



## Radiology department

# Ascitic drainage: information for patients

### What is your drain for?

Your doctor thinks that there is excess fluid or 'ascites' in your abdomen (tummy) which needs draining. A specialist nurse from the procedure team will carry out this procedure on the procedure unit.

### How is the drainage done?

You will have an ultrasound scan to help identify if there is sufficient fluid to be drained. If there is sufficient fluid the nurse or doctor will assess the most suitable position for the drain to be inserted. The specialist nurse will numb the skin and tissues using a small local anaesthetic injection. The nurse will then insert a small drainage tube to drain the fluid from the abdomen.

### What to tell the doctor

- If you have any allergies.
- If you have had a previous reaction to intravenous contrast medium (the dye used for some x-rays and CT scanning).
- It is important to tell the doctor or the radiology department **before attending for admission** if you are taking medication to prevent blood clots. Below is a list of some of the medications which are used to thin the blood and help to prevent blood clots.

**If you are currently taking any of these medications, please contact your referring doctor or the radiology department on 0161 446 3325 as soon as possible, as these may need to be stopped prior to your procedure. Failure to do so may result in your procedure being postponed.**

Apixaban	Dalteparin
Aspirin	Enoxaparin
Clexane	Fragmin
Clopidogrel	Rivaroxaban
Dabigatran	Warfarin

### Do I have to prepare for the drainage?

You may eat and drink before the procedure. We advise you to have a light breakfast only.

### How long will I need to stay in hospital?

This depends on how much fluid needs to be drained. Most people can go home on the same day. However, if you have a larger amount of fluid, you may have to stay in hospital overnight to allow the fluid to drain. So please come prepared to stay in hospital overnight.

## **Are there any risks of the procedure?**

As with most procedures there is a small risk of complications.

- **Infection** - around where the drain enters the skin or inside your abdomen. If there was sign of infection the drain would be removed and antibiotics may be required.
- **Damage to an organ** - inside your abdomen, such as the liver or bowel. This is rare but if it did happen you might need surgery.
- **Bleeding** - A transfusion of blood or blood products may be needed if significant bleeding occurs.
- **Nodules** - or bumps can sometimes form around the site where the drain has been inserted.
- **Not draining** - If the drain doesn't work properly a new drain may be inserted.

An ultrasound scan is used to minimise the risk of complications. You may feel a little tired for a day or two following the procedure. We advise you to have someone with you when you go home. Driving is not advised after this procedure.

## **Agreeing to treatment: consent**

We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had The Christie's written description of the proposed treatment and that you have been given an opportunity to discuss any concerns. You are entitled to request a second opinion from another doctor who specialises in treating this cancer. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

If you have any problems or questions, please contact one of the procedure nurse specialists or your medical team.

## **Ascitic drain aftercare:**

It is not uncommon to feel tired for a short time after having an ascitic drain. You may find the following advice helpful.

- Have someone with you for a few hours after arriving home.
- Rest as much as you can.
- Continue to drink plenty.

It is normal to find that the amount of urine you pass is reduced at first. This should gradually improve. If you find that the amount of urine you are passing is less than normal 24 hours after the procedure, or if you have stopped passing urine please contact The Christie Hotline on 0161 446 3658.

A small number of patients can get an infection at the drainage site. This can happen when the drain is in place or after it is removed. Signs of infection at the drain insertion site include: redness, soreness and swelling.

Taking your temperature daily for about 7 to 10 days after your procedure will help you to identify early signs of infection. If your temperature reaches 37.5°C or above and if you have any shakes or shivers, please contact your doctor at The Christie or The Christie hotline.

Rarely infection may occur inside the abdomen (tummy). Signs of infection inside the abdomen include: abdominal pain, a temperature above normal, fever, chills or feeling generally unwell.

Once the drain has been removed, fluid will often continue to leak from the insertion site. If the drainage site continues to leak after two days, please contact your district nurse to check the site.

## Contact:

Procedures Team      0161 446 3916  
Christie Hotline      0161 446 3658

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

Contact The Christie Hotline for  
urgent support and specialist advice

**The Christie Hotline:  
0161 446 3658**

Open 24 hours a day, 7 days a week

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact [patient.information@christie.nhs.uk](mailto:patient.information@christie.nhs.uk)

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For more information about The Christie and our services, please visit [www.christie.nhs.uk](http://www.christie.nhs.uk) or visit the cancer information centres at Withington, Oldham or Salford.

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