

Patients who have had a coronary angioplasty with a stent



Information for patients
Cardiology



PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



What is a stent?

A stent is a metal cage that has been placed in your coronary artery during the balloon treatment (coronary angioplasty). Stents are made from stainless steel. It is perfectly safe to have an MRI scan as long as it is **more** than 6 weeks after your angioplasty.

The metal in the stent is too fine to set off alarms at the airport.

What tablets do I need to take?

You will have been given some new tablets (Clopidogrel, Ticagrelor or Prasugrel) which help to stop a clot forming in the stent. You will also continue to take aspirin 75 mgs daily (if you are unable to tolerate aspirin you will probably be given Clopidogrel, Ticagrelor or Prasugrel instead).

Please remember to read the manufacturer's detailed information provided with your medication.

Bleeding can occur in the stomach or bowel. Rarely, this can become serious, requiring immediate emergency treatment.

Should you notice bleeding, or if you pass black tar-like stools:

Call NHS 111 or go to Accident & Emergency

How long will the stent last?

Once the stent is in your artery it will always be there. The doctor will have mentioned that the narrowing in your artery can come back. This happens in about 15% of patients and usually occurs within 6 months. A repeat angioplasty is often successful.

Will I still get angina?

It is unlikely, but you may still have some angina. Sometimes after an angioplasty you may experience an 'ache' in the centre of your chest for a few days. This is due to bruising of the heart artery and is not the same as angina. If you do experience angina symptoms you should rest and take your GTN spray in 5 minute intervals up to **10 minutes only**. If this does not relieve the symptoms you will need to dial 999.

How much can I do when I get home?

When you get home you should take things easy for the first couple of days, but after that you should begin to get back to normal. If you were able to do most things before your angioplasty you can get back to your usual level of activity fairly quickly, although you should not lift anything heavy or drive for the first week. The reason for this is that we do not want you to damage the artery in your groin and start it bleeding again. Please ask the doctor before you leave the ward if you need advice about when you can return to work.

If your angina was severe before your angioplasty and you were very limited in the amount of exercise that you could do, then you need to build up the amount you do gradually. It is important to do **some** exercise, preferably every day.

If you were admitted with a heart attack and had an angioplasty as part of your treatment, then you should follow the guidelines that you have been given for patients who have had a heart attack. This includes more gentle exercise and not driving for 4 weeks.

Is there anything else I need to know?

We have done your angioplasty to improve the blood flow through your arteries but it is **not** a cure and it is **very important** that you do all you can to prevent any further narrowing of your arteries.

- You will need to take aspirin for the rest of your life.
- It is essential that you keep your cholesterol levels low (at least below 5.0). You will be given a special diet to follow, and commonly, tablets to take.
- You must **not** smoke. There is plenty of help available for people wanting to give up smoking, please ask one of the nurses on the ward for more information before you leave.
- You should take regular exercise, at least 3 times a week.
- Your blood pressure should be well controlled.

Is there anything I should look out for when I go home?

Bleeding can occur in the stomach or bowel. Rarely, this can become serious, requiring immediate emergency treatment. Should you notice bleeding, or if you pass black tar-like stools you should call NHS 111 or go to your local A&E department.

If you experience angina symptoms which are not relieved by rest and taking your GTN spray, you will need to dial 999.

Who should I contact if I have any concerns?

If you have any concerns or need further advice when you get home, please ring the ward you were discharged from:

Chesterman 1

- **0114 271 4518**

Chesterman 2

- **0114 271 4346**

Coronary Care Unit

- **0114 271 4226**

Firth 7

- **0114 226 6215**

The practice nurse at your GP's surgery may also be able to offer advice on giving up smoking, diet or exercise.



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