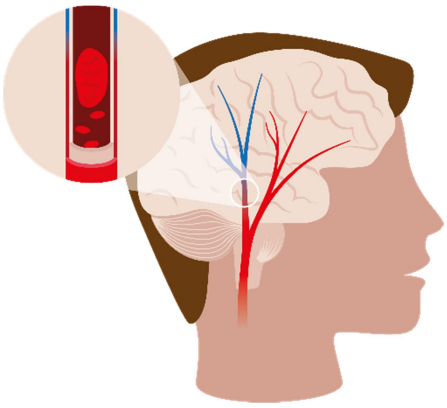
Endovascular Thrombectomy | Radiological intervention to remove a blood clot and to restore circulation after an ischemic stroke

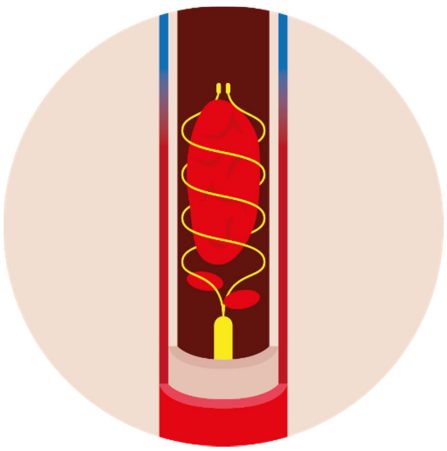
An ischemic stroke (cerebrovascular accident) is caused by the obstruction of blood flow in the brain. **A stroke occurs when a blood clot blocks a blood vessel.** The obstruction affects oxygen and nutrient intake, which can damage brain cells. Stroke sequalae depend on the part of the brain area affected and on the extent of the damage.



Rapid intervention is required to re-establish blood flow to the brain as quickly as possible to preserve normal brain function and to limit any potentially severe outcomes.

WHAT IS A THROMBECTOMY?

Thrombectomy is an image-guided procedure used to remove a clot and to restore blood circulation. A catheter is inserted in the groin and guided toward the blocked artery in order to remove the clot. Methods used include aspiration, entrapment in a basket-like device, or a combination of both.



RAPID TREATMENT REQUIRED

The procedure takes place under a local or general anesthesia, depending on the patient's condition. At the CIUSSS de l'Estrie – CHUS, thrombectomies are performed only at the interventional neuroradiology department of Hôpital Fleurimont.

Thrombectomy is recommended in the acute phase in the treatment of ischemic stroke among eligible users within **6 hours of the beginning of a stroke. In some cases, the delay may extend up to 24 hours after the onset of signs and symptoms.** The faster the intervention, the lower the likelihood of permanent brain damage.

A thrombectomy can be performed as a complement to thrombolysis (medical technique involving the intravenous injection of a medication to dissolve a clot).

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THROMBECTOMY PROCEDURE

1. Nurses will complete:
    - Blood sampling
    - Weight measurement (to determine precise medication dose to be administered)
    - Electrocardiogram (ECG) to check cardiac activity
    - Capillary blood glucose test to measure blood sugar levels (glycemia)

2. A computed tomography scan (Brain CT scan) will be taken to assess the extent of the stroke and to pinpoint the artery blocked by the clot.

3. **If it is indicated**, you will then be sent to the operating room for a thrombectomy. If you are not under general anesthesia, you might experience discomfort for a few seconds while the catheter is inserted in the groin. The passage of the catheter through the arteries is not painful.

4. During and post-treatment and for **at least 24 hours**, the caregiving team will frequently take both your vital signs (blood pressure, pulse, breathing, temperature, etc.) and your neurological signs (pupillary assessment, limb strength and sensation).

PRECAUTIONS TO BE TAKEN AFTER TREATMENT

You will be sent to intensive care unit.

- You must remain **in bed for at least 24 hours** and your **leg through which the catheter was inserted must remain extended for a minimum of 6 hours** to prevent bleeding. A dressing will be put on the insertion site.

- Notify the nurse rapidly if you experience the following symptoms:
    - Sudden headache
    - Dizziness
    - Difficulty breathing or swallowing
    - Feeling/Sensation that the lips, tongue, or swelling of the back of the throat
    - Nausea or vomiting
    - Bleeding

DO YOU HAVE ANY QUESTIONS?

Please speak to your attending physician or to your nurse.

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