

All you need to know about your Dialysis Fistula

(Arterio-venous Fistula)

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Checking your Fistula

Everyday check for a 'thrill' and 'bruit'. These tell you that your fistula is working.

- **'Thrill' or 'buzz'**
A thrill or buzz is like a vibration caused by blood flowing through the fistula and can be felt by placing your fingers just above your incision line.
- **'Bruit' (pronounced brew-ee)**
Listen for a sound called a 'bruit' near the fistula incision site. A 'bruit' is a whooshing sound. You may need to use a stethoscope to hear the 'bruit'. The Dialysis Access Nurse can teach you how to listen for a 'bruit'.
- **Check your fistula** arm for any changes in colour, temperature, tingling, numbness, pain or swelling. Notify the Dialysis Access Nurse or your dialysis nurse if any of these things occur.

When should you contact us?

If you experience any of the following symptoms:

- The fistula becomes red, swollen or painful. The appearance of the fistula changes, for example a lump appears
- You experience a tingling sensation in your hand and/or fingers
- You can no longer feel a 'thrill' or 'buzz' in the fistula.

Contact details

Business Hours

(Monday to Friday 8am to 4:30pm)

Canberra Hospital Dialysis Access Nurse

Phone 02 5124 4564 or

Your local dialysis unit on _____

After hours

Attend the Emergency Department of your local hospital if you experience any of the described symptoms after hours,

Show your alert card when attending the Emergency Department

The alert cards tell clinicians that you are a renal patient and have a dialysis access. If you don't have an alert card, please ask your nurse.

Accessibility

If you have difficulty reading a standard printed document and would like an alternative format, please phone 13 22 81.



If English is not your first language and you need the Translating and Interpreting Service (TIS), please call 13 14 50.

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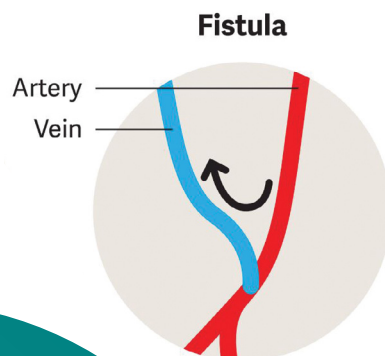


**Canberra Health
Services**

What is an Arterio-venous fistula (AVF)?

A surgeon forms an arterio-venous fistula (AVF, or often just called fistula) by connecting an artery (a blood vessel transporting blood from the heart to the body) directly to a vein (a blood vessel taking blood from the body to the heart). This is usually done at the wrist or elbow. This causes more blood to flow through the vein.

As a result, the vein grows larger and stronger and makes it possible to insert the needles (cannulae) required for dialysis treatment. It takes approx. 8-12 weeks after the operation for the fistula to be ready to be used.



Healthy fact:

With this procedure the vein grows larger and stronger and makes it possible to insert the needles (cannulae) required for dialysis treatment.

What are the risks?

There are some risks to having a fistula:

- **Infection:** An infection may develop at the wound site; this may need treatment with antibiotics.
- **The fistula may block and stop working:** this may require further surgery.
- **Swelling in the fistula arm following surgery:** It is important to move the arm - gentle frequent movements are recommended. This movement may help swelling to resolve and will prevent the arm from becoming stiff.
- **Loss of feeling or pain in the hand and/or fingers:** This can happen if you have reduced blood flow to your hand and you should discuss this with the nurses.

After your operation

The operation takes about one hour to complete and you will need to stay in hospital overnight afterwards. You will need to arrange for someone to take you home.

You may notice a small amount of blood on the dressing and/or some bruising around the wound site. This is normal and should resolve within a few days.

The stitches on your wound may be dissolvable or non-dissolvable, and we will advise you about this before you leave the hospital. If they are non-dissolvable stitches, ask your GP to remove them 10- 14 days after your operation. If they are dissolvable, you don't need to do anything.

You may experience pain in your arm and it may be swollen and a little red. Nurses will give you some pain relief if needed. The nurses will tell you what you can take for pain relief when you go home.

Your hand should be able to feel something touching you, be warm when you touch it and your fingers should move normally. Your hand should not feel cold. If you notice a change in the way your hand feels or moves, please tell the nurses.

Before you leave hospital

The dressing will be changed before you leave hospital. The new dressing needs to remain in place for 10- 14 days and then can be removed by your GP, dialysis nurses or the dialysis access nurse.

You should be seen by the Dialysis Access Nurse before you go home. If you don't see the nurse before going home, you will be contacted for an access review 2- 4 weeks after surgery. For patients living in Southern NSW, please arrange a follow up appointment with the renal outreach nurse, renal clinic or your GP.

You will also be given an exercise sheet with exercises you can do with your arm. Do not start the exercises until 2 weeks after surgery or after you have seen the Dialysis Access Nurse or NSW Renal Outreach nurse.

Caring for your Fistula

You can take care of your fistula by following these steps:

- Be careful not to knock your arm for the first few days after your fistula has been formed.
- Rest your arm; the wound needs time to heal.
- Do not lift anything heavy with your fistula arm for the first two weeks.
- Do not let anyone take blood from your fistula arm.
- Do not let anyone check your blood pressure on the fistula arm.
- Do not wear any tight sleeves or watches that may restrict the flow of blood through your fistula arm.
- Be careful not to lie on your fistula arm.