

CORONARY ANGIOPLASTY

What is it?

Angina occurs when the arteries that feed the heart, the coronary arteries, are narrowed by a build up of cholesterol plaque. A balloon can be inserted through a catheter which is placed from the groin up through the major blood vessel, the Aorta to the heart arteries and then inflated at the narrowing. The inflated balloon dilates the narrowed coronary arteries by compressing the cholesterol material into the artery wall and by stretching the artery. When the balloon is inflated the flow of blood through the artery will be interrupted and it is normal to experience some angina. This can be limited by letting the balloon down. You should let us know if you experience severe pain. Quite often the balloon alone does not produce an adequate result and we insert a stent which is a metal sleeve to reinforce the artery. This remains permanently inside the artery.

What are the risks?

The risks of the procedure include a bruise in the leg 1/100 and surgical repair of the femoral artery 1/500. The chance of successfully opening the artery are better than 95%. The risk of needing an urgent bypass because the balloon fails to open the artery adequately is 1-2%. The risk of a heart attack is 2-3% and the risk of dying from balloon angioplasty is less than 1/1000. These results must be balanced against the success and risks of open heart surgery.

How long will I be in hospital?

Usually you will be discharged on the first or second day after the procedure.

What tablets are required?

To reduce the chances of the artery blocking Aspirin (100 - m daily) is essential and will be continued lifelong. If you require a stent you will also be on Clopidogrel (Plavix) one tablet (75mg) daily for the first four weeks. You should continue other medications especially cholesterol lowering and hypertension medication which will continue long term.

What follow up is needed?

You should see your local Doctor in the first week after discharge. You should see your Cardiologist at three - four weeks post procedure. You should contact your Cardiologist if chest pains recur at any time.