

# Getting Ready for and Recovering From Abdominal Vascular Surgery

# Abdominal Vascular Surgery

**Island Health Surgery Resources** 



Printing number: PS-00002 Rev. Surgical Services, Island Health Date: September 2024 Page 1 of 20

#### **About This Booklet**

This booklet was developed with input from patients, doctors and healthcare providers. It provides specific information to help you prepare for your esophagectomy surgery and recovery.

Please read this booklet as soon as you get it!

If your surgeon or nurse gives you information that is different from what is in this booklet, please follow their directions.

This booklet is meant to be read with the *Getting Ready for and Recovering From Surgery* booklet, which has general information to help you get ready for your surgery and recovery. It is important that you read both booklets. You can find copies by

- asking your surgeon's office, or
- going to Island Health's Getting Ready for Surgery site:
   <a href="https://www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery">https://www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery</a>

#### **Help Your Care Team Help You!**

Share this booklet with your care team so they know about your plans to recover and get home as soon as possible.

Please note that the information in this booklet is current as of the date printed on it.

-Surgical Services, Island Health



# **About Abdominal Vascular Surgery**

This guide is for adults having an abdominal aneurysm (AAA) repair, aorta bifemoral graft(s) or aorta iliac graft(s) at the Royal Jubilee Hospital in Victoria.

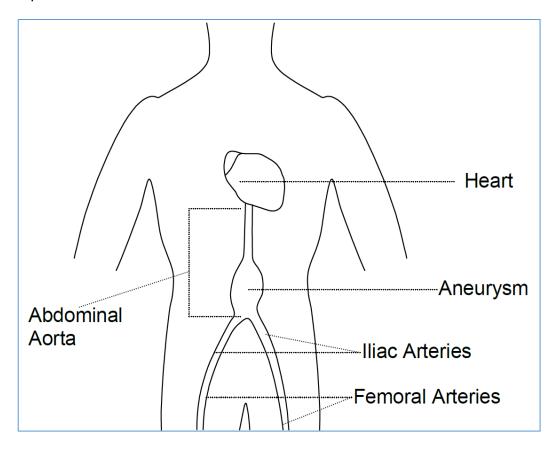
Your likely length of hospital stay is 5-7 days. You may go home earlier or later, depending on your recovery.

Surgery and Discharge Date Surgery date:
Possible discharge date: Time: <u>9 a.m.</u>
Who Will Pick Me up From Hospital  Name:
Phone number:
Who Will Care for Me at Home  Name:
Phone number:
Pharmacy
Name and address of pharmacy:
Pharmacy fax number:
Special concerns that might present a barrier to my discharge home

#### **About Abdominal Aortic Aneurysm Repairs**

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

Your surgeon has told you that your aneurysm has now reached a size it needs to be repaired.



#### How an Open Abdominal Aortic Aneurysm Repair Is Done

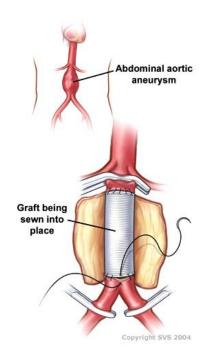
You will be given a general anesthetic that will put you to sleep during the surgery. You will also receive an epidural catheter. This is a thin tube placed into a small space in your back that will deliver pain medication. This will also be used to keep you comfortable after surgery.

During the surgery, the doctor makes an incision (cut) in your abdomen in order to see the aneurysm. Clamps are placed above and below the aneurysm to stop the blood flow through the aneurysm.

The aneurysm sac is opened and a graft is sewn into the aorta.

The graft is made of a material called Dacron. Once the graft is sewn in place and the clamps are removed, the aneurysm sac is closed around the graft and stitched.

This surgery usually takes 2 to 6 hours. You will be able to go home 5 to 7 days after the surgery.

