

Vascular & Interventional Radiology Queensland

# Angioplasty and stenting

Patient information

#### What is it?

Arteries throughout your body may become blocked over time due to a number of factors, including smoking, diabetes, high blood pressure, high cholesterol and obesity. This reduces blood flow to tissues and organs.

Angioplasty involves the mechanical dilation of narrowed or blocked arteries with a balloon catheter (thin plastic tube with an elongated inflatable balloon at its tip) to restore blood flow through the artery.

Stenting is an adjunctive technique where the artery is held open with a stent (metal mesh tube). The stent is a permanent implant that is positioned at the region of blockage and acts as a mechanical scaffold to support the vessel wall and keep it open.

### Who is it for?

This procedure may be beneficial to you if you suffer from leg pain when walking (intermittent claudication) or if you have tissue loss/ulceration in the legs due to blocked arteries. This procedure can also be helpful for people who have narrowed arteries that supply the kidneys, which can lead to high blood pressure that it difficult to control with medication.

## How is it done?

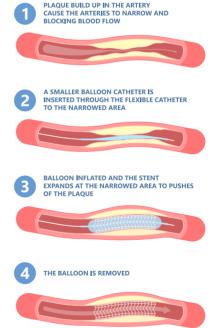
This procedure may be performed under sedation or general anaesthetic in an operating room with specialised medical imaging equipment. Your interventional radiologist will pass a small tube into the artery of your groin or wrist, navigating the tube into the target artery using x-ray guidance. Contrast (x-ray dye) is then injected, and x-rays are taken as the contrast pass through the vessels, defining the anatomy of the vessel. A thin wire is passed through the narrowed or blocked vessel over which a balloon catheter is passed, which is then used to open up the narrowed segment. In some cases, balloon angioplasty is enough to keep the vessel open, however in other, it is necessary to insert a stent to keep the artery open.

## What are the risks?

It is important to discuss the risks and complications of this procedure with your interventional radiologist in full, but some of the risk associated with this procedure include:

- bleeding
- damage to the artery wall (dissection)

- clotting of the artery at the treatment site or further away



#### Follow up

You will receive a call in the first few days after your procedure from our clinic nurse manager. You will also

have a scan arranged for about 4-6 weeks after your procedure after which you will see your radiologist in clinic.

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