

Angioplasty treatment (PCI - Percutaneous Coronary Intervention)

With an angioplasti / PCI treatment, the doctor can remove a narrowing in the coronary arteries of the heart.

Due to the narrowing in the coronary arteries, your heart gets too little oxygen. The narrowing is stretched by inflating a balloon in the coronary artery. After that, the blood can flow well again. It may be that the doctor places a stent during the dotter treatment.

How does the treatment work?

Here you will find all the important information about your treatment

Preparation

How do you prepare?

Can't get there on the set date of admission?

Please call the outpatient clinic as soon as possible, but no later than one working day before the admission date. Do you have a bad cold in the days before the operation? Do you have to cough a lot or do you have a fever? Please contact the outpatient clinic at least 24 hours in advance.

What do you take with you?

Do bring the following to the hospital:

- Reading material
- The medications you use at home (for 24 hours).

Dress code

You may wear your own comfortable clothing during treatment. It is important that you:

- can easily put on and take off the clothes, such as sports or pyjama pants and a short-sleeved t-shirt;
- Wear clean clothes;
- do not wear a bra; do not wear clothing on your upper body that contains iron
- do not wear jewelry or piercings.

What else should you pay attention to?

- after midnig you may no longer eat or drink products containing caffeine, such as coffee, cola, energy drink, chocolate.
- Do you have diabetes mellitus? On the day of the examination, simply take your medications as usual.
- Are you taking Acetosal? Don't stop here; you just take it.
- Bring all other medicines you take, unless your doctor has agreed otherwise.

- We recommend that you have someone at your home the first night after the examination or to spend the night with someone.
- Remove nail polish or artificial nails. Your nails must be visible to check the blood flow.
- Leave jewelry and other valuables at home. The hospital is not liable for damage, loss or theft of your property.

Known for thrombosis ?

If you are taking blood-thinning medications, you should first go to the Blood Collection Department before you are admitted.

Transportation home

We strongly advise you not to drive yourself for 2 days after the examination. Therefore, arrange someone who can take you home.

Resistant bacteria (BRMO)

Do you carry a resistant bacterium (e.g. MRSA or ESBL) with you? Then this can give yourself and fellow patients a risk in medical treatment.

It is therefore very important that you pass on if you:

- have been admitted or treated in the past 2 months, in a foreign healthcare institution;
- have been admitted to a hospital or nursing home in the past 2 months, where a resistant bacterium was present; has lived in an institution for asylum seekers in the past 2 months;
- have come into contact with live pigs, veal calves or broiler chickens through your profession (for example: pig, calf and poultry farmers, veterinarians, slaughterhouse employees); lives on a holding with pigs, calves or broiler chickens;
- have ever been infected with a resistant bacterium; has contact with someone who carries a resistant bacterium.

If necessary, we will investigate whether you are carrying a resistant bacterium or whether you have a COVID-19 infection. If that is the case, we take measures in the hospital to prevent the bacterium or virus from spreading.

If one of the above points applies to you, please inform the outpatient clinic or department that has agreed the examination or treatment with you.

The treatment

How does the treatment work?

Where do you report?

You report to the registration desk of the hospital. The employee of the Registration Desk will point you further to the right department.

Before treatment

You will arrive at the Hart department (D1). One family member or loved one may be present this day. There you will have an admission interview with the nurse. Furthermore, the nurse will prepare you for the examination by:

- measure your blood pressure and temperature; make a heart film (E.C.G.);
- you will receive an INFUSION needle in your arm;

- you may be given a soothing medication for the study.

Blood thinners

For this treatment, you should use blood thinners that ensure that no clots get stuck to the stent. There is a kind of protective layer over the stent. This is necessary because the stent is a foreign object. The drug is called clopidrogel (plavix) or ticagrelor (brilique). If you are given a stent, you should usually continue to use this medicine. In addition, you use Acetylsalicylic acid. Not taking these medications? Then contact your doctor.