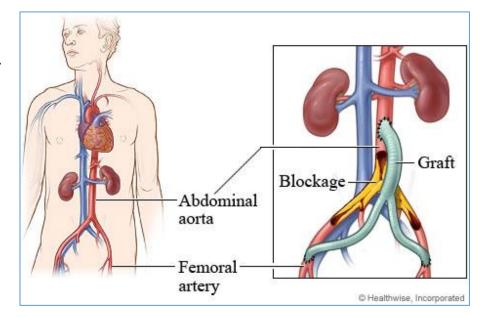


#### **About Aorta Bifemoral Grafts**

A synthetic graft is put into place to help increase the blood flow to the legs and feet. It is sewn into the aorta or main pipe and is attached just above the femoral arteries to bypass areas of blockage.

This graft should relieve the symptoms of rest or night pain and improve the distance you can walk.

This surgery takes 2 to 6 hours. You will be able to go home 5 to 7 days after the surgery.



The vascular surgeon's website can also be a resource for you to find more information: <a href="http://victoriavascular.ca/">http://victoriavascular.ca/</a>



### **Getting Ready for Surgery**

You will attend the Pre-Admission Clinic (PAC) about 2 to 4 weeks before your surgery. You should have received this booklet at the surgeons' office and read it over before that appointment.

#### **Enhanced Recovery after Surgery (ERAS)**

Enhanced recovery pathways are evidence-based care that has been widely used throughout Europe for over 10 years. The aim of these pathways is to increase patient education and involve you in every stage of your care. The pathway is set up to create clear communication and a well-organized and structured sequence of care. Research has shown that when you know what to expect it reduces both physical and emotional stress and helps you recover better and faster.

Following the recommended steps set by the Provincial Enhanced Recovery Programme, patients will benefit from reduced risk of post-operative complications like chest infections and blood clots and have improved overall health, which leads to an earlier return to normal activity.

The programme encourages patients (and their relatives and caregivers) to be fully involved in their treatment, care and recovery. We would like you to complete the pages of this booklet along with the health professionals looking after you. Spaces have been left throughout this booklet for you to note any comments or questions you may have about your care and recovery. Island Health updates the care maps annually to reflect the most current research and best care practice. The goal is better care for you.

#### **Pre-operative History and Physical Exam**

You must have a pre-operative (pre-op) physical with your primary care provider as early as 3 months before, but no later than 1 week before, the surgery date. If you do not have a primary care provider, you can have your physical done at a walk-in clinic.

#### **Gum Chewing**

Chewing gum after surgery can help return you to normal bowel function after surgery. It will help with digestion and reduce nausea. Please bring in a package of sugar-free gum to start chewing after surgery when the doctor says it's okay to do so. You can chew it three times a day between meals, or as needed to ease your nausea.

#### If You Live Out of Town

If you cannot get a ride home with family or friends after your surgery, you will need to make other arrangements. Here are some options:

 Wheels for Wellness might be able to take you home when you are discharged from the hospital. Call or visit their website to find out if you are eligible for this service:

o Tel: 250.338.0196

Website: <a href="https://wheelsforwellness.com/">https://wheelsforwellness.com/</a>

#### OR

• Bring personal identification (ID) that has your picture, and enough money to pay for travel home, especially if you are travelling by air. The hospital does not pay for transportation home, even if you came to hospital by ambulance or air ambulance.

If you are from out of town and are staying in Victoria the night before your surgery, it is best to make arrangements early.

If anyone is traveling with you, you will also want to make sure they have a place to stay while you are in the hospital.

Here are two places you and anyone traveling with you can stay. They are both within walking distance to the hospital.

Easter Seal House 2095 Cancer Society Lodge

Granite Street, Victoria BC 2202 Richmond Road, Victoria BC

Tel: 250.595.6060 Tel: 250.592.2662

Toll-free: 1.877.718.3388

#### **Learn more about Medical Travel Accommodations at:**

Travel and accommodation assistance - Province of British Columbia (gov.bc.ca): <a href="https://www2.gov.bc.ca/gov/content/health/accessing-health-care/tap-bc">https://www2.gov.bc.ca/gov/content/health/accessing-health-care/tap-bc</a>

**If you need help making any of these arrangements**, please contact our Social Worker at 250.370.8339 Monday to Friday.

