



Saint Mary's Hospital

Maternity Services

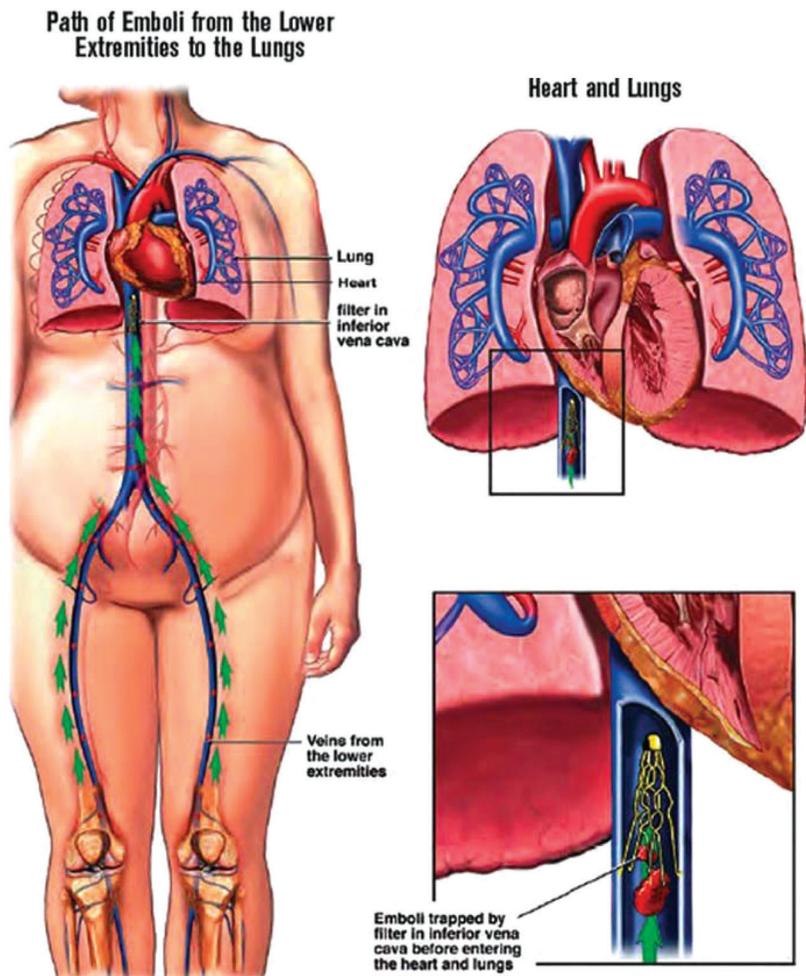
Insertion of an IVC filter

Information For Patients



Your consultant has asked for you to have an Inferior Vena Cava filter (IVC filter) inserted into you. This is an umbrella-like device, which we place into the large vein in your abdomen from a neck vein.

The device is designed to stop large clots moving from the leg veins through to the lungs (pulmonary embolus). This can be inserted temporarily. An attempt at filter retrieval must be made within 100 days, although this is not always possible.



Why do I need a vena cava filter?

There are a number of reasons why you may require a filter to be placed: If you have clots passing to the lungs then this is usually treated with anticoagulant drugs, which thin the blood and stop the formation of blood clots. Sometimes women are not able to have the anticoagulant drugs, or it may be that clots pass to the lungs despite the drugs. In both cases a filter is placed to stop this from happening.

Will it hurt?

Whilst you may feel some discomfort in the skin and deeper tissues during injection of the local anaesthetic, the actual insertion should not be painful.

Are there any complications?

Most procedures are straightforward, however as with any procedure there is a small chance of side-effects or complications and these include:

- **IVC thrombosis** – The large abdominal vein into which the filter is inserted becomes blocked with blood clot. The legs may swell and become painful. This is very rare – approximately 1 in 20 (5%) of patients.
- **Insertion site thrombosis** – Clots form where the vein was punctured causing local discomfort and swelling in 2-3% of patients.
- **Filter migration** – The filter moves from its intended position in less than 1% of patients.
- **Filter misplaced** – Incorrect site of filter, which may require a further procedure in less than 5% patients.

- **Recurrent Pulmonary Embolus or Deep Vein Thrombosis** – With a filter in place, there is a much reduced chance of a blood clot reaching the lung. However, clot can still recur therefore it is important to continue blood clotting medication as prescribed by your doctor.
- **Infection** – Infection of the filter can rarely occur.
- **Bleeding** – Internal bleeding from where the IVC filter has traumatised the vein has occasionally been reported.