During treatment

The angioplasty (PCI) treatment is very similar to the cardiac catheterization. Through your groin or wrist, the doctor inserts a balloon catheter through your artery to the heart, where the narrowing is in the coronary artery. This happens after a thin wire has first been brought past the narrowed area. The balloon catheter is raised over this. If the balloon is at the site of the narrowed vessel, the doctor inflates it for a few seconds. By inflating, the balloon pushes away the narrowing. The coronary artery is therefore widened in that place.

During the inflating of the balloon, it closes the coronary artery completely. This allows you to feel the typical oppressive chest pain (Angina Pectoris). We understand that this is annoying for you, but this is normal and part of the procedure. As soon as the balloon is empty again, these complaints decrease.

Sometimes the doctor uses a different technique or method instead of a balloon. If this is the case with you, the nurse will tell you during the admission interview. Often the doctor also places a stent.

The time that the treatment takes is variable. Please note that the treatment usually takes about 1 to 1 1/2 hours.

Placing a stent

The stent for the coronary artery looks like a kind of ballpoint feather. It is made of metal and serves to strengthen the vascular wall on site. Placing a stent is actually a continuation of the dotter treatment.

The doctor first presses the narrowed area apart via the catheter with a balloon and then places the stent. As a result, the coronary artery is wider apart and the vascular wall can no longer spring back. The used balloon goes out of the body again with the catheter. The stent remains in place after removing the catheter. The doctor then injects contrast liquid. On the basis of X-rays, the doctor assesses the result of the treatment. The contrast liquid can give you a warm feeling.

After treatment

What happens after treatment

In the cardiac catheterization room

Through the groin

After treatment, the cardiologist closes the puncture site of the artery with an Angio-Seal or the nurse presses the puncture site tightly for a while. After that, you will be given a firm pressure bandage that should remain in place for 4 hours and you will have to lie still in bed.

An Angio-Seal is a plug that ensures that the puncture hole of the artery in the groin is closed. You will receive a card with instructions for doctors. This card states that you should preferably not be punctured in this groin for the first 3 months after the cardiac catheterization. It takes 3 months before the Angio-Seal is dissolved. Therefore,

carry this card with you for the first 3 months. It is wise to inform your partner or other immediate family of this. If a new catheterization is needed within 3 months, it should preferably be punctured in a different place than through the groin where the Angio-Seal is placed in the artery. After 3 months, this measure is no longer necessary and you no longer have to carry the ticket with you.

On the wrist

You will receive a print band (terumo strap) on your wrist that must remain in place for at least 3 hours. You will also be given a sling for 48 hours, which you can take off at night. A terumo strap is a plastic bracelet that prints the wrist artery by injecting 13 cc of air.

On the nursing ward, the strap is emptied again.

At the Hartlounge

After the examination, return to the Heart Lounge. There the nurse makes a heart film (E.C.G.) with you. The nurse will check your blood pressure, pulse and puncture site regularly. It is good to drink extra. This allows the remains of the contrast fluid to be quickly discharged through the urine. If you get pain complaints after the treatment or do you continue to have them? Please tell the nurse.

On the wrist

Is the treatment done through your wrist? Then you stay at the Hartlounge until the terumo strap is removed. The emptying of the terumo strap takes place according to a predetermined schedule. Usually you can go home the same day.

Through the groin

Was the examination done through the groin? Then you stay in bed until the nurse removes the pressure bandage. This happens during the course of the day and depends on the time when the groin catheter is removed. After this you can get out of bed and walk around. If the checks are good, you can go home again.

In the case of emergency treatment or treatment after a heart attack, different rules apply to the discharge. If this applies to you, you will be told by the nurse or the doctor.

What are the risks?

With a dotter treatment, small, but sometimes also serious complications can occur. Usually, the research proceeds without problems.

Complications that pass again are:

- a bruise at the puncture site; abnormalities of heart rhythm;
- allergy due to the contrast fluid;
- coronary artery cramping.

