

Long term abdominal drain (LTAD): before the procedure



Information for patients

This information sheet answers some of the questions you may have when preparing for the insertion of a long term abdominal drain (LTAD). If you have any other questions or concerns, please do not hesitate to speak to the doctors or nurses caring for you.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

If we don't ask these questions, then please ask us to check.

Ensuring your safety is our primary concern.

What is an LTAD?

A long term abdominal drain is a permanent flexible tube or drain inserted into your abdomen to remove excess fluid (ascites) easily. One end remains inside your abdomen, while the other side passes out through the skin. This is attached to a one-way valve that allows fluid to come out when connected to a drainage bottle. You or your district nurse can carry out the drainage at home. The catheter will be covered with a flat dressing so that it is usually not visible under your clothing.

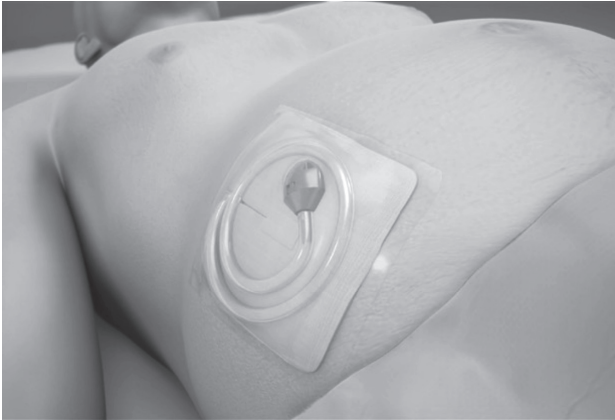


Figure 1. Long term abdominal drains
(©Rocket Medical)



Figure 2. Drainage bottle
(©Rocket Medical)

Why do I need an LTAD?

Your doctor may have recommended this procedure to you if you currently require regular hospital visits for ascitic drainage. They will have discussed other treatment options (liver transplantation or a stent/shunt procedure) which may not be suitable for you. The LTAD aims to improve your symptoms and quality of life.

What does the procedure involve?

You will be admitted to hospital and a peripheral cannula (thin plastic tube) will be inserted into your vein. This allows us to give you a single dose of IV antibiotics before the procedure to reduce risk of infection.



An interventional radiologist will perform the procedure. They will go through the risks and benefits of the procedure with you. You will be asked to lie down and an ultrasound will be performed to confirm and localise fluid. The skin will be cleaned with an antiseptic to prevent infection risk. A local anaesthetic will be injected into the area. The radiologist will make two small cuts to the skin to create a tunnel under the skin and ease the LTAD into the abdominal cavity. A polyester cuff will sit under the skin to keep the drain in place.

Please notify your doctor if you are on any blood thinners, for example, aspirin, clopidogrel, warfarin, etc. You will be asked to stop taking them or switch them to an injection form of blood thinners before the procedure.

How long will the procedure take?

The procedure usually takes 30 to 45 minutes.

Where will the procedure take place?

Radiology department, 1st floor Denmark Wing, King's College Hospital, Denmark Hill.

Radiology department, 1st floor South Wing, Princess Royal University Hospital (PRUH), Orpington.

Will it be painful?

The area will be numbed with a local anaesthetic injection into the skin. You should not feel pain, but will experience a pulling or tugging sensation. You may feel a bruised or sore sensation around the area over the next few days.

What happens after the procedure?

Once the drain is inserted, you will return to the ward. The new drain will be used to remove fluid from your abdomen with appropriate

IV albumin cover as you normally have your ascites drained. This is important as ensuring that your abdomen is not swollen will allow the wound to heal.

There will be two sutures where the cuts to the skin have been made, these will need to be removed between 2 to 6 weeks after drain insertion by the district nurse or practice nurse. The sutures may need to remain in longer if there is any leakage from the abdominal insertion site. You should be able to return home the following day if there are no complications. The drain will stay in permanently unless there are complications (see below).

What are the complications or risks?

- You may experience some discomfort around the insertion site for a few days. This can be managed with normal pain relief medication.
- There is a risk of bleeding if a vessel is accidentally damaged.
- Sometimes LTADs can become infected. This can manifest as discoloured fluid during drainage, redness around the drain site, fever or abdominal pain. If this occurs, please let your district nurse know. If the drain becomes infected, there is a possibility that the LTAD may have to be removed.

To prevent the risk of infection following insertion of the drain, you will be discharged home with a long-term antibiotic to take daily (usually ciprofloxacin). We encourage you to look for signs of infection and to maintain regular care of the drain site.

Who will drain the fluid from my drain when I go home?

The medical team will arrange for a member of the district nurse team to drain the fluid daily at your house. Alternatively, the nurses may be able to teach you, or a relative, how to do this.



They will usually drain roughly 2 litres per day at the beginning. This can be adjusted for symptomatic relief following discussion with your doctor, depending on your symptoms, how you feel and how quickly the fluid builds up. We will give you some Rocket drain bottles when you are discharged. The drainage usually takes between 5 and 15 minutes.

Can I shower with the drain?

Yes. You will have a self-adhesive dressing placed over the gauze pad covering your catheter. This is waterproof and should keep the water out. If the gauze becomes wet, you should remove the dressing immediately, dry the area and apply a new dressing.

What if I cannot keep my appointment?

If you cannot keep your appointment, it is important to contact the Liver Bed Managers on 020 3299 7722 to arrange an alternative appointment.

Who can I contact if I have any concerns or questions?

If you have any questions about your procedure, please contact the Radiology Nursing Team on 020 3299 2060 at King's College Hospital, or 01689 863671 at the PRUH.

If you have any questions about the LTAD before or after the procedure, please contact the Advanced Chronic Liver Disease team's clinical nurse specialist on 020 3299 6882.

Sources of additional information

Rocket Medical website with video resources:

www.rocketmedical.com



Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: **020 3299 3601**

Email: **kch-tr.palsdh@nhs.net**

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND

Tel: **01689 863252**

Email: **kch-tr.palspruh@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact Interpreting Services on 020 3299 4826 or email kch-tr.interpreting@nhs.net.