After your open abdominal aortic aneurysm (AAA) repair

Information for patients
Information for patients and carers

After open surgery to repair your abdominal aortic aneurysm (AAA), it is important that you feel able to take an active role in your recovery. This booklet gives you information on what to expect after your operation and advice about recovering from the surgery. It can be used, together with the verbal information and leaflets given to you before your operation.

Some words are in green (for instance aorta). These are explained in the glossary at the end of the leaflet.

What did the surgery involve?

Your surgery involved the insertion of a new lining into the aorta made of a very strong plastic material called Dacron. This should last 20 years or more.

The operation was done through an incision in your abdomen with you undergoing a general anaesthetic.

The operation usually lasts between 3 to 5 hours.

Your wounds are closed with stitches under the skin that dissolve by themselves, or by clips that will need to be removed at a later date.
As it is a major operation, there is a small risk of you experiencing a medical complication during your recovery; however, it should be noted that the risk of any major complications is about 1 in 10 from this type of operation.

Complications may occur after surgery and whilst you are in hospital. These will be dealt with.

- Heart attack - risk 1 in 20
- Stroke - risk 1 in 200
- Kidney failure - risk 1 in 20
- Chest problem - risk 1 in 20
- Loss of circulation in the legs or bowel - risk 1 in 100
- Infection in the graft used to replace your aorta - risk 1 in 100
- Deep vein thrombosis (DVT).
Also, which you may find after you have gone home; erectile dysfunction. Up to 1 in 10 men may have difficulty obtaining an erection following surgery due to disruption of related nerves which lie in front of the aorta.

Your Surgeon will have already discussed the possibility of any complications with you and has only recommended treatment if he or she believes the risk of the aneurysm bursting is much higher than any threat posed by the surgery.

Your recovery

After the operation, you will usually have spent 1 - 2 days in an Intensive Care or High Dependency Unit so your progress can be monitored more closely. You will then have been transferred to the Ward.

Pain control

Pain can be severe following this operation. To help you deal with this you will be given painkillers by injection, usually via the epidural tube in your back or by a machine that you are able to control yourself by pressing a button - patient controlled analgesia (PCA). It is important that you take the medication so you can move about and cough freely.

Sometimes, the pain killers can make you feel sick. If this happens to you, let the nurses know. You can be given anti-sickness drugs to control this so that you DO NOT have to stop taking your painkillers.
Discomfort from your wound is normal for several weeks following surgery, especially when you cough.

It is important that you can move about and cough where needed to help prevent pressure sores, Deep Vein Thrombosis (DVT), constipation and chest infections.

Most patients have treatment during their stay to prevent DVT if they are at risk. As well as any required medication, you may be given special stockings to wear.

As the days pass and you improve, any tubes will be removed following direction from your doctor.

You will be advised what medication to take. This may include what you were taking before.

Your bowel may stop working properly for a short time, so you will be given all the fluids you require via a drip until your bowel can cope with fluids by mouth.

You may not feel like eating immediately, although you will be allowed to eat and drink, once you are fully awake following surgery.

You will probably be eating normally within 3 days of your operation.

If your recovery is straightforward, you will be in hospital between 7 - 10 days.
Things that you can do to help keep yourself comfortable after your operation

- Regularly changing your position in bed as well as getting up and moving around as much as possible.
- Using a pillow to support your wound when you need to cough or move.
- Once you are able, a warm shower or using a heat pad may help.
- Relaxing: you may find this difficult to do but simple breathing exercises may help.
Your wound

Your wound should be dry and healed within 2 weeks and will be examined on a regular basis whilst you are in hospital. If you develop redness or swelling in the wound following your discharge you should see your GP.

If clips have been used to close your wound, they may be removed whilst you are in hospital or by your GP or District Nurse, once you are discharged.

You should avoid heavy lifting or straining.

Once your wound is dry, you may bathe or shower as normal. This will normally be before you leave hospital.

Please ensure that:

• You have a shower rather than a bath to avoid soaking your wound
• You do not scrub your wound
• You pat it dry after a shower
• You do not use perfumed products on your wound including moisturisers and talcum powder
When you leave hospital

You will usually be sent home on a small dose of Aspirin and a medication called a Statin if you are not already taking them. These two medications are taken to protect the circulation and reduce the risk of heart attacks and strokes.

- It’s a good idea to have your home prepared for when you return from hospital.
- You may want to rearrange your furniture to make it easier to move around and put any items that you use a lot at arm level. This will mean you won’t have to strain to reach them.
- If you are on your own, you may also want to stock up on frozen or tinned food or do an online shop as you will be tired for many weeks after your operation.

It is normal that you feel tired easily. It can take about 3 months to get back to your normal level of activity. Whilst you are recovering, you should plan periods of rest into your day gradually reducing them as you get stronger.

The best way to recover is to gradually increase your level of physical activity over 3 months.

You may resume normal sexual relations as soon as you feel comfortable; however, see the comment on page 4 regarding the potential difficulty in obtaining an erection.
What you can do to help yourself

Avoid inactivity

Gentle exercise such as walking or cycling are recommended to help improve your overall level of fitness.

