medications with you. **Please bring all medications in their original containers with you to this appointment.**
- Receive information about what time to come to the Hamilton General Hospital and what medications to take at home before you come in.
- You will need to buy 2 packages of chlorhexidine scrub sponges.
  - One package for the **night before** your surgery.
  - One package for the **morning of** your surgery.
- You can buy the sponges at the Hamilton General Hospital Pharmacy and the West End Urgent Care Centre, 690 Main Street West, Hamilton (same building where your Pre-op Clinic appointment was).



- Never use the sponge near your eyes.
- Once you have completed the scrub, rinse the soap solution off your body completely.
- Pat yourself dry with a clean freshly washed towel. **DO NOT** apply any powders, deodorants or lotions.
- Dress with freshly washed clothes.

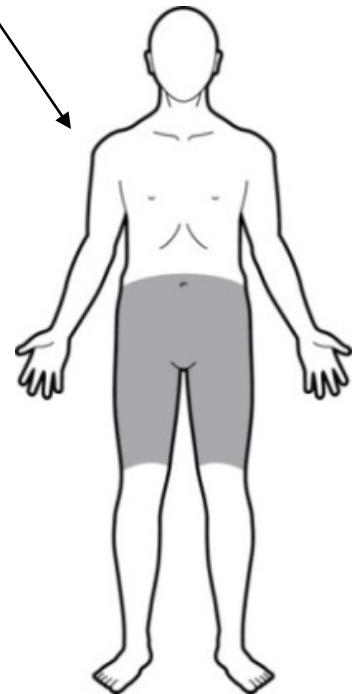


## The night before your surgery

- Wash and rinse your hair using your normal shampoo. Make sure you completely rinse the shampoo from your hair and body.
- Wash your body with regular soap. Make sure you completely rinse off the soap from your body.
- Now begin using one of the scrub sponges that you purchased.
- Wash the shaded area as shown on the diagram. Avoid scrubbing your skin too hard.

## The morning of your surgery

- Wash your body again with regular soap, as you did the night before.
- Using the 2<sup>nd</sup> scrub brush, wash the shaded area of your body again, as you did the night before.



## The day of your surgery

- Remove contact lenses, nail polish, earrings and all other jewelry.

### **All types of body jewelry and piericings must be removed:**

- all rings – including wedding rings
  - toe rings
  - earrings
  - chains
  - necklaces
  - barbells
  - watches
  - bracelets
  - spacers
  - bangles
  - labrets
  - captive bead rings
  - religious/sacred medals and objects
- Please bring a housecoat and full back, non-slip footwear with you to the hospital. Your family can bring anything else you may need after your surgery.
  - Take medications as you were directed in the Pre-Op Clinic.

When you get to the hospital, go to the Patient Registration. From there you will be taken to Same Day Surgery.

In Same Day Surgery you will be asked to change into a hospital gown. An intravenous (IV) line will be started in your arm. The IV is used to give you fluids and medications.

You will meet the anesthesiologist who is assisting with the surgery. From there you will be taken into the operating room.

### **Where can my family wait?**

Your family can wait in one of the waiting rooms outside the Operating Room on the 3rd floor.

## During your surgery

In the Operating Room you will meet the nurses who will be providing care during the surgery. They will position you on the operating table. Your skin will be cleaned with a special solution and you will be covered with special drapes and blankets. Tell the nurses if you are uncomfortable.

The surgeon will begin the surgery by giving you some local anesthetic (freezing) in both your groins. The surgeon will then make incisions to put in the graft.

The surgeon will use a device called an introducer to place the graft into your aorta to block off the aneurysm. The introducer is like a big thick IV line.

During the placement of the graft the team will take pictures with a special machine to make sure the graft is in the right place. Once this happens the introducer will be taken out and the graft will stay in your aorta.

You will also have an angiogram to make sure there are no signs of an endoleak. An endoleak is a leak in the graft where blood flows back into the aneurysm. Leaking can happen at either end of the graft or from where the legs of the graft connect onto the main body.

## After your surgery

After surgery you will be taken to the Post-Anesthetic Care Unit (PACU) for a couple of hours. From there you will be taken to Same Day Overnight or 4 West.

The nurses will take your blood pressure and check your incision sites a number of times throughout the night. They will also check the circulation in your feet to make sure that the graft has remained open.

The next day your IV will be removed. You will be given a regular meal and encouraged to walk around the unit.

You will have blood tests taken the day after surgery. Most people go home on the 1st or 2nd day after surgery.

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## When you are at home

- Go for a walk each day.
- Do not lift or push anything over 4.5 kilograms or 10 pounds for the next 2 to 3 weeks. This includes children, pets, groceries, laundry and weights.



## What are the signs of an infection?

Signs of infection are:

- redness or heat along the incision
- green, yellow or white drainage from your incision
- opening of your incision
- fever and chills or flu-like symptoms with any type of drainage from your incision



**If you have any signs of infection, call your family doctor right away or go to an Urgent Care Centre.**

**If you have any bleeding at the surgical site, go to an Emergency Department right away.**

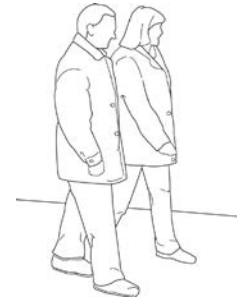
## Pain control medication

You may be given a prescription for pain control medication. Sometimes these medications cause constipation.



Tips to prevent constipation at home:

- Drink at least 1½ litres or 6 to 8 glasses of water a day. This will help you to have a soft stool.
- People with heart failure should not drink a lot of fluids. Talk to your doctor, nurse or ask to see a dietitian. They can help you find ways to prevent constipation that is safe for you.
- Exercise and activity help your bowels to keep moving. Walking is a good way to increase activity.
- Adding fibre to your diet is a good way to prevent or treat constipation. Foods that have fibre include whole grain breads and cereals, bran, fresh fruit, vegetables and legumes.



Talk to your family doctor or pharmacist if you have questions or concerns about constipation or how to treat it at home.

## When should I see my doctors for follow-up?

You will have an appointment with your surgeon in 2 weeks to review how you are feeling.

You will have a CT scan of your abdomen to check the graft about 1 to 2 months after your surgery.

You will be given an appointment with your surgeon after your CT scan. At this visit the surgeon will review the CT scan and answer any questions you may have and organize the follow-up needed.

Your surgeon will book additional ultrasounds and CT scans within 6 to 12 months, and then once a year after that.

