Heart Disease: Angioplasty

Angioplasty is a way to get more blood flowing to the heart muscle. Your doctor may call it percutaneous coronary intervention (PCI).

How it is done
Before angioplasty, the doctor will do a test called a coronary angiogram. For this test, a tiny tube called a catheter is threaded through an artery in your arm or groin and up to the coronary arteries. A dye is then sent through the catheter. The dye makes your coronary arteries show up on a screen so the doctor can see them. If one is narrowed or blocked, your doctor will do angioplasty.

During angioplasty, the doctor threads a catheter into the narrowed or blocked artery. At the end of the catheter is a tiny balloon. The doctor inflates the balloon inside the artery to open the blocked or narrow area.

The doctor may put a stent in your artery during angioplasty. A stent is a small tube that expands against the walls of the artery. The stent can keep the artery from closing again.

The doctor may use a type of stent called a drug-eluting stent. These stents are coated with medicines that keep scar tissue from forming inside the stent. This helps keep the artery open.

Angioplasty doesn't require a large cut (incision). You'll get medicine to help you relax, but you'll be awake during the procedure.

What to expect after the procedure
In the hospital:

- You will have a large bandage at the site where the catheter was inserted.
- Nurses will check your heart rate and blood pressure and check the insertion site for bleeding.
- If the insertion site is at your groin, you will need to keep your leg straight for a few hours.
• If the insertion site is in your arm, you will need to keep your arm still for at least one hour.
• You will probably go home in a day or two.

Once you are home:
• Gently wash around the insertion site with clean water 2 times a day unless your doctor gives you other instructions. Other cleaning products, such as hydrogen peroxide, can slow wound healing.
• Check the insertion site every day for signs of infection: redness, swelling, pus, or fever.
• You will probably be able to return to your normal activities in a few days.
• Do not smoke. Smoking raises your risk of having the artery close after angioplasty or stent placement.
• Keep all your follow-up appointments.
• Take your medicines as directed.

If you got a stent, you'll take blood-thinning medicines, including aspirin, to help prevent a heart attack. Don't stop these medicines unless you've checked with your doctor first. If you got a drug-eluting stent, you will probably take both of these medicines for at least 1 year. If you got a bare metal stent, you will take both medicines for at least 1 month but maybe up to 1 year. Then, you'll likely take daily aspirin long-term.

Your doctor might recommend cardiac rehab for you. In rehab, you'll get education and support to help you recover and make lifestyle changes to keep your heart healthy.

**Risks**
The rate of problems after angioplasty is very low. But like all medical procedures, it does have some risks. The most common are:
• Bleeding from the blood vessel where the catheter was inserted.
• Damage to the blood vessel in your groin or arm, which may need to be repaired.
• Damage to the coronary artery, which can cause a heart attack.
• Infection.
• An allergic reaction to the dye used during the procedure.

**When to call your doctor**
**Call your doctor if:**
• You have any signs of infection. These include:
  ◦ Increased pain, swelling, warmth, or redness at the insertion site.
  ◦ Red streaks leading from the insertion site.
  ◦ Pus draining from the insertion site.
  ◦ Fever.
• You have pain or bleeding at the insertion site.
• You have any questions or concerns.