

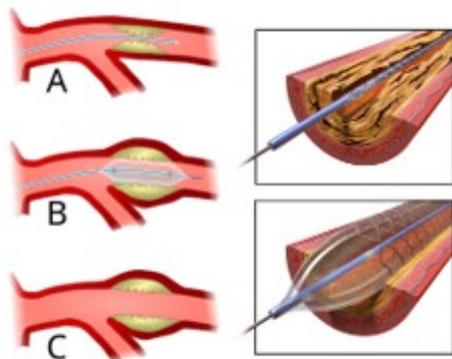
ANGIOPLASTY WITH OR WITHOUT STENTING BY SR ANNETTE ANDERSON (M.CUR)

Angioplasty with or without stenting are non-invasive procedures which are used to reopen blood vessels which have narrowed. They are commonly done in the heart (by a cardiologist) and in legs, neck and arms by a vascular surgeon. They can also be done on any artery in the body such as the mesenteric artery (for mesenteric ischemia) and renal arteries by vascular or interventional radiologists.

Angioplasty and stenting are performed with the assistance of angiography. This procedure is done awake or with sedation. Local anaesthetic is used to numb the area where the sheath and catheters are inserted.

Procedure:

Your vascular surgeon will start with an angiogram (please see article on Angiogram under non-surgical intervention) using a small pipe (catheter). If the angiogram indicates that the diseased artery is treatable with a balloon or stent, the vascular surgeon will proceed by crossing the diseased vessel narrowing or blockage with a guidewire. The using the guidewire for safety, a balloon-tipped catheter is inserted over the wire to widen the blockage (angioplasty). Under certain circumstances a stent may be deployed over the wire to keep the vessel open. This tiny mesh tube acts like scaffolding.



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The angiogram is then repeated to confirm a good result and no other blockages which might need to be corrected.

Different catheters:

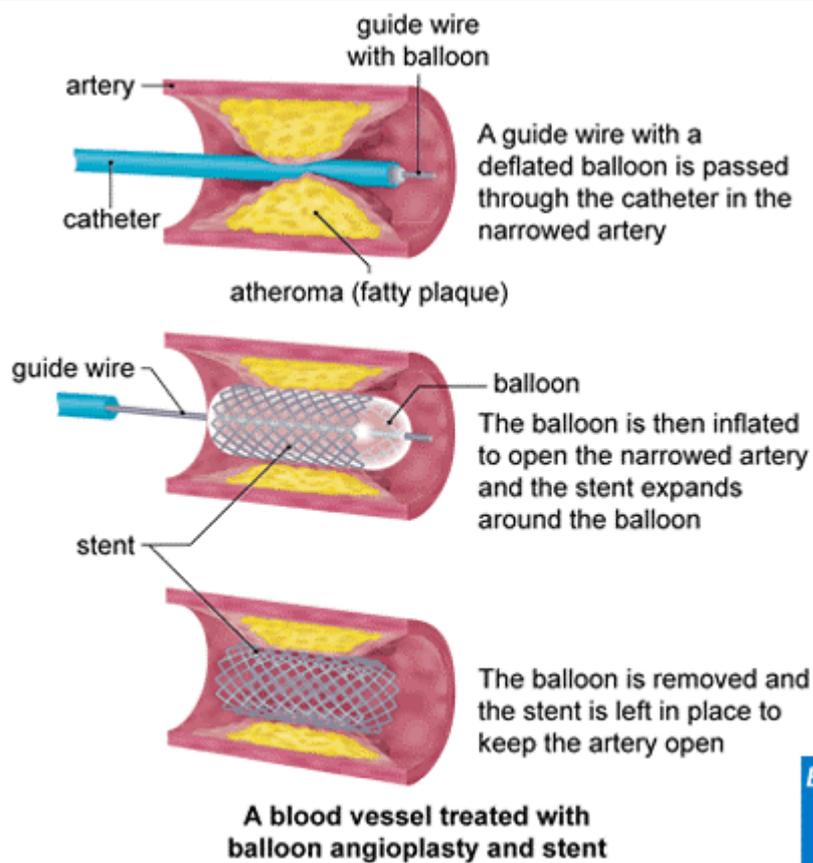
It is important to note, that there are many different catheters. The size and type of catheter used is determined by the size of the blood vessel which needs treatment and the length of the blockage. Different balloons are made of different materials, capable of exerting different pressures. Some balloons have a low profile which allows them to sneak through tight narrowing's, some are more pliable than others and some are resistant to perforation by calcified plaque or stents.

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The stents also come in different constructions; some are bare metal stents while others are covered with a fabric (endografts). Others are drug-eluting stents which help to prevent restenosis of the artery at that point. Based on the extent of your diseased blood vessels; the appropriate angioplasty catheter and / or stent will be used. Sometimes, multiple catheters are used with guidewires to treat multiple blockages. The cost of these catheters come out of the prosthetic limit of your Medical Aid. It is often impossible to determine the exact cost of the catheters needed prior to the procedure as it is based on the information received during the procedure. However, it does help if you inform your surgeon of what your prosthetic limit is prior to the procedure.

If your surgeon is able to restore blood flow to your leg, using angioplasty with or without stents, this is excellent as it decreases the risk of non-healing wounds, amputations or possible major bypass surgery.



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