Where to Get Equipment				
Red Cross Loan Cupboards www.redcross.ca  Toll Free: 1.800.565.8000	<ul> <li>Locations throughout BC.</li> <li>Provides "free" equipment for 3 months; however, donations are gratefully accepted!</li> <li>Have a limited supply of equipment and may not have all the items you need.</li> <li>REQUIRES a signed Equipment Request Form.</li> </ul>			
Or check local listings for area phone number.	<ul> <li>You can get this form from the hospital Preadmission Clinic or through your community Occupational Therapist or Physiotherapist who work with you after your surgery. If you do not have a form within 1 week of your surgery, please contact the Preadmission Clinic.</li> </ul>			
Medical Supply Stores	<ul> <li>See yellow page listings for stores in your area.</li> <li>Have equipment for rent and/or purchase.</li> <li>May deliver to your home and/or install.</li> <li>Costs may be covered by extended health plans; check your plan.</li> </ul>			
Government Agencies	Veterans Affairs Canada (VAC) <u>www.vac-acc.gc.ca</u> 1.866.522.2122			
Friends/Family	Check with friends and family who may have equipment you can borrow.			



# **Recovering from Surgery While in Hospital**

#### Wounds

Incisions are closed with stitches (sutures), clips (staples) or dissolvable stitches. Your surgeon will decide which the best method is for you. You may have a bandage over your incision that will be changed as needed.

#### **Eating and Drinking**

If you have a tube down your nose and into your stomach to drain stomach fluids, it might be in place for a few days after surgery. Once it is removed, your diet will be increased slowly, starting with clear fluids. Your intravenous (IV) will be removed as soon as you are drinking enough liquids.

#### Going to the Bathroom

Your nurse will check your bladder and bowel functions after surgery. You will have a catheter placed in your bladder during surgery to drain urine (pee). The catheter will be removed within 3 days after surgery, once you are able use the bathroom.

#### **Activity**

Follow post-op activity instructions from your surgeon. Generally, you will recover quicker if you move about as soon as possible. Do not get up on your own until the nurse tells you it is okay. Your nurse and physiotherapist will encourage you to deep breathe and cough and to do leg exercises while you are in bed. You will be helped to sit up at the side of the bed and/or out of bed the first day after surgery.



## **Recovering from Surgery at Home**

#### You are ready to go home (be discharged) when:

- You can get in and out of bed by yourself.
- You can wash/shower, walk and dress by yourself.
- You have arranged for help at home.
- You can walk up and down stairs.

#### Follow-up

When you get home, make the following appointments:

- Make an appointment with your primary care provider or medical clinic for 7 to 10 days after surgery date, to have staples removed from your abdominal incision.
- If you had a **groin incision**, make second appointment with **your primary care provider or medical clinic** for 12 to 14 days after surgery date to have staples removed from your **groin incision**.
- Make a follow-up appointment with your Surgeon for 6 to 8 weeks after your surgery date.

#### **Taking Care of Your Incision**

- Keep your incision clean and dry.
- A light bandage may cover your incision or you may not have any bandages at all.
- If you have bandages, change them as directed by your surgeon or nurse. You can buy bandages at your local pharmacy if you need them.
- Check your incision every day for signs of infection (see: Health Concerns on page 15 of this booklet for more information).
- Wash your hands before and after changing or removing bandages or touching your incision.
- Do not use oils, creams or lotions on your incision unless your Surgeon tells you to. Do not pull off any scabs on your incision.
- You will have some swelling and bruising around the incision. It will go away in a few weeks.

- It is normal for your incisions to be uncomfortable, itchy or numb for 2-3 weeks after surgery.
- Put an ice pack, wrapped in a tea towel, over the dressing, if you wish. Do this up to 4 times a day. Do not leave the ice pack on for more than 10 minutes at a time.
- Your Surgeon may want a Home Care Nurse to visit you at home. If so, it will be arranged before you go home.

#### **Bathing**

- You may shower 48 hours after surgery. Ask someone to stay with you when you take your first few showers.
- Do not soak your incision in a bath, hot tub or swimming pool for at least 1 week after your staples/stitches are removed and your incision has healed.