The muscles beneath your wound may take up to 6 - 8 weeks to fully heal. During this time, you should not lift heavy objects, or undertake strenuous activities or sports such as golf. Taking regular exercise such as a short walk combined with rest is recommended for the first few weeks, which you can gradually increase. Taking on light household chores and walking around your house is a good starting point.

Avoid high blood pressure

It is important to have your blood pressure checked regularly. If you have been prescribed medication for your blood pressure, please ensure you take it according to the instructions given. Please note: Your blood pressure medication may have changed since your surgery.

Avoid high blood cholesterol levels

You should eat a healthy balanced diet and try and reduce any excess weight. Further information can be found on the NHS choices website: www.nhs.uk and entering ‘Balanced diet’ in the search box. If you have been prescribed medication for high cholesterol, please ensure you take it according to the instructions given.
Stop smoking
If you are a smoker, the single most important thing you do to help yourself is to give up. This will help to protect all your arteries making it less likely that you will suffer from heart attacks, strokes and problems with the circulation in your legs.

Diabetes
If you have diabetes, it is important that your blood sugar levels are well controlled by taking your medication according to the instructions given.

Alcohol
It is important for your general health that you do not drink more than the recommended weekly units of alcohol.

If you regularly drink more than 14 units of alcohol a week please consider cutting down. You can ask the ward staff for further advice.

Further helpful resources:
One You Leeds
www.oneyouleeds.co.uk
Tel 0800 1694219

Forward Leeds
0113 887 2477, info@forwardleeds.co.uk
www.forwardleeds.co.uk
Other information for your recovery

Work
If this applies to you, you should normally be able to return to work within 6 - 12 weeks of surgery.

Your GP will advise you of the date when you see him / her for your sickness certificate, after the certificate issued on your discharge from hospital expires.

Driving
Before it is repaired, the DVLA should be advised if your aneurysm reaches 6 cm. If your AAA reaches 6.5 cm in diameter, you are disqualified from driving. You are allowed to continue to drive if you have had satisfactory surgical treatment and there is no further enlargement of your AAA.

HGV drivers are disqualified from driving if their AAA is above 5.5 cm, but can resume driving if their AAA is successfully treated.

Following your operation, you can resume driving when you can perform an emergency stop safely. This will normally be within 3 - 4 weeks after surgery. If you are in doubt, check with your GP.

You should inform your insurers that you have undergone major surgery.

Flying
You should wait at least 4 - 6 weeks before flying, following your operation but check with your GP before you make any travel plans.

You will need to declare your condition when you apply for
travel insurance, or tell your current insurer. You may be charged an extra premium or they may exclude your condition from cover.

**Will I need to come back to hospital for a check up?**

You will usually receive an appointment to be seen in the Outpatient Clinic in about 6 - 8 weeks to check your wound has healed properly and everything else is fine. You will then be discharged from hospital care.

Please feel free to ask your Doctors and nurses about anything that is unclear, or if you have any unanswered questions about your care.

**What if I think there is something wrong when I get home?**

If, once you have gone home you experience any of the complications mentioned in this leaflet, please seek medical advice from your GP, 111 or if you feel it is an emergency then dial 999.
### Glossary of terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td><strong>Aortic aneurysm</strong></td>
<td>An aneurysm affecting the aorta, usually in the abdomen area.</td>
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<tr>
<td><strong>Artery</strong></td>
<td>Blood vessel taking blood from the heart.</td>
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<tr>
<td><strong>Aorta</strong></td>
<td>The main blood vessel carrying blood from the heart to the whole of the body.</td>
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<tr>
<td><strong>Aneurysm</strong></td>
<td>A swelling of an artery due to the weakening of the vessel.</td>
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<tr>
<td><strong>Abdominal Aortic Aneurysm (AAA)</strong></td>
<td>An aneurysm occurring in the abdomen (the belly or tummy).</td>
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<td><strong>Deep Vein Thrombosis</strong></td>
<td>A blood clot in the large veins in the leg.</td>
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<td><strong>Epidural</strong></td>
<td>A plastic tube (cannula) placed in your back by an anaesthetist which provides pain relief.</td>
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<tr>
<td><strong>Patient Controlled Analgesic (PCA)</strong></td>
<td>Pain relief controlled by patients pressing a button.</td>
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<td><strong>Cholesterol</strong></td>
<td>A type of unhealthy fat in the blood and diet</td>
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<tr>
<td><strong>Diabetes</strong></td>
<td>A disease where control of the level of sugar in the blood is impaired or lost.</td>
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Personal notes

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Adapted from:

Sheffield Teaching Hospitals Abdominal Aortic Aneurysm repair - Information for patients booklet.

Sheffield Teaching Hospitals Abdominal aortic aneurysm - Information for patients leaflet.

Vascular Society website Open Aneurysm repair - Information for patients.

NHS Choices website - Abdominal aortic aneurysm.

Circulation Foundation website - Abdominal aortic aneurysm Open AAA Repair Operation patient information.

The Leeds Teaching Hospitals - Open Abdominal Aortic Aneurysm Repair patient information leaflet (V04).

The Leeds Teaching Hospitals - Abdominal Aortic Aneurysm patient information leaflet.

The Leeds Teaching Hospitals - Pain relief after your operation patient information leaflet.

BUPA website - Abdominal aortic aneurysm.

East Kent Hospitals University NHS Trust.