



Care for your arteriovenous fistula after surgery

Information for patients from the Kent Kidney Care Dialysis Access Team

This leaflet explains how to care for your arteriovenous fistula after surgery. Read with Planning for your arteriovenous fistula (<https://leaflets.ekhft.nhs.uk/planning-for-your-arteriovenous-fistula/>) leaflet.

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.
- Check your fistula **twice a day**.

What happens if my hands / fingers start swelling?

Sometimes hands or fingers may swell after your operation; this is normal. Swelling 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 at the end 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.
- Make sure 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?

- A nurse will see you in your nearest Renal Unit one week after your surgery. They will check your wound is healing and your fistula is working.
- If you are not yet on dialysis, a nurse and surgeon will see you six weeks after your surgery at one of the following renal units. They will check your fistula.
 - Renal Outpatients at Kent and Canterbury Hospital (K&C).
 - Palm Bay Outpatients at the Queen Elizabeth the Queen Mother (QEQM) Hospital.
 - Renal Unit at William Harvey Hospital.

- Maidstone Renal Unit Clinic.
- 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. Please tell your access nurse, dialysis nurse, or doctor if you experience the following. You may need antibiotics if you have an infection.
 - Develop pain.
 - Redness.
 - The skin around your fistula becomes hot.
- **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 into 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 surgically refashioned.

If you are worried about any of the above, please call us for advice. Our contact details are at the end 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 we may need to reinsert the needle. 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.
- **Patients with a tunnelled dialysis line.** 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. 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?

- Renal Dialysis Access Nurses, K&C Hospital Canterbury
Telephone: 01227 864305 (Monday to Friday, 8am to 4:30pm)
- Marlowe Ward, K&C Hospital Canterbury
Telephone: 01227 783100 (Out of hours or weekends)
- Thomas Becket Haemodialysis Unit, K&C Hospital Canterbury
Telephone: 01227 783047

- Haemodialysis Unit, William Harvey Hospital Ashford
Telephone: 01233 651872
- Haemodialysis Unit, QEQM Hospital Margate
Telephone: 01843 225544
- Haemodialysis Unit, Medway Maritime Hospital Medway
Telephone: 01634 825105
- Haemodialysis Unit, Buckland Hospital Dover
Telephone: 01304 222695
- Maidstone Renal Unit, Maidstone Hospital Maidstone
Telephone: 01622 225901

What do you think of this leaflet?

We welcome feedback, whether positive or negative, as it helps us to improve our care and services.

If you would like to give us feedback about this leaflet, please fill in our short online survey. Either scan the QR code below, or use the web link. We do not record your personal information, unless you provide contact details and would like to talk to us some more.

Giving feedback about this leaflet



<https://www.smartsurvey.co.uk/s/MDOBU4/>

If you would rather talk to someone instead of filling in a survey, please call the Patient Voice Team.

- **Patient Voice Team**
Telephone: 01227 868605
Email (ekhuft.patientvoice@nhs.net)

This leaflet has been produced with and for patients.

Please let us know:

- If you have any accessibility needs; this includes needing a hearing loop or wanting someone to come with you to your appointment.
- If you need an interpreter.
- If you need this information in another format (such as Braille, audio, large print or Easy Read).

You can let us know this by:

- Visiting the Trust web site (<https://www.ekhuft.nhs.uk/ais>).
- Calling the number at the top of your appointment letter.
- Adding this information to the Patient Portal (<https://pp.ekhuft.nhs.uk/login>).
- Telling a member of staff at your next appointment.

Any complaints, comments, concerns or compliments, please speak to a member of your healthcare team. Or contact the Patient Advice and Liaison Service on 01227 783145 or email (ekh-tr.pals@nhs.net).

Patients should not bring 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 has been handed into Trust staff for safe-keeping.

Further patient information leaflets are available via the East Kent Hospitals' web site (<https://www.ekhuft.nhs.uk/patient-information>).

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