#### **Activity**

- When in a car, wear a seatbelt at all times.
- Avoid wearing tight clothing around your abdomen.
- Support your incision with a small pillow or towel when you cough or sneeze.
- Do not lift anything over 10 lbs (4.5 kg) for at least 6 weeks. Avoid activities that put strain on your incisions like vacuuming, mowing the lawn, and carrying children, groceries or pets.
- Walk as much as you can but rest often. Short walks will strengthen your abdominal muscles. Progress to walking 15-20 minutes 3 times a day.
- After 6 weeks you can begin to build up your level of activity and exercise. Check with your Surgeon before resuming any sports type activities.
- If you have a **groin incision**, avoid sitting for longer than 20 minutes.
  - When sitting for meals, sit on the edge of your seat and lean back slightly. Do this for 6-8 weeks after surgery.
- If you have an abdominal incision only, there are no restrictions when sitting.
- Gradually increase activities over the next few weeks. If your pain gets worse
  when you increase activity, you may be doing too much.
- You may resume sexual activity once the surgical area is comfortable, unless your Surgeon tells you not to.

#### Swelling (Edema) of the Legs and Ankles

- Every day, check your leg and foot for swelling. Swelling in your leg and ankle
  is normal after surgery. It is normal for the swelling to be worse at the end of the
  day.
- It will get better as you increase your activity. Try walking more often.
- Avoid crossing your legs or sitting in one position or standing for long periods of time.
- Raise your legs when resting. Put your leg on a stool when sitting or on the arm of the couch when lying down.

#### **Driving**

- Ask your Surgeon when you can start to drive again. Generally, you should not
  drive for about 6 weeks after surgery. If your car does not have power steering and
  is heavy to steer, you should not drive for at least 8 weeks.
- Before you try driving, sit in the car with your seat belt fastened and press your foot hard on the brake as if you are doing an emergency stop. If there is any discomfort at all, do not drive, as you are considered unsafe to do so.

#### Work

• Talk to your Surgeon about when you can go back to work. Depending on the type of work you do, you might be able to return to work 8 weeks after your surgery.

#### Rest

- It is very common to have fatigue (feel very tired) after vascular surgery. It may take weeks to regain your energy.
- Plan rest periods of 20-30 minutes during the day. You don't need to go to bed to rest.
- Pace yourself and rest after activities. Do not rush your recovery and overdo things. This will slow your recovery.
- Listen to your body and rest if you feel tired.
- Find a healthy balance between exercise and rest and good nutrition.
- Don't be afraid to ask your visitors to leave if you are tired and would like to rest.

#### **Healthy eating**

- Gradually move from fluids to a well-balanced diet. It may take several weeks to get your normal appetite back.
- Eat a diet that is high in protein. A hospital or community dietitian can help you learn how to add protein to your diet.
- Drink at least 6-8 cups of fluid daily.
- Take a regular multivitamin and iron supplement every day. Ask your local Pharmacist to suggest one.
- Some people have upset stomach, nausea, lack of appetite, or foods not tasting as they should for 1-2 weeks after surgery. This is usually because of the medications. If this happens, try eating small amounts of food more regularly and chewing gum. Call your doctor if you:
  - Cannot eat or drink for 2-3 days.
  - Have stomach pains.
  - Are vomiting (throwing up).

#### Learn more about healthy eating:

- Read chapter 3, Eating for a health heart in the Heart and Stroke Foundation's
   Living well with heart disease booklet (linked to on page 14 of this booklet).
- Read the Dietitian Services information on <u>www.healthlinkbc.ca</u>, or call 8.1.1 (or 7.1.1 for the hearing impaired) weekdays from 9 am-5 pm and ask to speak to a Dietitian.
  - Translation services are available.

#### **Alcohol**

- Avoid alcohol for at least 2 weeks before and after surgery. Having even 1 to 2 drinks per day can increase the risk of delirium after surgery.
- Many medications react to alcohol. Talk to your pharmacist about interactions alcohol may have with the medications you are taking.
- Avoid alcohol if you have a history of depression. Alcohol is a depressant and may make your symptoms worse.

