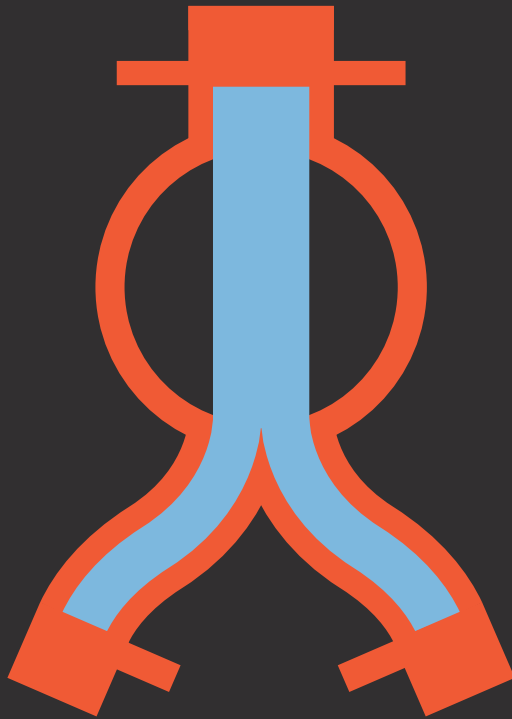


Welcome to

EVAR School



A SHORT STAY ANEURYSM REPAIR PATHWAY

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Preparing for my operation

Whilst waiting for your operation there's several things to do to help prepare yourself and ensure the best results:

- Take all your prescribed medications, including any the team have started
- Eat a healthy diet
- Try to stop smoking
- Exercise at least 3 times per week for more than 30 minutes, or every day if you can
- If you have diabetes ensure your blood sugars are well controlled
- Feeling anxious about the surgery is normal but try to keep a positive outlook and look forward to your aneurysm being treated

You can access more information about aneurysm surgery from The Circulation Foundation website:

www.imperial.ac.uk/eva

As well as looking after yourself, you must also:

- Ensure you attend all your hospital appointments
- Make sure you fully understand your operation and what will happen to you, before, during and after your procedure
- Protect yourself from COVID-19



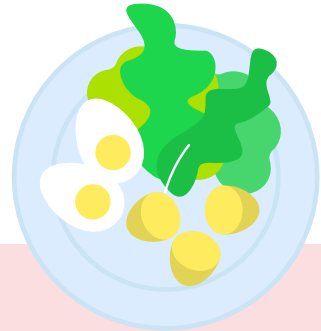
The day before admission

Making sure I am ready for my operation...

- ✓ I have had my pre-operative swabs and any blood tests I might need
- ✓ Someone will collect me after my operation or I have arranged transport
- ✓ Someone will be at home to look after me for 48hrs after my operation
- ✓ I have planned not to eat anything for at least 6 hours before to my operation
- ✓ I have planned not to drink anything for 2 hours before my operation

What does a healthy diet mean?

Nutrition is an important key to better recovery. Here are some tips to improve your diet prior to your operation:



High protein foods

Our bodies require protein for healing surgical wounds and maintaining muscle strength. The stress of surgery increases our body's need for protein. Ensure that every meal and snack contains high-quality protein, aiming to eat at least 20-30g of protein per meal and 10g per snack, up to and following your surgery.

Below are some food examples with their approximate protein content:

- 100g of chicken/beef /pork/tuna = 27g protein
- 1 large egg = 6g protein
- 250ml milk = 8g protein
- 1 slice cheese = 7g protein
- 100g tofu = 8g protein
- 2 tbsp peanut butter = 8g protein
- 240g Greek yogurt = 17g protein
- 80g cottage cheese = 15g protein
- 200g lentils = 18g protein
- Protein Bars = 7-20g per bar

How can you help reduce infection after the procedure?

Your immune system can become weaker as a result of surgical stress. Consuming foods high in omega-3 fatty acids and the amino acid arginine around the time of your surgery can help boost your immune system.

A natural source of arginine is poultry, fish, and dairy products. Omega-3s are found in fish and fish oil. Try to increase your intake of these the week before and after surgery.

Do NOT eat or drink around the time of admission



Regardless of the time you are being admitted, you must not eat or drink anything (except water) for 6 hours prior to your operation time. You may drink water up to 2 hours before your operation.

Following these instructions is vital because if there is food or liquid in your stomach during your anaesthesia, it could travel up your throat and cause lung damage.

For example if your operation is at 8 am, don't eat or drink anything except water after midnight, and stop drinking water at 6am.

Please do not chew gum or suck sweets for 2 hours before admission time.

Why does smoking matter?

Stopping smoking even a few weeks before your operation could potentially halve the complication risks, such as pneumonia, cardiac events and wound infections.



If you can't stop smoking, cut down as much as you can.

