
Fluoroscopic Guided Embolisation

Radiology Department

Patient Information



Contents

Introduction	1
What is a fluoroscopic guided embolisation?	1
Why do I need an embolisation?	1
Who has made the decision?	1
Who will be doing the procedure?	2
Where will the procedure take place?	2
Are there any risks or complications?	2
How do I prepare for the procedure?	2
Can I bring a relative or friend?	3
When you arrive at The Royal Marsden	3
What happens during the procedure?	4
Will it hurt?	5
How long will it take?	5
What happens afterwards?	5
Contact details	6
Further information	6

Introduction

Your doctors have recommended that you have a procedure called a fluoroscopic guided embolisation. They will have weighed the benefits of having this procedure against the possibility of complications - your doctors will have discussed these with you. If you are still unsure about the benefits of having the procedure, please ask.

This leaflet explains what the procedure involves, the possible risks and the complications you may experience.

It is important that you fully understand what is involved before you sign the consent form.

What is a fluoroscopic guided embolisation?

A fluoroscopic guided embolisation is a treatment option where medication or synthetic materials called embolic agents are placed through a catheter (small tube) into a blood vessel, to prevent blood flow to an area in the body. The fluoroscopic part means that the procedure is guided using a special x-ray technique called fluoroscopy.

Why do I need an embolisation?

This treatment can be used to stop abnormal bleeding, block off blood supply to a tumour, treat aneurysms (bulge in a blood vessel, caused by a weakness in the vessel wall) and destroy abnormal connections between arteries and veins – this has less complication when compared to open surgery.

Who has made the decision?

The consultant in charge of your case, and the doctor carrying out the procedure will have discussed your individual situation, and feel that this is the best treatment option for you. However, your opinion will also be taken into account and if, after discussion with your doctors, you do not want the procedure carried out, you can decide against it.

Who will be doing the procedure?

A doctor called an interventional radiologist will carry out the procedure. They are able to see what they are doing by using x-rays (fluoroscopy) and other scanning equipment.

They will be assisted by radiology nurses and radiographers who will look after you throughout the procedure.

Where will the procedure take place?

This procedure is carried out in a room in the x-ray (radiology) department.

Are there any risks or complications?

- Any procedure that requires placement of a catheter (small tube) inside the blood vessel can cause damage to the vessel, bruising or bleeding at the puncture site and infection.
- There is a small chance of the embolisation material or particles becoming lodged in the wrong place and depriving normal tissue of its blood supply.
- Because of the contrast material used to view your vessels with x-ray, there is a chance of allergic reaction to the contrast.
- There is also a risk of kidney damage for those with diabetes or pre-existing kidney disease.

These effects vary for every person. Medicines are given to help prevent or relieve most of these side effects. In addition, steps can be taken to prevent allergic reactions to contrast and lessen the chance of kidney damage for those at risk.

How do I prepare for the procedure?

- You will need to have some blood tests to check that you do not have an increased risk of bleeding and to check how your kidneys are working. This will be organised within seven days of your procedure.

- If you are not already an inpatient, you will need to be admitted to The Royal Marsden as an inpatient, either on the day of the procedure or the day before.
- You must not eat anything for six hours before the procedure, although you will be allowed to drink clear fluids until two hours before the procedure.
- You should not bring any valuables with you in case of loss or theft.
- If you are taking any medication that thins your blood such as aspirin, rivaroxaban, tinizeparin, clopidogrel or warfarin, you must contact your doctors or the radiology department.
- If you have any allergies, you must let your doctor know. If you have previously reacted to intravenous contrast medium (the dye used for kidney x-rays and CT scans), then you must also let your doctor know.

Can I bring a relative or friend?

You may bring someone with you, but for safety reasons they cannot accompany you into the x-ray room.