Your consultant has recommended this procedure as being the best option. If you are concerned about any of these risks or have further questions, please speak to your consultant.

What actually happens during insertion of a vena cava filter?

- You will usually be an in-patient already.
- You may need to undergo some **routine tests** before your procedure which will include a **full blood count** and a test of your **kidney function**.
- You will be asked some routine questions about your general health, the medicines you take at the moment and any allergies you have.
- You will be asked to sign a consent form to say that you understand what you have come into hospital for and what the procedure involves.
- You will be asked to have a bath/shower before your procedure.
- You will be able to have a light breakfast or lunch before your IVC filter insertion.
- You will be given a theatre gown to wear.
- A heart rate monitor of your baby (CTG) will also be undertaken.

- Your procedure will be carried out using local anaesthetic. You may be offered a sedative to help you relax.
- You will either be brought to the X-Ray Department on a wheelchair or trolley or attend the department as an out-patient.
- The procedure usually takes 30-60 minutes. A midwife/nurse will be with you all the time.
- You will be lying flat (with a tilt) during the procedure.
- You will be awake throughout the procedure but your neck will be numbed with local anaesthetic.
- A fine tube will be passed into a vein from the neck with X-ray guidance.
- A fine tube will be manipulated into the large abdominal vein (IVC) that will be measured for size. The filter is inserted through a long tube into the IVC and its correct position will be confirmed with X-rays.
- Afterwards we remove the tubes and press on your neck for a couple of minutes to prevent any bleeding.
- You will then be taken back to the ward on a trolley where you may be asked to sit up for 1-2 hours.
- A midwife will check your neck (for any bleeding or swelling), pulse and blood pressure. She will also undertake a further heart rate assessment of your baby (CTG).

You may be able to go home after a period of observation following the procedure. Your consultant will discuss this with you.

Please avoid strenuous exercise, heavy lifting or straining for 48 hours after the procedure.

All X-ray procedures involve some exposure to radiation. The length and level of exposure to radiation for both you and your baby from X-rays in medical procedures is **very strictly** controlled and is **kept to the minimum** amount possible. Remember, the risk to you and your baby's health of not having this procedure is considerably greater than the risk from the radiation use.

If you notice any bleeding from the neck, call for a midwife on the ward or if at home go immediately to your local Accident and Emergency.



PLEASE NOTE: At some point in the future it will be necessary to **remove** the IVC filter – this should be discussed with you before the filter is inserted. An appointment **must** be arranged **before** you go home.

Supervisors of Midwives

All Midwives are supported by a Supervisor of Midwives whose aim is to ensure the safety and wellbeing of you and your baby. If you have any issues regarding your pregnancy or maternity care you can contact a Supervisor of Midwives at any time, day or night on:

Tel: 0161 276 1234 (Ask for bleep number 6060).

Suggestions, Concerns and Complaints

If you would like to provide feedback you can:

- Ask to speak to one of the Matrons or Lead Nurse.
- Write to us: Patient Advice and Liaison Services, 1st Floor, Cobbett House, Manchester Royal Infirmary, Oxford Road, Manchester M13 9WL
- Log onto the NHS Choices website www.nhs.uk – click on 'Comments'.

If you would like to discuss a concern or make a complaint:

- Ask to speak to one of the Matrons or Lead Nurse – they may be able to help straight away.
- Contact our Patient Advice and Liaison Service (PALS) – Tel: (0161) 276 8686 e-mail: pals@cmft.nhs.uk. Ask for our information leaflet.

We welcome your feedback so we can continue to improve our services.

No Smoking Policy

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Central Manchester site.

For advice and support on how to give up smoking, go to <http://www.nhs.uk/smokefree>.

Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

تتص سیاستنا علی عدم السماح لافراد عائلة المرضى او اقاربهم او اصدقائهم بالترجمة لهم. اذا احتجت الى مترجم فيرجى ان تطلب ذلك من احد العاملين ليرتب لك ذلك.

بماری یہ پالیسی ہے کہ خاندان ، رشتہ دار اور دوست مریضوں کے لئے ترجمہ نہیں کرسکتے۔ اگر آپ کو مترجم کی ضرورت ہے تو عملے کے کسی رکن سے کہیں کہ وہ آپ کے لئے اس کا بندوبست کر دے۔

ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

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我们的方针是，家属，亲戚和朋友不能为病人做口译。如果您需要口译员，请叫员工给您安排。



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