



Kuether Brain and Spine
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Discharge Instructions: Intracranial Aneurysm Clipping

General Information

An aneurysm develops when the wall of a blood vessel weakens. This causes part of the vessel to balloon outwards. Most of the time aneurysms develop where the arteries branch out.

Common risk factors include:

- Smoking
- High blood pressure
- Personal and family history of aneurysms

If the aneurysm ruptures, you might notice some or all of these signs:

- Worst headache of your life
- Double vision
- Nausea and/or vomiting
- Neck stiffness
- Change in level of consciousness

One treatment option is to place a clip around the neck of the aneurysm. Your surgeon may also place a clip around the blood vessels that supply the aneurysm. This cuts off the blood supply to the aneurysm, allowing it to clot and shrink.

Potential Complications

The risk of complications is greatest right after surgery. Patients with a ruptured aneurysm are more likely to have complications than patients with elective surgery. Your nurse and doctor watch you closely during this time period. By the time you are ready to go home, the chance of having a complication is relatively small.

- Aneurysm bleeds again – risk is greatest in the first 24 hours
- Vasospasms occur when the artery squeezes shut. This can cause a stroke. Risk is greatest between 4 to 10 days.
- Hydrocephalus
- Seizures
- Changes in sodium levels

Common physical symptoms after an aneurysm clipping

- Headaches
- Incisional pain
- Jaw pain
- Clicking noises in your head when you change positions
- Constipation
- Temporary hearing loss
- Visual disturbances
- Fatigue

Common emotional experiences

It is normal to have fears after surviving a brain aneurysm. You are not alone. You may experience some or all of the following:

- Depression
- Irritability, frustration, and confusion
- Distractibility
- Insomnia
- Loneliness
- Lowered self-esteem or relationship changes

Recovering from surgery

Everyone recovers from surgery at a different rate. We cannot tell you how long it will take you to return to your baseline. To promote healing, follow these guidelines:

- Get plenty of rest. Fatigue is very common. You will find that it is more exhausting to do normal tasks. Schedule rest breaks into your day.
- Diet and constipation. Eat a well balanced diet high in fiber. Drink plenty of water. A stool softener may also be ordered. You will need to drink enough water to allow the stool softener to work. Increasing your activity level may also help reduce constipation.

Activities

Gradually increase activities.

- Do not lift heavy objects or strain
- Do not drive if you've had a seizure or taking pain medications. Your doctor will tell you when it is okay for you to drive.
- It is okay to participate in sexual activities unless instructed otherwise.
- Ask your doctor when you may return to work. It is important not to push yourself back to work too fast. Send FMLA paperwork to your doctor (if applicable).

Care of incisions

Keep your incisions clean and dry. You will receive specific instructions on when you can shower. It is normal for your incision to feel numb and tender. As your healing progresses, you may notice that your incision itches. You may want to avoid sleeping on that side if it is uncomfortable.

Headaches

Having a headache doesn't mean that your surgery didn't work. When you get a headache, it may be time to rest in a quiet room. Take your pain medication when your headache starts – it takes about 30 minutes for it to start working.

Jaw pain. This should improve with time. Practice opening and closing your jaw.

Stop smoking. Avoid caffeine, alcohol, and recreational drugs.

Medications. Resume your usual medications as directed by your doctor. Make sure that your doctor knows about any herbal supplements or vitamins you are taking.

Dealing with short-term memory loss

You may find that it is hard to remember things or a familiar task is harder to complete. This is not uncommon. Your brain needs to relearn how to do the things it used to be able to do.

- Try breaking down a task into small steps
- Avoid multi-tasking.
- Write down everything you need to remember in a planner or electronic device.
- Use a med box to organize your medications.
- Set your alarm on your cell phone if you cannot remember to take your medications or to remind you to do something.

You should call your surgeon if:

- Your headaches are not controlled by pain medications or activity modification.
- You have sudden confusion or changes in alertness.
- You have discharge, redness, or warmth of incision site.

You should call your PCP if:

- You have feelings of sadness, hopelessness, loss of interest in your normal activities, or difficult sleeping.
- You are struggling with constipation

You should call 911 if:

- First seizure or a seizure lasting longer than 5 minutes.
- Worst headache of your life, double vision, stiff neck, change in consciousness.

For more information:

The Brain Aneurysm Foundation: www.bafound.org

Oregon Brain Aneurysm Support Group: call 503-574-6595 to register.



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Management of Constipation

Constipation is a common problem associated with the use of narcotic pain medications, dehydration, and lack of activity. Management of this problem can be very straightforward if taken care of right away.

BASIC CARE:

- a. Stay well hydrated (6-8 8 ounce glasses of water or other liquids a day)
- b. Eat a high fiber diet. Fruits and especially vegetables are very important. Grains such as bran fiber or whole wheat or oats can be helpful. Aim for 15-30 grams of dietary fiber per day.
- c. Walk often as tolerated.
- d. Reduce narcotic use as tolerated.

RELIEF OF CONSTIPATION:

If constipation does occur, there are several ways to deal with it, such as prune juice, dried fruits, etc. If something more is needed, a dose or two of milk of magnesia may work.

For continued constipation: try Magnesium Citrate. This is found over the counter at most grocery stores and pharmacies. It comes in a bottle and often looks like generic soda. Drink half of a bottle at a time, and for no results in half an hour drink another half bottle. May repeat for 2 bottles in 24 hours.

If still constipated, see below:

Items Needed:

1 quart of Gatorade, Miralax 14 dose bottle, and two Dulcolax laxative 5mg tablets.

- a. Mix half of the Miralax in the quart of Gatorade.
- b. Take two 5mg Dulcolax laxative tablets.
- c. Wait ½ hour, then start drinking the Gatorade/Miralax mixture. Drink 1 glassful every 20 minutes until gone.
- d. You may repeat this regimen again, but it would be unlikely that you will remain constipated with two rounds of this cocktail. Remember, this may cause dehydration due to diarrhea, so drink fluids as needed.