Serious complications that almost never occur are:

- the formation of blood clots that can cause myocardial infarction or stroke;
- the amount of contrast fluid can cause overloading of the circulatory system. You may also get a stuffy feeling;
- damage to the blood vessel. This can cause you to get bleeding in your body; death.

Home

If you are allowed to go home, you will receive the following papers:

- The resignation letter with rules for home.
- An appointment with the cardiologist. If you are a patient of the Bernhoven hospital, the secretary will arrange an appointment for you at the cardiologist in Bernhoven.

At home

What should you think about at home?

Blood thinners after placing stent

If a stent is in place, you should take two types of blood thinners for a longer period of time, acetosal and Plavix® (clopidogrel) or ticagrelor (Brilique®). How long you have to take it is different per patient. Certainly the first 2 months you should not stop taking the blood thinners, even temporarily. This can occur if you expect or unexpectedly receive treatment, examination or surgery. It is then important that the doctor who wants to carry this out on you consults with your cardiologist about the use of the blood thinners.

Dotter treatment via inguinal artery

It is important that you spare the groin for 5 days. Therefore, follow the following advice. You may:

- do not lift too heavy; do not climb too many stairs;
- do not vacuum and do other heavy housework; do not walk long distances;
- do not cycle;
- do not drive a car for the first 2 days after the procedure;
- do not make sudden movements, such as bending down;
- do not exercise. do not shower for the first 2 days after the procedure.

It is normal for your groin to be sensitive for the first few days. A bruise may also occur. That is not bad and this disappears after a few days.

Dotter treatment via an artery in the wrist

It is important that you spare your wrist for 3 days. Therefore, follow the following advice:

- you should not lift too heavy;
- you are not allowed to drive a car for the first two days after the procedure;
- you are not allowed to exercise; after the procedure you wear your arm in a sling for two days during the day, which you can take off at night.
- It is normal for your arm to be a bit sensitive in the first few days.
- After the first week you can do your daily activities as you are used to.

What should you do in case of problems at home?

If you have problems related to the examination before your check-up appointment, call the hospital.

- During office hours, call the Cardiology outpatient clinic, telephone number 745-0023
- In urgent cases outside office hours, call the hospital at 745-0000 and ask for the Coronary Care Unit (CCU),
- If you have any questions or problems after your first check-up appointment, call your General practitioner

Do you not have a check-up appointment in the hospital? Then, call the hospital in case of problems in the first 10 days after the operation.

After 10 days you call your doctor.

Requirement

Quitting smoking, a healthy diet and getting enough exercise are the most important steps you can take. This reduces the chance of returning the complaints for which you have been treated. In addition, it is important that you continue to take your medication as agreed by your doctor. The nurse will go through your medication list with you at the time of discharge.

Do you have any complaints again?

Although the result after the dotter treatment is usually good, there is a chance that the narrowing will come back. You notice this because you again get the complaints that you had before the dotter treatment. Usually you will notice these complaints first with exercise. The complaints almost never come back when you are at rest.

Will the complaints come back?

Use the prescribed medication. Do the symptoms decrease quickly after taking the medication? Please contact your doctor the next morning (within office hours).

If the pain does not go away, contact your doctor or the GP post immediately. This usually refers you to your cardiologist. If necessary, call 912.

The chance that the complaints will come back is greatest in the first 6 months after the angioplasty treatment. After this period, the chance is very small.

Check

When do you come for a check-up?

You will be checked by the cardiologist at the outpatient clinic 4 to 6 weeks after your discharge. The appointment for this will be sent home.

Practical tips

What do you take with you during a (day) admission?

If you come to the hospital for an admission or day admission, please bring your valid ID and your patient card.

But also, for example, the medicines you use at home. Here you will find an overview of everything you need to take with you.

View your health insurance

It is your own responsibility to check whether you are insured for the care for which you come to the Curaçao Medical Center. Check your policy conditions in advance or check with your health insurer.

Source: Jeroen Bosch Hospital