

## Are there any alternatives?

Some anatomical abnormalities can be repaired surgically.

There may be other procedures that can be performed to further evaluate your circulation and/or treat an area or blockage. If you are unsure about having a Fistulogram along with a possible Fistuloplasty or stent placement, please discuss other alternatives with your doctor.

## What happens after the procedure?

When the procedure is complete the doctor will remove the catheter and either press on the skin to make sure that the hole does not bleed or close the small hole in the skin with a stitch or glue.

You will go to recovery and be discharged home, usually within two hours.

The stitch will be removed after one hour prior to your discharge home.

## Follow up?

It is important to check daily for the “buzz” in your fistula and call the Renal department if you cannot feel it.

## Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services:

[www.bartshealth.nhs.uk/pals](http://www.bartshealth.nhs.uk/pals)

## Large print and other languages

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. For more information, speak to your clinical team.

এই তথ্যগুলো সহজে পড়া যায় অথবা বৃহৎ প্রিন্টের মত বিকল্প ফরম্যাটে পাওয়া যাবে, এবং অনুরোধে অন্য ভাষায়ও পাওয়া যেতে পারে। আরো তথ্যের জন্য আপনার ক্লিনিক্যাল টিমের সাথে কথা বলুন।

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

یہ معلومات متبادل فارمیٹس میں دستیاب کی جا سکتی ہیں، جیسا کہ پڑھنے میں آسان یا بڑا پرنٹ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید معلومات کے لیے، اپنی کلینکل ٹیم سے بات کریں!

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Reference: BH/PIN/706

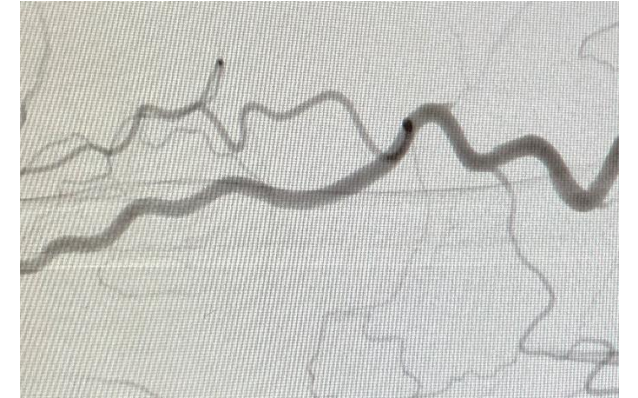
Publication date: June 2022

All our patient information leaflets are reviewed every three years.

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Patient information

# Having a Dialysis Fistulogram or Fistuloplasty



## **What is a Fistulogram / Fistuloplasty?**

A Fistulogram is an examination of the blood vessels that make up your fistula. It is done by injecting X-Ray dye through a small tube in your fistula and using imaging to visualise the blood vessels and look for any narrowing or blockages in your fistula.

A Fistuloplasty is a non-surgical procedure used to open up any blocked or narrow vessels in your fistula.

Any narrowings are opened using a special tube that has a deflated balloon at its tip. The balloon is positioned at the site of the narrowing and inflated and deflated several times. This is done to improve the function of your fistula.

## **Why is it done?**

Your fistula or graft allows you to have efficient dialysis. However, problems in dialysis can arise that indicate there is a problem with the fistula. There may be difficulty in placing the needles during dialysis or the flow may be reduced, and your dialysis quality may be below optimal standard. Since these problems may indicate an anatomical problem, carrying out a Fistulogram allows us to demonstrate and potentially treat the problem.

## **Before your examination**

You will either come in directly from home as a day case patient or be pre-admitted onto a renal ward.

Please inform the department if you have any allergies.

## **Medication and pre-operative preparation**

You will need to be nil by mouth for 6 hours before your appointment. Please take all your medication as usual with a sip of water unless you are on blood thinning medications.

On arrival on the day of your appointment you will be asked to change into a hospital gown and have a cannula inserted.

## **What happens during the procedure?**

You will be brought into the Interventional Radiology room where you will be asked to lie on an X-ray table.

You will be attached to a monitor and your fistula will be prepared ready for the puncture. You will be awake for the procedure.

The skin over the graft/fistula will be numbed with local anaesthetic. A plastic tube (catheter) will be inserted into your dialysis fistula or the artery supplying the fistula.

X-ray contrast dye will be injected through the catheter and x-ray pictures taken. You may be asked to hold your breath.

If the Fistulogram shows a narrowing, then we would proceed to a Fistuloplasty. We may need to insert a stent if there is still not enough blood flow following the Fistuloplasty.

The stent will widen the vessel and improve blood flow.

If the Fistulogram shows a blood clot is blocking one of your vessels, a special drug or

mechanical device may be used to dissolve or remove the clot, this is called thrombectomy or thrombolysis.

## **How long will the procedure take?**

The procedure usually takes 1-2 hours. Please be aware that every effort is made to keep your appointment time. However, since the department deals with emergencies, which cannot be planned, there may be unavoidable delays.

## **What are the benefits?**

- Visualisation of the vessels that make up your fistula.
- Treatment of any narrowing or blockages so the fistula can continue to work properly and achieve optimal dialysis.

## **What are the risks?**

- A Fistuloplasty is considered to be very safe although there is always a small risk of failure of treatment.
- Risks associated with the procedure include pain or discomfort at the catheter insertion site.
- There is a small risk of bleeding.
- There is a risk of losing your fistula due to vessel injury, but this is a very small risk. If we don't intervene then you risk losing the fistula anyway.

## **Female patients**

X-rays can be harmful to an unborn baby and should be avoided by any woman who is or may be pregnant. If you think you may be pregnant, please contact the department.