

Neurosurgical Unit

Cerebral Angiography

Information for parents and carers

Introduction

This leaflet aims to explain what happens when your child has a cerebral angiogram and to provide you with discharge information .

What is angiography?

Cerebral angiography is a procedure used to look at the blood vessels around the brain, and to determine the presence and extent of any abnormality. This level of detail cannot be seen on conventional scans.

How is it done?

Angiography takes place in the X-ray department, and is performed by a specially trained doctor (Radiologist) while your child is asleep under a general anaesthetic. A special dye, known as contrast, is injected into the blood vessels (via a small tube or catheter in the groin) so that the blood vessels will show up on X-ray.

Unless your child has previously had an allergic reaction, the dye is suitable for most children / young adults. It is important to inform the radiologist if your child is at risk of being pregnant as X-rays used during the procedure can be harmful to an unborn child.

Before the procedure

A Radiologist and Anaesthetist will explain the procedure to you and ask you to sign a consent form. Nurses will advise you on starving (fasting) instructions for your child before the anaesthetic. The length of the procedure is variable, and your child is likely to be away from the ward for about two hours.

When your child returns to the ward

Bedrest

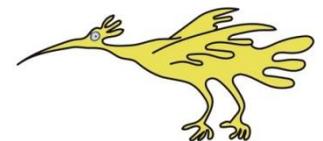
After the angiogram, your child will return to the ward and will need to lie flat according to the hospital's instructions. This is to allow the puncture site in the groin time to heal.

Vital signs

The nurses will check your child's blood pressure, heart rate, groin site and pulses in the feet for the rest of the day. The frequency of these observations will decrease over the course of the day. Your child will be able to eat and drink when they return to the ward.

Headache

Following the procedure, your child may complain of having a headache. This is not uncommon. The nurses can give your child simple pain relief medicine.



Bruising

Your child may develop a bruise at the puncture site in the groin; this is normal, and may take one to two weeks to disappear.

Length of stay

Depending on the age of your child and the timing of the procedure you may be discharged on the same day, however younger children and procedures undertaken later in the day may require an overnight stay.

Follow-up

The results of your child's angiography may be available before you go home. If they are not available before your child is discharged, a follow-up appointment will be made.

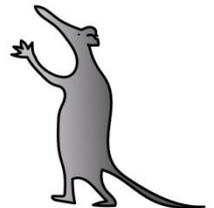
When you get home

Keep the puncture site dry for the first 24 hours.

After this your child may wash as their usual routine.

You should call the hospital if:

- Your child starts bleeding from where the catheter was inserted.
- Your child is in a lot of pain and pain relief does not seem to help.
- The area where the catheter was inserted looks red, swollen and feels hotter than the surrounding skin.
- Your child is not drinking any fluids after the first day back home.



Activity

Your child should rest and gradually increase the amount of exercise over the next few days, until the area has healed. Specific sporting activities and school should be discussed with your child's doctor before you go home.

Where can I get more information?

Your consultant will discuss the procedure fully with you and any other concerns you may have.

Or you can telephone the Neurosurgical ward on: 0151 282 4493

Or call the hospital and ask to speak with the neurosurgical advanced nurse practitioner.

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment. This information can be made available in other languages and formats if requested.

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