

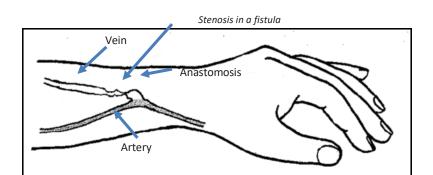


**Patient Educational Series** 

## Complications can occur in any

type of vascular access

A stenosis is a common complication that can arise when the access is first placed or later as the access ages. Fortunately, if a stenosis is detected early, it can usually be readily treated. This diagram shows a forearm fistula. Stenosis is located close to the artery and vein connection, called the *anastomosis*.



A *stenosis* is simply a narrowing that restricts blood flow. It may be inside the fistula or graft, in an artery

that supplies blood to the access or a vein that

## There are several warning signs that may indicate that a stenosis is present

• Changes in the thrill (buzzing feeling) and bruit (whooshing sound) in the access

returns blood to the heart.

- Changes in arterial or venous pressures and more frequent machine alarms
- Increased bleeding time after dialysis or bleeding that restarts after it has stopped
- Development or increase in the size of aneurysms (bumps on the skin surface)
- Difficulty with needle placement or increased discomfort with insertion and removal
- Decreases in the lab work results regarding dialysis efficiency

## Be in the "know"

Ask your dialysis nurse or PCT to teach you how to perform an access exam using the same look-feel-listen techniques they use to evaluate your fistula or graft.

- Know how to check the thrill and bruit in your access
- Know what the alarms on the machine indicate
- Know your average bleeding time and recognize if the time is increasing
- Know your lab work results. Ask the reason it changes if the results decrease
- Know that most cases of stenosis, if detected early, are treated fairly easily

This information is not intended to replace the physician's guidance for medical care.