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Abdominal Aortic Aneurysmectomy and Bypass

What is an abdominal aortic aneurysmectomy and bypass?

An abdominal aortic aneurysmectomy and bypass is a procedure in which the doctor repairs or removes an aneurysm in the aorta. The aorta is the main artery from the heart to the body. An aneurysm is a weak spot that balloons out from the wall of a blood vessel. Aneurysms can burst and cause internal bleeding, in which case there is a high risk of death and emergency surgery may be necessary.

This procedure is performed to repair the aneurysm and divert the flow of blood across the weak part of the aorta before the aneurysm becomes a more serious problem.

Examples of alternatives to this surgery are:

- measures to control high blood pressure
- placement of bypass grafts for certain types of aneurysms under x-ray control
- choosing not to have treatment, recognizing the risks of your condition.

You should ask your doctor about these choices.

How do I prepare for this procedure?

Plan for your care and recovery after the operation. Allow for time to rest and try to find other people to help you with your day-to-day duties.

Follow any instructions your doctor may give you. Take a shower and wash your hair the night before surgery. Eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water.

What happens during the procedure?

You will be given a general anesthetic. It will relax your muscles and put you in a deep sleep. It will prevent you from feeling pain during the operation.

The doctor will make a cut (incision) in the abdominal wall, expose the aorta, and put a clamp on it above the aneurysm to stop the flow of blood to the lower part of the body for a short time.

The doctor will repair the aneurysm by first making a cut in the aneurysm, opening it, and removing the material in it. Then he or she will sew a graft onto the artery above and below the aneurysm and fold the shell of the aneurysm over the graft. The location of the aneurysm may require the doctor to attach a tube from the aorta, above the aneurysm, to the iliac or femoral arteries (the arteries that supply the legs with blood). This tube will bypass the aneurysm and carry blood from the aorta to the arteries in the legs.

The doctor will then close the incision in your abdomen.

What happens after the procedure?

You will stay in an intensive care unit until your condition is stable, then move to a regular room. Your stay in the hospital may last 1 to 7 days, depending on your condition.

A tube may be inserted down your nose into your stomach to help release fluid and air from the gastrointestinal tract. This tube may remain in place for 2 to 3 days while the intestines recover from the operation.

You should avoid all strenuous activity for 4 to 6 weeks. You should ask your doctor how active you can be and when you should come back for a checkup.

What are the benefits of this procedure?

There is no longer a risk that the aneurysm will burst.

If you had a narrowing of the blood vessels associated with the aneurysm, it may be easier for you to walk and your blood pressure may improve.

What are the risks associated with this procedure?

- There are some risks when you have general anesthesia. Discuss these risks with your doctor.
- Risk of a heart attack during the operation increases if there is plaque (fatty buildup) in the blood vessels to the heart.
- The kidneys may be damaged if their blood supply is cut off for too long during the operation.
- Some or all sexual function may be lost if some of the surrounding nerves are involved with the aneurysm.
- A piece of blood clot may break off and cause a blockage further down the leg, which may make further surgery necessary.

You should ask your doctor how these risks apply to you.

When should I call the doctor?

Call the doctor immediately if:

- You have a bloated abdomen.
- You become nauseated and start to vomit.
- You develop a fever.
- You develop redness, swelling, pain, or drainage from your incision.
- You become short of breath.
- You have chest pain.

Call the doctor during office hours if:

- You have questions about the procedure or its results.
- You want to make another appointment.

Special Instructions:

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