

Patient information factsheet

Having an ultrasound-guided tunnelled drain insertion

We have given you this factsheet because you have been referred for an ultrasound-guided tunnelled drain insertion. It explains what an ultrasound-guided tunnelled drain insertion is, what the procedure involves and how to prepare for it. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please speak to a member of your healthcare team.

Before agreeing to the procedure, you will have a consultation with your doctor where you will have the opportunity to ask any questions you may have.

What is an ultrasound-guided tunnelled drain insertion?

A tunnelled drain insertion is a medical procedure that involves inserting a fine, plastic tube (called a drain) through a tiny incision (cut) in the skin to drain away a buildup of fluid in the tummy (abdomen). The drain is inserted under the guidance of a non-invasive ultrasound (a type of scan that uses high-frequency sound waves to create an image of part of the inside of the body).

This procedure is a long-term drainage solution, and the drain can stay in a person's tummy for several months, if necessary. The end of the drain remains outside of the body, hidden under a bandage when not in use. When the drain is needed again (when there is excess fluid in the tummy), a special drainage bottle or bag is temporarily attached to the drain to remove the fluid.

Why do I need to have this procedure?

You have been referred for this procedure because you have a swollen tummy due to an abnormal buildup of fluid in your tummy. The medical term for this excess fluid is 'ascites'. Ascites can be caused by cancer and can cause you to feel tired, uncomfortable, breathless, nauseous (sick) and reduce your appetite if left untreated.

What are the benefits of this procedure?

A tunnelled drain insertion can:

- make you feel more comfortable
- reduce some of your symptoms of ascites

Where a tunnelled drain insertion is a long-term drainage solution, you won't need to come into hospital every time you need to have your tummy drained, instead you can do this from the comfort of your own home.

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Are there any alternatives to this procedure?

It is possible to have a temporary drainage procedure. However, a tunnelled drain insertion is usually only recommended if temporary drainage procedures have not been successful in the past.

How should I prepare for the procedure?

Staying overnight

This procedure is usually performed as a day case, but some people may need to stay in hospital overnight if they develop complications. For this reason, please bring an overnight bag with you on the day of your procedure, including all the medications you are currently taking.

Eating and drinking

You will need to stop eating and drinking before your procedure. Please follow the advice in the table below according to your appointment time.

If you have a morning (am) appointment	You must not eat or drink anything after midnight. You can drink water for up to four hours before your procedure.
If you have an afternoon (pm) appointment	You may eat a light breakfast before 6am. After 6am, you must not eat or drink anything. You can drink water for up to four hours before your procedure.

Medications

You should take your medications as normal (unless advised otherwise by your doctor or nurse).

Please call our oncology radiology department on **023 8120 4198** or **023 8120 3894** as soon as you receive your appointment letter if you are taking warfarin or any other blood-thinning medication.

What will happen before the procedure?

The procedure will be performed by a specially trained doctor, called a radiologist. The radiologist will be assisted by a radiology department assistant (RDA).

When you arrive for your appointment, we will admit you to a ward and ask you to change into a hospital gown. While you are waiting on the ward, we will explain the procedure and all the potential risks and complications to you. This is a good opportunity for you to ask any questions you may have. If you are happy to go ahead with the procedure, we will ask you to sign a consent form.

When it is time for your procedure, we will take you to our ultrasound room on your bed or a trolley.

What will happen during the procedure?

Putting the drain in

Before the procedure, we will spread some special gel on your tummy and gently guide an ultrasound probe across your skin to locate the excess fluid. We will mark the exact location of the fluid on your skin with a pen.

We will then clean your skin with an antiseptic solution and cover the area with a theatre drape. We will then inject a local anaesthetic into your skin. This may sting for a few seconds before going numb. Once the area is numb, you may feel some pressure on your tummy during the procedure, but you shouldn't feel any pain. If you are uncomfortable at any point during the procedure, please let us know.

