

Patient information factsheet

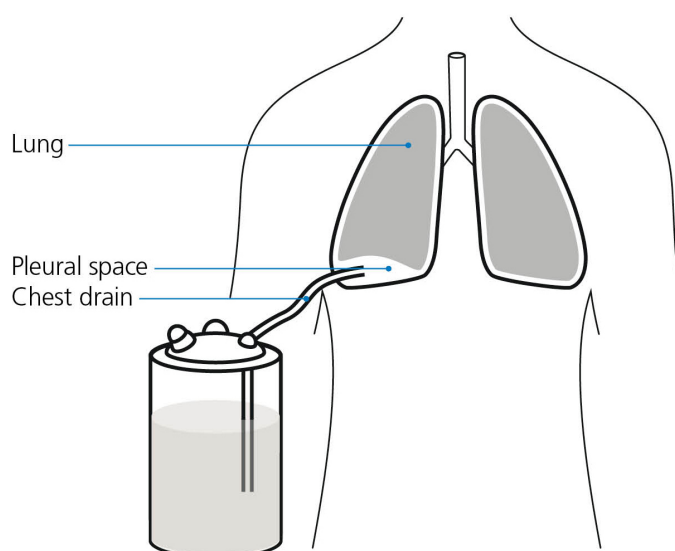
Pleurodesis

We have written this factsheet to give you information on pleurodesis. It includes what pleurodesis is, how the procedure is carried out and the risks. We hope it will help to answer some of the questions you may have. If you have any further questions or worries, please speak to a member of your healthcare team.

What is pleurodesis?

Pleurodesis is a procedure performed for people with recurring pleural effusions (fluid around the lungs) or air continually leaking from the lungs. It involves putting a substance into the space between your lung and chest wall (pleural space). The substance will be put into your chest through a chest drain tube. This is done to try to 'stick' your lung to the wall of your chest to prevent further fluid (pleural effusion) or air leaking out from your lung and causing air to build up around the lung (pneumothorax).

There are a few different substances that can be used in pleurodesis. We will inform you which type of pleurodesis you will have before your procedure.



Who will carry out the procedure and where?

A doctor or a thoracic advanced nurse practitioner (ANP) will carry out the procedure. As this is a teaching hospital, the doctor or ANP may be supervised by a senior practitioner.

We will perform the procedure at your bedside.

Patient information factsheet

What happens before the procedure?

You may eat and drink as normal.

We may need to do a chest x-ray on the day of your procedure to check your lungs and whether your chest drain is in the correct position. If you had a chest x-ray after your chest drain was inserted, we may not need to do another x-ray before the procedure.

We will insert a cannula (a small, flexible tube) into one of your veins. We may also give you a dose of intravenous antibiotics before the procedure.

What happens during the procedure?

We will place you on a bed in a suitable position to allow us to gain access to your chest drain.

For a blood pleurodesis, we will take 50 to 100ml of your blood from your cannula and insert it into your chest via your chest drain tube. We will then flush the tube through with sterile water.

For a talc pleurodesis, we will insert a sterile, medicated, talc-like powder into your chest via your chest drain tube.

You may experience some discomfort or pain during the procedure. Please do not panic, as this is perfectly normal. We can provide you with some pain relief.

What happens after the procedure?

We will either attach a chest drain extension tube or we will clamp the drain.

We will ask you to change position every 20 minutes for a total of four hours. This will allow the talc or blood to move around your pleural space and help the lung to stick.

The chest drain is usually left in position for at least 48 hours, but it may be left longer if the drainage of fluid or air continues. You will need to stay in hospital until the drainage is reduced and we decide that the drainage tube is no longer needed. Once the drain is removed, the procedure is complete.

This procedure can be repeated up to a maximum of three times, if necessary.

What are the risks?

Most people undergo pleurodesis without any major problems. However, like all medical treatments, it does have some risks. These include:

- pain around the site of your chest drain. Please let us know so we can give you pain relief.
- a fever for the first day or two after the procedure. This is usually controlled with paracetamol and is short-lived.
- breathlessness due to inflammation in the lung. This usually settles down over a few days. You may need some oxygen treatment.

If you experience any of these symptoms, please let us know so we can help you.

Patient information factsheet

Notes

Please use this section to write down any questions you might have for us before your procedure.

Contact us

E4 thoracic team

Telephone: **023 8120 3168**

Useful links

www.bsuh.nhs.uk/documents/pleurodesis

www.patient.info/chest-lungs/pleural-effusion-leaflet

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **023 8120 4688**.

For help preparing for your visit, arranging an interpreter or accessing the hospital please visit **www.uhs.nhs.uk/additionalneeds**