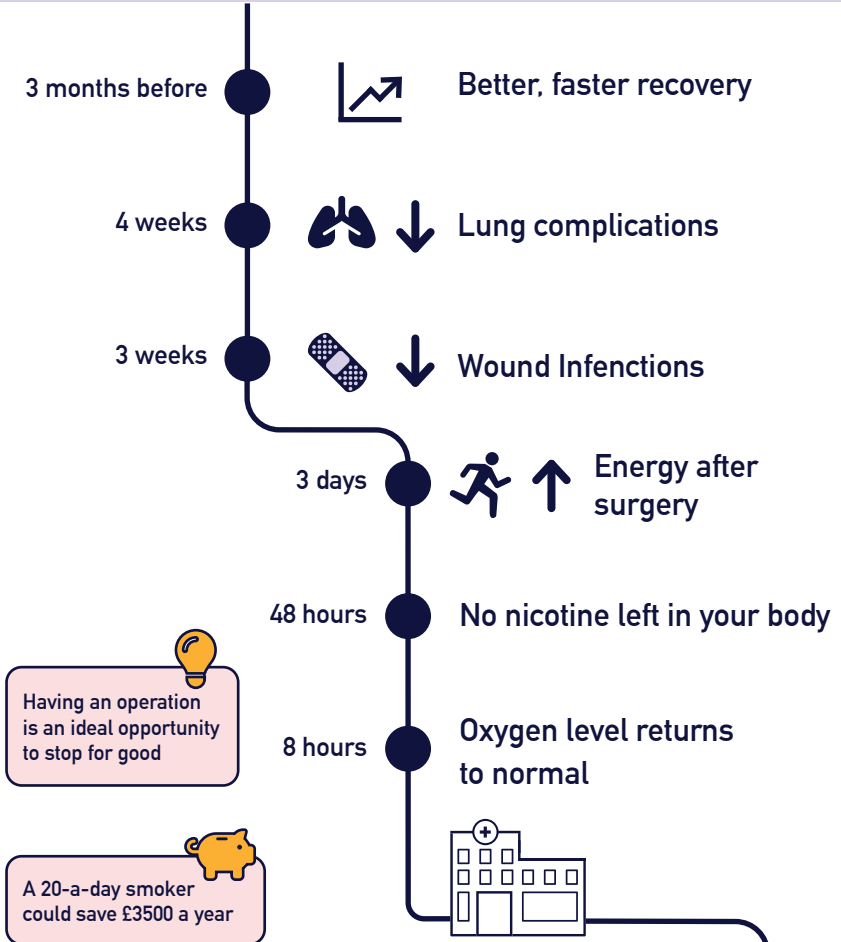
Speak to your surgical team. They can help by:

- Referring you to the local NHS Stop Smoking service
- Prescribe Nicotine Replacement Therapy (NRT).



When should I stop smoking?

Every Day Counts.



Longer term, by continuing not to smoke...

- After 1 year your risk of heart disease is halved
- After 10 years your risk of lung cancer is halved
- After 15 years your heart attack risk is equal to someone who never smoked

Why does exercise matter?

Exercising and Prehabilitation

Better fitness levels reduce complications when having an operation. This is because your body can cope better with the stress of the operation. In turn, this improves your chances of avoiding complications; allowing you to leave hospital and return to your normal quality of life more quickly. We call this prehabilitation, or prehab, for short.

Contact sports and strenuous physical activity should be avoided if you have an aortic aneurysm. Maintaining cardiovascular fitness requires a healthy lifestyle incorporating lighter weights (with more repetitions).

Start with 10 minutes of low-impact walking to gently adjust your heart rate. Avoid going out during the hottest/coldest times of the day. Be sure to rest when you need to and stay hydrated as you increase your activity levels. After warming up, try power-walking, jogging, or hiking to get a good, steady workout without overworking your heart. Exercise bikes, elliptical machines, and treadmills are also safe for AAA people.

People who have low activity levels can improve their fitness within as little as four weeks by taking regular exercise. This gives you an opportunity to get fitter before your operation and improve your chances of a better and quicker recovery after surgery.



Exercise at least 3 times per week for more than 30 minutes, or every day if you can. Your care team will tell you when you can start or restart physical activity after you have been discharged from hospital.

Respiratory exercises

Our bodies require protein for healing surgical wounds and maintaining muscle strength. The stress of surgery increases our body's need for protein. Ensure that every meal and snack contains high-quality protein, aiming to eat at least 20-30g of protein per meal and 10g per snack, up to and following your surgery.

Here is a six-step guide:

1. Sit upright in a supported chair
2. Breathe in and out normally
3. Take a slow deep breath in so that your ribs expand sideways and your lungs fill up with air and then exhale
4. Take a slow deep breath in and expand your lungs, hold that breath for three seconds and then slowly exhale
5. Repeat three times
6. If you feel dizzy or tired return to breathing in and out normally

Practice these respiratory exercises every two hours daily before your operation. After your operation you should practice them every one to two hours.