When you arrive at The Royal Marsden

- Please report to the day care area – the location can be found on your appointment letter.
- You will have a fine plastic tube (cannula) placed into a vein in your arm, so that you can be given fluids and receive medication while in the x-ray department. Once in place, this tube does not cause any pain.
- If you need to be admitted a day before, your doctors will see you and you will be moved to a ward. Here, you will be given some medication to prepare you for the procedure.
- You will be allocated a bed, although you may not go there until after the procedure.
- Before you go to the x-ray department, you will be asked to change into a hospital gown.

- You can either walk to the x-ray department or be taken there on a trolley.
- You will need to sign a consent form, after the procedure has been explained to you by the radiologist.
- Your groin area might be shaved to ensure that the risk of infection is lowered, as that will be the entrance point for the catheter (small tube).

What happens during the procedure?

- The procedure is generally done under local anaesthesia, but can be done under general anaesthesia, depending on the extent of embolisation and at the discretion of the radiologist.
- You will lie on the x-ray table on your back. If this is difficult for you, we can help you to get comfortable with pillows.
- You will have monitoring devices attached to your arm and finger. You may be given oxygen through small tubes into your nose by a nurse who will be with you throughout the procedure.
- We will give you painkillers and other medication through the cannula in your arm.
- The doctor will use ultrasound or x-ray machines to determine the most suitable point for inserting the tube.
- The radiologist will keep everything as sterile as possible, and will wear a sterile gown and gloves. Your skin near the point of insertion will be cleaned with cold antiseptic. The rest of your body will be covered with a sterile theatre sheet.
- The doctor will give you an injection of local anaesthetic which will cause some stinging initially, then numbness.
- The skin at the top of the leg (groin) will be numbed and a small tube (catheter) will be placed into the artery.
- The catheter will be passed into the artery to the area that needs to be embolised under x-ray guidance.

- X-rays will be taken to identify the blood vessels supplying the area by injecting dye (contrast agent) into the catheter.
- After the procedure, the catheter is removed from the area and pressure is applied to the site to prevent any bleeding.

Will it hurt?

You may feel some discomfort in your skin and deeper tissues during the injection of the local anaesthetic. After this, the procedure should not be painful. A nurse or another member of clinical staff will be close by throughout the procedure. You will be awake during the procedure and able to tell the radiologist if you feel any pain or discomfort.

How long will it take?

Every person is different, and it is not always easy to predict, however, expect to be in the department for about two hours.

What happens afterwards?

- You will be taken back to the ward or day care area on a trolley or a bed.
- You must lie flat in bed for approximately two hours but will be able to eat and drink as tolerated.
- Nurses on the ward will carry out routine observations such as checking your pulse and blood pressure, and will also check the treatment site to make sure that there are no problems.
- You will stay in bed for a few hours, until you have recovered.
- Painkillers will be given if required.
- Most patients leave the day after the procedure.
- Your doctors will be in contact with you after discharge.

Contact details

If you have any questions or concerns about your procedure, or you are unable to attend for this appointment, please call:

The Radiology Department **020 7808 2571**

Alternatively, please call:

The Royal Marsden Hotline: 020 8915 6899

(available 24 hours a day, 7 days a week)

Should you require information in an alternative format please contact The Royal Marsden Help Centre.

Further information

The Royal College of Radiologists

Website: www.rcr.ac.uk for general information about radiology departments.

The British Society of Interventional Radiology (BSIR)

Website: www.bsir.org/patients/ for further information on interventional radiology procedures.

Radiologyinfo

Website: www.radiologyinfo.org for descriptions on interventional radiology procedures.

Macmillan Cancer Support

Website: www.macmillan.org.uk for information on diagnosis, treatment and support.

Helpline: 0808 808 0000 (8am – 8pm, 7 days a week)

National Institute for Health and Clinical Excellence

Website: www.nice.org.uk provides guidance, advice and resources for public health and social care.

References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre

Telephone: Chelsea 020 7811 8438 / 020 7808 2083

Sutton 020 8661 3759 / 3951

Email: patientcentre@rmh.nhs.uk

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Should you require information in an alternative format, please contact The Royal Marsden Help Centre.

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