



Patient & Family Guide
2022

Fistuloplasty



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What is a fistuloplasty?

A fistuloplasty is a non-surgical procedure used to open blocked or narrowed blood vessels in your fistula. The blood vessel is stretched with a special balloon.

Who will do my fistuloplasty?

An interventional radiologist (doctor who specializes in X-rays) will do your fistuloplasty.

Where is the fistuloplasty done?

- › Halifax Infirmary (HI)
- › Go to the 3rd floor and register at the Diagnostic Imaging Registration Desk

Bring your provincial health card with you.

How long will I be at the hospital?

- Please plan to be at the hospital for 4 hours for the full appointment.
- The actual procedure (fistuloplasty) takes about 1 hour.

- After the procedure, you will recover in the Interventional Radiology recovery area for about 2 hours.

How do I get ready?

- Tell your doctor in the Dialysis Unit if you are taking blood thinner medication (like warfarin). You may need to stop taking it a few days before the procedure. They will give you instructions on when to stop taking this medication.
- You will need to have blood tests a few days before the procedure. Your doctor will order these tests for you.
- A nurse will call you with instructions 1 to 2 days before the procedure. They will tell you if you need to stop taking any medications.
- Tell your referring doctor and the radiologist if you are pregnant.
- Tell your referring doctor and the radiologist if you have an allergy to X-ray contrast (dye).
- **Do not** eat any solid food after midnight the night before your procedure.
- You may drink clear fluids after midnight.

The morning of the procedure:

- **Do not** eat breakfast.
- If you have diabetes, drink juice. **Do not** take your insulin or diabetes pills.
- Take your medications as usual, except for blood thinner and/or diabetes medications, unless told otherwise.
- Bring your medication(s) and insulin to the hospital with you.
- **You must have a responsible adult to take you home by car or taxi. You cannot drive yourself. They must also stay with you overnight after your procedure. This is for your safety.**
- **Do not drive for 24 hours (1 day)** after the procedure.

How is the fistuloplasty done?

- The doctor will explain the procedure to you and then ask you to sign a consent form.
- The fistuloplasty is done in the Interventional Radiology (X-ray) Department.
- You will be taken into the X-ray room and asked to lie down on an exam table.
- The doctor may give you sedation (medication to help you relax).

- A small IV needle will be inserted (put) into your dialysis access.
- A blood pressure cuff or tourniquet (tight cord or bandage) will be placed on your fistula arm for a short time.
- The doctor will inject X-ray contrast through the IV in your dialysis access. When the dye is injected, you may have a warm feeling for a few seconds. A technologist will take a series of X-rays.
- The radiologist will use the X-ray contrast to help find the blockage or narrowing in your blood vessel.
- A special tube called a catheter will be passed through a blood vessel in your arm to the site of the blockage. The catheter has a small balloon at the tip. Once the catheter has reached the site of the blockage, the balloon will be inflated (made bigger) and deflated (made smaller) several times. This will stretch the blood vessel and should help the blockage.

What will happen after the procedure?

- You will stay in the Minor Procedures Unit or, if needed, the Dialysis Unit for about 2 hours. A nurse will check your blood pressure, heart rate, and puncture site often.
- You may eat and drink as usual.
- You may have a stitch at the puncture site to help prevent bleeding. A small clear dressing or bandage will be put over the puncture site. A dialysis nurse will remove the stitch the next time you come for dialysis. Check with the dialysis nurse about removing the stitch.
- The nurse will show you how to apply pressure to the puncture site if it bleeds at home.

What are the risks?

The risks of a fistuloplasty can include, but are not limited to:

Common:

- › Bleeding
- › Mild pain
- › Bruising and/or infection where the IV needle was inserted

Less common:

- › Allergic reaction to the X-ray contrast. You may get medication to help with possible allergic reactions. The contrast dye we use is very safe and it is very rare to have a serious reaction.
- › All X-ray procedures expose you to radiation in different amounts. The length of time and the level of exposure to X-rays is highly controlled and kept as low as possible.
- › Loss of the fistula.

Call your doctor, go to the nearest Emergency Department, or call 911 if you have:

- › You cannot stop the bleeding at the puncture site
- › A lot of bruising and/or swelling at the puncture site or in your fistula arm
- › A lot of pain at the puncture site
- › A change in the colour of your arm
- › Fever (temperature above 38.5° C/101.3° F) or chills
- › A lump, pus, or a bad smell at the puncture site
- › Chest pain or trouble breathing
- › Trouble feeling the thrill or buzz in your fistula arm

