Carotid Artery Rupture Precautions

What you need to know about dealing with carotid artery rupture at home:

People who have certain types of cancers of the head and neck can be at risk for a rupture of their carotid artery. This means there would be sudden, heavy bleeding. Use the information in this handout to help you prepare yourself and your caregivers. You can also organize supplies to have on hand so you are prepared to respond if this occurs.

A rupture (RUP- shur) of an artery means there is a hole or tear in the wall of the artery. If this happens there is heavy bleeding. Although it is rare for the carotid artery to rupture, if it does, the bleeding is always alarming and life threatening. The bleeding can be so heavy and fast that it causes death.

Discuss the possibility of rupture with everyone who may be helping you. It may help them to be aware since this bleeding can be frightening and happen suddenly without any warning.

- Bleeding may come from the neck or the mouth and nose.
- If you have a tracheostomy or laryngectomy stoma, bleeding may come from the tube or stoma.
- There may be small bleeds that stop for a few hours or a day before the rupture.

You may want to discuss having an intravenous catheter placed for use of fast acting medicines. Your caregiver can be taught how to give these medicines in an emergency.

Supplies to have on hand:

- If you have a laryngectomy or tracheostomy, you will need a tracheostomy tube with a cuff and a 10ml syringe.
- 5 or 6 large dark colored towels to absorb the bleeding and clean up blood. Towels should be clean but do not need not to be new.
- Pain and anti-anxiety medicines in prefilled, ready to administer syringes.
- Disposable plastic gloves.
- Suction machine with Yankour tips.
- Opaque (dark colored) trash bags.
- The telephone number for your hospice or home care nurse should be kept by the phone.

For the Caregiver: What to do if bleeding occurs

- **Immediately call 911, unless you have chosen hospice care.**
- If the patient has chosen comfort care through a hospice or home care agency, call that nurse or agency as soon as possible. Remember to share the information in this handout with your home care help.
- With the heel of your hand, apply strong pressure to the bleeding side of the person’s neck.
- If the person has a tracheostomy, use the syringe to inflate the cuff with 4 to 8 ml. of air to prevent blood from getting into their lungs.
- If the patient has a stoma, insert the tracheostomy tube and use the syringe to inflate the cuff with 4 to 8 ml. of air.
- Give medicines for pain or anxiety as needed.

Things you can do to lessen chance of rupture:

1. Make breathing as easy as possible. It may help to sleep in a sitting position. Take 4 or 5 especially deep breaths every hour to help keep the lungs open and clear.
2. Try to avoid hard coughing. If suction is needed to clear a tracheostomy or laryngectomy, suction gently and only when needed.
3. If cough continues even after secretions are cleared, medicine to suppress the cough may be needed.
4. Try to avoid vomiting. Use medicine to stop nausea if needed. If you have a PEG stomach tube, drain the stomach if nausea occurs.

5. Avoid straining with bowel movements. Keep bowel movements soft. Use stool softeners. Try to be sure that bowels move at least every other day.

6. Avoid high blood pressure. Use medicines as ordered. If anxiety is a problem, discuss with your doctor or nurse. Treatment may be needed.