Patient & Family Guide

2019

Carotid Endarterectomy

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What is a carotid endarterectomy?
A carotid endarterectomy is surgery to clean plaque (fat deposits) out of one of your carotid arteries. The carotid arteries are arteries in your neck that bring blood to the arteries in your brain, neck, and face. Your surgeon has arranged for you to have this surgery because one of your carotid arteries has become narrowed with plaque.
What causes the arteries to narrow with plaque?

Fat and other deposits can collect on the walls of the arteries. This causes the arteries to narrow and lowers blood flow. Age, smoking, diabetes, and high blood pressure add to your chances of having this problem.

‘Mini-strokes’ or TIAs (transient ischemic attacks) are a warning sign of this problem. However, they can often be treated to prevent a more serious stroke. Your doctor may have suggested this surgery to lower your chance of a stroke. Your doctor will talk about any risks of surgery with you.

Before surgery

Please read *Planning for Your Hospital Stay after Surgery* to learn what will happen during this time.
Surgery
An incision (cut) will be made just below your jaw. The fat deposits will be removed so the blood can flow freely through the artery. You will be awake for this surgery. You will be given medication to help you relax.

During surgery, please do not move or talk unless told to do so.

After surgery
• You will be taken to a special recovery area. Your breathing, pulse, and blood pressure will be checked often. When you are awake and stable, you will be taken to your hospital room.
• You will have an intravenous (IV) in your arm until you are drinking well.
• You can usually eat regular meals the day after your surgery.
Care of your incision
• You will have staples in your incision.
• Your neck will be swollen for a few days. This is normal.
• You may have bruising around your incision.

Controlling pain
• It is normal to have pain after your surgery. Pain medication will be given as needed.

Other
• You may not have a bowel movement (poop) for a few days after surgery. This is normal. Ask for a laxative (medication to help you poop), if needed.
• The nurse will be checking your handgrips, eyes, ability to talk clearly, blood pressure, and pulse.
• The nurse will measure your neck to check for swelling.
• You will stay in the hospital for 1 to 2 days. You may be discharged the day after surgery.
At home

Meals and snacks
• Eating healthy meals will help you get back your strength.

Care of your incision
• You will have staples in your incision. The staples will be taken out by your family doctor or surgeon about 7-10 days after surgery.
• You may shower 2 days after surgery. Pat the incision dry – do not rub it.

Controlling pain
• You may take pills for pain for a short time. Take your pain medication as directed by your nurses.

**Do not drink alcohol while you are taking pain pills.**

• You may have constipation (not being able to poop). Ask your doctor about using stool softeners or laxatives, if needed.
Activity

• Rest for the first few days at home. Increase your activity bit by bit.

• Some examples of good activities for you are: light housework, making small meals, and riding as a passenger in a car for a short distance.

• Walking is the best exercise at this time. Start slowly and go a little farther each day.

• You can go back to sexual activity (sex) when you feel well enough.

• Do not drive a car for 2 weeks. Do not drive if you are taking pain pills.

Followup care

A visit will be booked with your surgeon. **It is very important that you keep this appointment.**
Going back to work
When you can go back to work will depend on your general health, healing, and type of work you do. Talk about this with your family health care provider.

Call your family health care provider if you have:
› a sudden severe (very bad) headache
› fever and chills
› increased redness, swelling, or warmth around the incision
› increased pain or soreness around the incision
› separation (coming apart) of the edges of the incision
› drainage from the incision
Reducing your risk factors

You can make changes in your lifestyle to slow or stop the fatty buildup in your arteries:

- If you are a smoker, stop smoking. Avoid second-hand smoke. Smoking narrows your blood vessels, which will hurt your arteries more.
- Control high blood pressure (hypertension) and diabetes.
- Eat a heart-healthy diet (low in salt and fat). If needed, a dietitian will teach you.
- Keep a healthy weight.
- Exercise daily.
- Manage stress.
- Don’t drink alcohol, or drink only rarely.

Take your medication as prescribed by your family health care provider.

What are your questions?
Please ask. We are here to help you.
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Illustration by: LifeART Super Anatomy 4 Images, Copyright © 1994, TechPool Studios Corp. USA
Designed by: NSHA Library Services

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WG85-0594 © January 2019 Nova Scotia Health Authority
The information in this pamphlet is to be updated every 3 years or as needed.