

Care of your arteriovenous fistula after surgery

Information for patients

This leaflet explains how to care for your arteriovenous fistula after surgery. Read with **Planning for your arteriovenous fistula** leaflet, available on the Trust web site www.ekhft.nhs.uk/renal-patient-leaflets/

How long will my wound take to heal?

- Your wound will take 10 to 14 days to heal.
- We advise you to keep your dressing dry for at least three days before you change it. You will be given spare dressings to take home.
- Keep your wound covered for seven days.
- Avoid any heavy lifting/pressure with your fistula arm for two weeks.
- Do not keep your fistula arm bent for long periods of time.
- Most patients will have dissolvable sutures. We will tell you if stitches/clips need to be removed.

When can I go back to work?

Please ask your nurse or doctor for advice, as this will depend on the type of work you do.

When can I drive again?

We generally advise patients not to drive for at least three days after their surgery.



How can I check my fistula is working?

Remember your fistula is your lifeline for dialysis. You must know how to look after it when you are at home.

- **Thrill** is a vibrational feeling when you place your fingers on the skin over your fistula.
- **Bruit** is the “shoosh-shoosh” noise your fistula makes when you listen through a stethoscope.
- **Twice a day** - this is how often you should check your fistula.

What happens if my hands/fingers start swelling?

Sometimes hands or fingers may swell after your operation; this is normal. It can be relieved by elevating (raising) your arm on several pillows when resting, and avoiding wearing rings, elasticated sleeves, or wristbands. If the swelling continues or you are worried your fistula is not working, please call us for advice (our contact details are on page 4 of this leaflet).

How do I look after my fistula at home?

You play an important part in keeping your fistula healthy.

- Do not take blood pressure measurements from your fistula arm.
- Do not have any blood tests taken from your fistula arm.
- No needles, infusions, or drips go in your fistula arm.
- Do not wear any tight or restrictive clothing on your fistula arm.
- Avoid sleeping on your fistula arm.
- Do not use sharp objects near your fistula arm, for example razors.
- Avoid carrying heavy loads or shopping bags directly over your fistula.
- Do not remove the scabs from the needle sites, as this may cause bleeding or an infection.

Please note in an emergency these guidelines may not apply. You should be guided by the medical staff in attendance.

Will I need a follow-up appointment?

- You will be seen by a nurse in your nearest Renal Unit one week after your surgery, to check your wound is healing and your fistula is working.
- If you are not yet on dialysis, you will also be seen six weeks after your surgery by a nurse and surgeon in Renal Outpatients at Kent and Canterbury Hospital (K&C), Palm Bay Outpatients at the Queen Elizabeth the Queen Mother (QEQM) Hospital, the Renal Unit at William Harvey Hospital, or the Maidstone Renal Unit Clinic. They will check your fistula.
- If you are already on dialysis, your nurse will check your fistula in six weeks and start to use it for dialysis when ready.

How can I help my fistula develop?

- A fistula can take up to six to eight weeks to mature ready for haemodialysis.
- Exercising the arm in which the fistula is created can sometimes help the fistula to develop faster. You will be given a sponge ball to use to help with your fistula development.
- Place the ball in the hand with the fistula. Squeeze the ball repeatedly for five to 10 minutes. Try and repeat this two to three times a day.
- If your arm becomes tired or painful during the exercises, stop and rest your arm.

What complications may occur?

- **Infection** is not common in a fistula. If you develop pain, redness, or the skin around your fistula becomes hot, please tell your access nurse, dialysis nurse, or doctor. You may need an antibiotic if you have an infection.
- **Thrombosis** (blood clot) can be a cause of fistula failure, but this type of clot is not life-threatening.
- **Arterial Steal Syndrome** is caused by the fistula diverting too much blood in to the vein, so your hand then receives less blood supply. The signs and symptoms of steal syndrome are coldness in the hand/fingers. In mild cases this will be monitored, in more severe cases your fistula may need to be refashioned surgically.

If you are worried about any of the above, please call us for advice (our contact details are on page 4 of this leaflet).

When is a fistula ready to use?

- How quickly a fistula develops varies depending on how good your vessels are before surgery, and your general health.
- A fistula is ready, or mature, when your vein has grown large enough and strong enough to support the required dialysis needles. This usually takes around six weeks but can take less or longer in some cases. Your dialysis nurse will check your fistula and will know when it is mature.
- For the first few weeks your fistula will be adjusting to being needled. During this time the walls of your fistula are quite soft, so sometimes the needle may need to be reinserted. This is common and does not mean that your fistula is not working properly.
- Unfortunately because the vein is now connected to an artery, these failed needle sites are likely to bruise. This often looks worse than it is because the bruising is just under the surface of your skin and therefore spreads out sideways. As long as your fistula is working well you need not be concerned about this bruising, as it will slowly go away on its own. If you are concerned, always ask a member of staff.
- If you have a tunnelled dialysis line for dialysis, once your fistula is being used for dialysis using two needles successfully for two weeks, your nurses will arrange for the line to be removed.

How long will my fistula last?

There is no definite answer to this question. A small number of fistula never work and you may return from theatre with a failed fistula. Fistula can also fail at any stage, even after years of use if you become ill or suffer an episode of low blood pressure. Other reasons can be direct trauma (knock or hit) to your fistula, infection, or a change in how your blood clots.

However the majority of fistula work immediately following surgery. You should remember that a successful fistula is less likely to form clots or become infected than other types of access. Also, fistula tend to last years longer than any other kind of access.

What should I do if my fistula bleeds?

- **Heavy bleeding is rare, but it is a medical emergency.**
- **If this happens, call 999 immediately.**
- **Apply direct pressure to the area that is bleeding using gauze and several fingers (do not use a large towel, as this spreads out the pressure).**
- **Elevate (raise) your arm above your head.**
- If your fistula bleeds lightly after you get home from your surgery or a dialysis session, sit down and apply pressure with clean gauze for 10 minutes. If the bleeding does not stop after this time, please contact your Renal Unit or Marlowe Ward for advice.
- After your dialysis sessions, a member of staff will apply pressure to the fistula points to stop the bleeding. This generally takes five to 15 minutes and then you will go home with gauze covering the sites.

Where can I find out more?

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| • Renal Dialysis Access Nurses, K&C Hospital Canterbury
(Monday to Friday, 8am to 4:30pm) | Telephone: 01227 86 43 05 |
| • Marlowe Ward, K&C Hospital Canterbury
(Out of hours or weekends) | Telephone: 01227 78 31 00 |
| • Thomas Becket Haemodialysis Unit, K&C Hospital | Telephone: 01227 78 30 47 |
| • Haemodialysis Unit, William Harvey Hospital Ashford | Telephone: 01233 65 18 72 |
| • Haemodialysis Unit, QEQM Hospital Margate | Telephone: 01843 22 55 44 |
| • Haemodialysis Unit, Medway Maritime Hospital Medway | Telephone: 01634 82 51 05 |
| • Haemodialysis Unit, Buckland Hospital Dover | Telephone: 01304 22 26 95 |
| • Maidstone Renal Unit, Maidstone Hospital Maidstone | Telephone: 01622 22 59 01 |

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation