UW Medicine

Aneurysm Clipping *How to prepare and what to expect*

This handout explains aneurysm clipping, a surgery that is done to keep a weak artery from bursting.

What is an aneurysm?

An aneurysm is a weak point on an artery wall. This weak point bulges out and may look like a balloon.

What is aneurysm clipping?

Aneurysm clipping is surgery that is done to keep the aneurysm from rupturing (bursting). The surgery is called an open craniotomy. It is done through an opening in the skull. Your neurosurgeon has recommended this surgery to treat your aneurysm.



The circle shows an aneurysm in an artery wall.

How do I prepare?

You will return to the outpatient clinic for a pre-surgery visit. At this visit, you will meet with:

- A nurse who will give you information and instructions about your procedure
- A pre-anesthesia nurse to talk about medicines that will be used during your surgery
- The Neurosurgery Team to make sure all of your questions are answered
- Your patient care coordinator to make sure you have all your follow-up visits scheduled before your day of surgery

Day Before Your Surgery

A nurse will call you the day before your surgery to review your instructions. The nurse will:

- Review your medicines and tell you if you need to stop taking any of them before your surgery
- Ask if you have allergies to medicines, contrast (X-ray dye), or shellfish
- Remind you not to eat or drink anything starting at least
 hours before you arrive for your surgery.

Day of Your Surgery

At Home

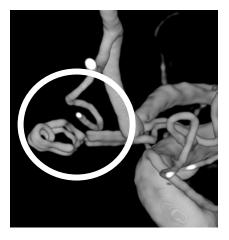
- Up until **8 hours** before you arrive at the hospital, eat a healthy, balanced diet.
- Up until **6 hours** before you arrive at the hospital, eat a light meal. Avoid heavy foods, such as those with a large amount of fat.
- Up until **2 hours** before you arrive at the hospital, we encourage you to drink clear liquids such as water, plain tea or coffee (no milk or creamer), clear broth, Gatorade, soda, apple juice, or Boost Breeze liquid supplement.
 - If you have diabetes: Drink clear liquids such as water, plain tea or coffee (no milk or creamer), clear broth, and diet soda. Avoid juice, regular soda, and sports drinks, since these can raise your blood sugar levels.
- **Starting 2 hours** before you arrive at the hospital, do not eat or drink anything, unless your doctor or nurse has told you otherwise.
- If you must take medicines, take them with **only** a small sip of water.

At the Hospital

- Check into Surgery on the Ground Floor of the Maleng Building.
- A nurse will greet you and help prepare you for your surgery.
- An escort will take you on a stretcher to meet the Anesthesia Team.
- The Neurosurgery Team will review the consent forms with you. You will sign these if you have not already done so.
- An *intravenous* (IV) line will be placed in a vein in your arm.
- You will receive a *sedative* (medicine to make you relax) through the IV.
- You will be taken into the operating room.

During the Surgery

- You will be given *general anesthesia*, a medicine that will make you sleep during the surgery.
- An incision will be made in your scalp to gain access to your skull.
- Your neurosurgeon will drill a small hole in your skull and then use a special drill to remove a bone flap. This allows access to your brain and the blood vessels in the area. A high-powered microscope will be used to magnify and light the area.
- A special aneurysm clip will be placed at the base (neck) of the aneurysm to close it permanently.
- Small instruments will be used to remove the aneurysm.



The circle shows the clip that is placed at the base of the aneurysm to close it.

- The bone flap will be replaced after surgery using small metal brackets made of titanium. The clip and brackets will stay in your body. They are safe for MRI scans and will not set off metal detectors.
- Your surgery will last about 4 to 6 hours.

After Your Surgery

- After your surgery, you will be taken to Recovery. You will spend about 1 to 2 hours in Recovery while waking up from anesthesia.
- You will then be moved to the Neuro Intensive Care Unit on the 2nd floor of the West Hospital Building. Your friends and family can take turns visiting you there.
- The day after surgery, you will have a follow-up *angiogram* (an X-ray of your blood vessels).
- You will most likely stay in the hospital 2 to 4 days.
- When you are discharged, you must have a responsible adult who can be with you on the ride home.
- Your incision will be closed with staples or sutures. These will need to be removed 14 days after surgery. This can be done by your primary care provider (PCP) or at the neurosurgery clinic.

- Your surgeon will see you at your follow-up visit 6 weeks after surgery. You will have a CT scan right before this visit.
- You will have another angiogram 12 to 18 months after surgery so your neurosurgeon can check how the treatment is working.

Pain Control

- You will be sent home with a short-term prescription for pain after surgery. Take this medicine only as instructed. If you need refills, talk with your PCP.
- For mild to moderate pain, you may take *nonsteroidal anti-inflammatory drugs* (NSAIDs) such as ibuprofen (Advil, Motrin) or naproxen (Aleve, Naprosyn). Follow the dose instructions on the bottle.

Self-care at Home

Your health is important to us. A nurse will call you after you leave the hospital to ask how you are doing and to answer your questions.

- Walk every day to speed your recovery. Start slow and increase your distance as you are able.
- It is safe to go up and down stairs.
- To prevent infection, do not shower for 4 to 5 days after your surgery.

For 6 weeks After Your Surgery

- Do **no**t do strenuous activity.
- To prevent pressure on your head, do **not** bend over at the waist.
- Do **not** strain when having a bowel movement.
- Do **not** lift anything that weighs more than 10 pounds. (A gallon of milk weighs almost 9 pounds.)

What to Expect

After this surgery, it is normal to have:

- Numbness at the incision site. This can last up to 1 year.
- Tenderness around your incision for several weeks.
- A dull headache for 1 to 2 weeks.
- A small strip of hair is shaved at the incision site. This hair will grow back.

When to Call

Call the neurosurgery clinic **206.744.9340** and press 2 if you have:

- · Severe or unusual headache
- Nausea or vomiting
- Problems with your vision
- Problems with balance or dizziness, problems walking, or poor coordination
- Loss of bowel or bladder control

When to Call 911

Call 911 right away if you have any stroke-like symptoms such as:

- · Weakness or loss of feeling
- Problems talking
- · Problems walking
- Problems seeing
- · Severe headache that starts suddenly

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

To speak with a clinic nurse weekdays from 8 a.m. to 4 p.m., call 206.744.9340 and press 2.

After hours and on weekends and holidays, call the Community Care Line (24-hour nurse) at 206.744.2500 or 800.607.5501.