#### **Medications**

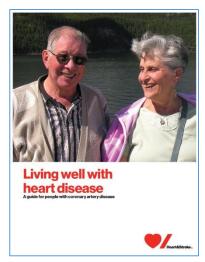
- After surgery, restart all the medications you took before surgery unless your doctor tells you not to.
- You will be given a prescription for pain pills before you go home. Take them as directed to keep yourself comfortable.
- When taking pain medication, you may be drowsy or dizzy. Do not drive or drink alcohol while taking these medications.
- When the pain lessens, take fewer pain pills or stop taking them altogether. To avoid withdrawal symptoms, slowly taper off pain medications. Talk with your pharmacist or family doctor for help weaning off these medications.

#### **Managing stress**

 Take the time to heal. Rest often, eat well and generally take good care of yourself. This will help your recovery.

#### **How Can I Reduce My Risk Factors?**

Learn about the causes of heart and vascular disease and ways to optimize your health in the Heart and Stroke<sup>TM</sup> foundation's *Living well with heart disease* booklet: <a href="https://www.heartandstroke.ca/-/media/pdf-files/canada/2017-lwwhd/livingwellwheartdisease-en.pdf">https://www.heartandstroke.ca/-/media/pdf-files/canada/2017-lwwhd/livingwellwheartdisease-en.pdf</a>





#### **Health Concerns**

#### Call 911 if You Have:

- Chest discomfort with sweating, nausea, faintness or shortness of breath.
- Shortness of breath that gets worse and is not relieved by resting.
- · Fainting spells.
- Bright red blood in stool or urine, or when you cough.
- Sudden problems with speaking, walking or coordination.

#### **Call Your Surgeon if You Have:**

- Bleeding enough to soak through a tissue.
- Drainage from your incision that is persistent or changes in appearance or colour (e.g., yellow or green).
- Increased tenderness, redness or warmth around the surgery site.
- Irritation or blisters from your dressing or tape.
- Pain that is not relieved by your medication.
- A fever spike (greater than or equal to 39° Celsius/102.2° Fahrenheit) with or without shakes and body chills.
- A high-grade fever (38.5° Celsius/101.3° Fahrenheit and over) for 2 days or more.
- Your calves (lower portion of your legs) become swollen and painful.

#### If You Cannot Reach Your Surgeon:

- Call your primary care provider, or
- Go to a walk-in medical clinic, or
- If it is after clinic hours, go to a hospital emergency department.

#### For Non-Emergency Health Information and Services:

Contact HealthLinkBC – a free-of-charge health information and advice hone line available in British Columbia.

#### HealthLinkBC

- Phone: 8.1.1 from anywhere in BC.
  - o 7.1.1 for deaf and hearing-impaired assistance (TTY)
- Website: www.healthlinkbc.ca

#### Tell us what you think!

After reading *this booklet* please respond to the following statements. Your answers and comments will help us improve the information.

Circle one number for each statement:

	disagree			strongly agree		
I read all of the information provided.	1	2	3	4	5	
Comments:						
The information is easy to read.	1	2	3	4	5	
Comments:						
The information is easy to understand.	1	2	3	4	5	
Comments:						
Reading this information helped me						
prepare for and recover from my surgery.	1	2	3	4	5	
Comments:						

5.	The information answered my questions.	1	2	3	4	5
	Comments:					
6.	I would recommend this information to other patients.	1	2	3	4	5
	Comments:					
7.	I prefer to have this information in: (che	eck one)				
A book just like this one.						
	Separate handouts on each topic that I need.					
	Comments:					

8.	I would have liked MORE information about:
^	1 11 11 500 1 (
9.	I would have liked LESS information about:
10.	What changes would you make in this booklet to make it better?
11.	I am: (check one)
	a patient.
	a family member.

Please give this evaluation form to your healthcare provider, or mail it to:

Manager of Surgical Quality Surgical Services, 2<sup>nd</sup> Floor, Memorial Pavilion, Royal Jubilee Hospital, 1952 Bay Street Victoria, BC V8R 1J8

lotes			

**Getting Ready for and Recovering From Abdominal Vascular Surgery**