We will then insert a small needle into the marked area on your tummy. Through this needle, we will pass a soft wire, on which we will place a drainage tube and guide it into the correct position using ultrasound guidance. When the drain is in the correct position, we will remove the needle and wire, and stitch the drain into place under your skin.

Draining the fluid

We will then attach a drainage bottle or bag to your drain to collect the excess fluid. Once all the fluid has been drained, we will place a waterproof dressing over the drain.

The procedure usually takes around 15 minutes. However, please expect to be in our oncology imaging department for about an hour in total.

What will happen after the procedure?

Recovery

After the procedure, we will take you back to the ward on your bed or a trolley to recover. While you recover, we will carry out some routine observations, such as taking your pulse and blood pressure, to make sure that there are no problems after the procedure. We will also look at the insertion site to make sure it is not bleeding. Please let us know if you don't feel well or are in any pain.

Going home

Most people can go home after a few hours, as long as they are feeling well and have no complications. If you develop any complications, you may need to stay in hospital overnight. If this is the case, we will discuss this with you in more detail.

Before you go home, we will:

- provide you with a drainage kit and a patient information leaflet provided by the drain company containing important information about using and looking after your drain
- teach you how to connect a bag and/or bottle up to your drain so that you can remove the fluid as and when it builds up again
- tell you when to use your drain
- explain how to disconnect and dispose of a used bottle or bag
- refer you to the care of the community team and provide you with their contact details

When you go home, it is important that you:

- rest for a minimum of 24 hours
- have someone stay with you overnight (if possible)
- continue with your normal medications as prescribed and pain relief if necessary (if you take anticoagulants, we will discuss restarting these with you before you leave hospital)

If your drain is covered properly, you will be able to shower and bathe as usual.

Your drain should not interfere with any of your normal activities when your insertion site has healed.

Follow-up care

The stitches holding your drain in place will need to be removed 10 to 14 days after your procedure. The community team will contact you to arrange a suitable time to do this.

Although we will explain how to change your drainage bag or bottle before you leave hospital, if you're unable to do this yourself at home, please contact the community team and they will come to your home to do this for you.

The drain will remain in your tummy until it is no longer needed (when you have two to four weeks with minimal or no drainage). The amount of time you have your drain for will vary for everyone, but a drain can remain in place for several months.

What are the potential risks and complications?

A tunnelled drain insertion is a safe procedure, but as with any medical procedure, there are some potential risks and complications.

Pain

It is normal to experience some pain around the drain once the local anaesthetic has worn off. The pain usually subsides after a couple of days and should not need any treatment, but you can take over-the-counter pain relief medicine to help ease any discomfort.

Infection

There is a small risk that the site where the drain enters your skin may become infected. If an infection develops, the community team will prescribe you a course of antibiotics. If the infection doesn't get better, we may need to remove the drain.

Bleeding

There is a small risk of bleeding at the insertion site during the procedure. This does not usually need any treatment, but it may cause some bruising.

Drain falling out

This is very rare. In the unlikely event that this happens, cover the site with a sterile dressing and seek immediate medical attention from the community team or the acute oncology service.

When should I seek medical attention?

If you feel feverish, unwell, notice redness, swelling or pain around the drain site or if you have any other concerns, please tell your healthcare team (if you are in hospital) or call the acute oncology service on **023 8120 1345** (24-hour service).

Contact us

If you have any questions or concerns before the procedure, please telephone the oncology imaging department on **023 8120 4198** (Monday to Friday, 8am to 4pm).

If you have any questions or concerns after the procedure, please contact the acute oncology service on **023 8120 1345** (24-hour service).

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Useful links

Cancer Research: Long term drains to treat fluid in the abdomen (ascites)

www.cancerresearchuk.org/about-cancer/coping/physically/fluid-abdomen-ascites/treating/long-term-drains

Rocket medical: IPC peritoneal catheter leaflet

http://sales.rocketmedical.com/media/attachment/file/r/o/rocket_ipc_peritoneal_catheter_-_information_for_patients_and_nurses.pdf

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