On the day of my operation

You will be asked to arrive at a certain time, depending if your operation is scheduled for the morning or the afternoon.

Before Leaving Home

- Have a bath or shower: This will clean your skin and reduce the risk of infection.
- Do not shave anywhere near the site of surgery.
- Remove jewellery: If you cannot remove your jewellery, it will be covered with tape to prevent damage to it or to your skin.
- Wear warm clothing.
- Take your medications: Unless you have been advised otherwise, and bring your medicines with you in their original labeled containers.
- Leave plenty of time to get to hospital.

Arrival

Arrive at the hospital and go straight to the Surgical Admissions Lounge, sometimes called Theatre Admissions Unit (TAU). At the admissions area, a receptionist will check your details. You will be asked to wait in the waiting area until the nurse calls you through. Please be aware that most units only allow one accompanying visitor.

Before surgery, you will meet with your surgeon and anaesthetist and sign/check your consent form.

Remember to ask the team any questions you may have along the way...



Transfer to Theatre

Usually the nursing staff will walk you to theatre if you are able to do so. Our staff will take you to the theatre either in a wheelchair or on a bed/trolley if you are unable to walk. You can wear your glasses, hearing aids, and dentures until you are in the anaesthetic room, but contact lenses should be removed beforehand.

The same question may be asked repeatedly, such as confirming your name and date of birth. Don't worry; it's just a safety check to make sure all your treatment information is correct.



The Procedure

Your EVAR procedure is likely to take 2 to 4 hours.

The area of your groin where the delivery catheter and stent are introduced will be cleaned and shaved. You will be given either a local anaesthetic (to numb the area) or a general anaesthetic (which will put you to sleep during the surgery).

After the anaesthetic has taken effect, the surgeon will make a small incision or puncture on both sides of your groin. Using X-rays as a guide, the surgeon will locate the aneurysm and pass the catheter through your iliac artery to the aneurysm site in your abdominal aorta.

Once in place, the stent graft is slowly released from the delivery catheter into the aorta. As the stent graft is released, it expands to fit into the aorta both above and below the aneurysm. The delivery catheter is then withdrawn and removed, leaving the stent graft in place within the aorta. Depending on the shape and size of your aortic aneurysm, additional stent grafts may be placed to ensure that the aneurysm is completely excluded from normal blood flow.

Into Recovery

Following surgery, you will be transferred to a recovery area in theatre. If you have had punctures to both groins, you will need to lie flat for 4 to 6 hours to allow the leg wounds to begin healing. Although you will be offered pain relief, many patients do find this initial recovery period uncomfortable.

Transfer to the Ward

After you have successfully recovered you will be transferred to the vascular ward. Here you will be encouraged to eat and drink and mobilise early. This is important as it will help prevent chest infections and blood clots in your legs. At this stage, you will be encouraged to achieve your post-operative goals. It is quite normal to experience short-term side-effects of the operation, which may include:

- Numbness of the groin and legs
- Leg pain or throbbing
- Nausea and/or vomiting
- Fever
- Constipation

Remember to ask the team if you are requiring more medication for pain and/or nausea.



My post-operative recovery goals



Every hour after your operation tick off the steps as you complete them



Every time you reach a lung, practice your breathing exercises!

What do I do if I have not achieved my goal?

If you are unsure about what to do, have not managed to achieve your next goal or have any other concerns speak to the nurse looking after you.





My first 48hrs at home



In the first couple of days after your operation it is common to feel tired and a little sore where your surgical wounds are.

For you to recover quickly remember to:

- Take all your prescribed medications, including any the team have started and regular analgesia to ensure you are pain free.
- Make sure you get a good night's sleep.
- Get up, be active and exercise as much as comfort allows.
- Take a shower the day after you get home - leave the dressings on whilst you wash, dry the wound and then replace them with clean dry dressings straight afterwards.

Unless told otherwise, your doctors will see you in clinic in 6-8 weeks time with a scan of your aorta to see how you are getting on.

Common Concerns - What should I do?

- **Stitches** - your stitches will usually dissolve so there is no need to get them removed but do ask your surgeon
- **Wounds** - your surgical wound may be a little bruised, which is entirely normal. If it becomes angry, red and inflamed, or it starts to discharge fluid then contact the team as this could be a sign of infection.
- **Pain** - it is common to feel sore around your surgical wounds so make sure you are taking regular pain killers.

When should you attend A&E?



If any of the following occur, then attend A&E immediately

- Sudden onset back or abdominal pain
- New painful swelling of the groin
- Bleeding from a groin
- Sudden pain, coldness, loss of feeling or weakness of a leg

Consult your surgical team if you are struggling with anything after your operation, especially if you are having difficulty with mobilising.



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