

## Intravenous treatment of carotid artery stenosis

You are coming for a carotid artery procedure. The procedure requires both preparation and aftercare and therefore a place is reserved for you in the ward as well. Before the procedure, you will be in the Department of Neurology (TA5) and after the procedure, you will move to the CVA monitoring ward (TF4).

### What is carotid artery stenosis and what is the purpose of this procedure?

A narrowed carotid artery (stenosis) can cause transient ischaemic attack (TIA) or permanent stroke (infarction). The aim of the procedure is to prevent stroke. The treatment does not cure damage that has already occurred. In the procedure, a mesh tube, or stent, is inserted into the area of carotid artery narrowing, which keeps the constricted vessel open.

### How to prepare for the procedure?

- You will arrive at the hospital the day before the procedure. Blood tests will be done.
- Metformin medication for diabetes does not need to be stopped before the procedure. However, the medicine may be stopped after the test if kidney function so requires. You may take other medicines as before with a small drop of water.
- **You must fast from the morning of the day of the procedure.**
- The use of tobacco and other nicotine products is prohibited 24 hours before the procedure, because it causes the blood vessels to constrict and may lead to failure of the procedure!
- Jewellery should be removed from around the affected area during the procedure.
- The examination is usually done through the femoral artery, therefore the skin around the groin fold area should not have redness or a rash, due to the risk of inflammation.
- The examination is performed with the help of X-rays, therefore it must be confirmed that you are not pregnant before the examination.
- Known contrast allergies and kidney impairment should also be reported in advance.

### How is the procedure done?

The procedure is performed by a Radiologist and two Radiographers. During imaging, you are lying still on your back on the x-ray table. The procedure is performed under local anaesthesia.

A thin plastic tube, or catheter, is inserted through the femoral artery into the vessel to be imaged, through which a contrast agent is injected. X-rays are taken at the same time. After the imaging, a very thin plastic tube is inserted into the stenosis to be treated, through which the mesh tube or stent is inserted.

Risks associated with the procedure include cerebral thrombosis and cerebral haemorrhage. As a result, paralysis or other neurological deficiency symptoms are possible.

### **How long does the procedure take?**

The procedure takes 2 to 4 hours.

### **What about after the procedure?**

- After the examination, the catheter is removed and the injection site is closed. Bed rest after the procedure is 2–7 hours. If you are unable to remain lying on your back, the nurses will help you into another position. Raising the head and lifting the legs are prohibited. After the examination, you can eat and drink normally, unless there are other restrictions.
- After the procedure, the length of hospital stay is about 1 to 2 days and return to work is possible after about three days, depending on your condition and the nature of your work.
- At home, be mindful of the injection site for about 1 week. Physical exertion, saunas and hot baths should be avoided. When you go home, you will receive more detailed aftercare instructions from the ward. Instructions arterial puncture post-treatment can be found <https://hoito-ohjeet.fi/OhjepankkiVSSHPEnglanti/Instructions%20for%20arterial%20puncture%20post-treatment.pdf>
- If you experience any problems after the procedure, contact the neurosurgical department that treated you.

### **Where do you get the results from the procedure?**

The referring outpatient clinic or ward is responsible for communicating the results of the examination to you.