Patient Information

University Hospitals Coventry and Warwickshire NHS Trust

General Surgery

Insertion of Cholecystostomy Tube

This leaflet will tell you about what will happen before, during and after the insertion of a cholecystostomy tube into your abdomen to drain your gallbladder. It will tell you about the risks, benefits and other options you have with this procedure to help you make an informed decision and give consent.

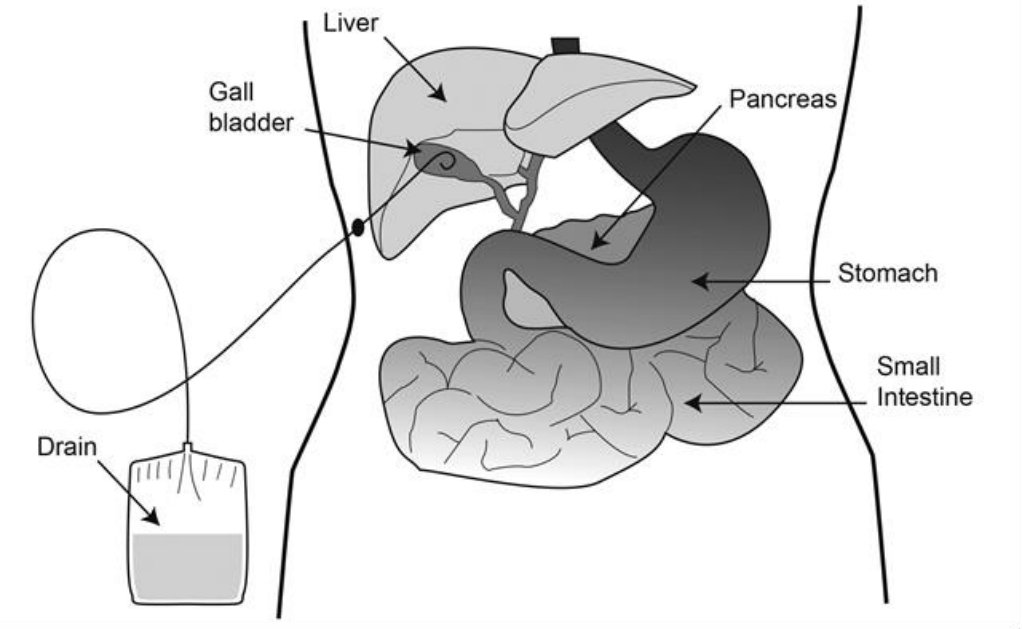
This leaflet may not provide you with all the information you want. Please tell us if there is anything you do not fully understand or need to know. We will be glad to give you the information you need and explain to you the things you do not understand as best as we can.

What is a Cholecystostomy Tube and why is it put in?

Cholecystostomy tube insertion is a procedure that involves inserting a tube through your abdomen and into your gallbladder for drainage. This can be done in patients with an infected gallbladder who does not get better with appropriate antibiotic treatment and when surgery is too risky to be performed.

What is the Function of your Gallbladder?

The gallbladder is a small sac located under your liver that stores bile. Commonly, the gallbladder becomes inflamed or infected when the duct that drains bile gets blocked. This condition is called cholecystitis. Cholecystitis is frequently caused by gallstones. While cholecystitis is best treated by removing the gallbladder surgically through open or key-hole surgery, patients who are too sick or unfit for surgery have another option – insertion of a cholecystostomy tube drain.



What are the Risks and Benefits of inserting a Cholecystostomy Tube?

The cholecystostomy drain will relieve the symptoms of blockage and allows time for your condition to improve. Cholecystostomy drain insertion is usually a very safe procedure. Most patients feel better within 3 days. But, similar to any other procedures, complications are possible.

The likelihood of these complications happening will differ for each patient and should be discussed with you by your doctor or a healthcare practitioner who is looking after you **before** you sign the consent form. If after this discussion, you do not want the procedure, you do not have to have it.

These are some possible complications and how we try to prevent them or reduce their effect:

- Pain – You will be given medicine for pain during the procedure.
- Bleeding – Bleeding can occur after the procedure. The nursing staff will observe you closely for approximately 4-6 hours after the procedure.
- Blockage – The nursing staff will flush the drain daily to reduce the risk of obstruction.
- Catheter slippage – **The drain will be secured to your skin with a stitch or special dressing.**
- Leakage of bile into the abdomen – Drainage of bile collections outside the gallbladder may be necessary.

Consent

You will be asked to sign a consent form to confirm (1) that you fully understand the reasons why the procedure is recommended, (2) that you are aware of the risks and benefits it involves and (3) that you wish to have this procedure.

Remember, **you can withdraw your consent anytime.**

What do I need to do to prepare for the Procedure?

- You must not eat and drink for 4 hours before the procedure.
- A small plastic tube called a cannula needs to be inserted into your vein to allow access for administration of fluids and other medications.
- You will need to have a blood test to check your blood clotting.
- If your blood clotting ability is lower than desired, Vitamin K may be given before your procedure.
- You will need to wear a hospital gown. Hospital porters will take you to the X-ray department on your bed for the procedure.

What will happen during the Procedure?

The doctor doing the procedure will explain the stages to you as he carries the procedure out. Please ask the doctor if you have any further questions.

- You will be asked to lie on your back on an X-ray table.
- A radiology nurse will stay with you throughout the procedure. It is normal for you to have oxygen through a face mask and your blood pressure observed. You can be given medication through your cannula that will make you relaxed and sleepy if the doctor thinks it appropriate.
- Your skin will be cleaned with a cold, antiseptic solution. Sterile drapes will be applied over this area, and then a local anaesthetic will be injected to numb your skin and deeper tissues. This will wear off in a few hours. You may feel a stinging sensation at the start of injection.
- An ultrasound machine will be used to determine the best place for the cholecystostomy tube drain to be inserted. This is usually the right side of your body.
- The doctor will then insert the cholecystostomy tube into your gallbladder with the help of a thin needle and guide wire which is viewed on an X-ray monitor. This procedure typically only takes a short time and should not hurt at all once the catheter is in place.
- It is not always easy to predict how straight forward or complex this procedure will be until it is actually performed. Therefore, it is difficult to tell you how long it is going to take. However, based on our experience, you can expect to be in the X-ray Department between 30-60 minutes approximately.

- The cholecystostomy tube will be secured to the skin with a stitch or a special dressing. The tube will be connected to a drainage bag.

What happens next?

- You will be taken back to your ward where the nursing staff will regularly check temperature, pulse rate, and blood pressure to make sure you are recovering safely. You should tell your nurse if you are in pain or think you may have a fever. This may be a sign of infection, and you may need antibiotics.
- You should drink plenty of fluids and eat a low-fat diet until further advised.
- The tube must remain in place attached to the drainage bag. It is vital that you look after the cholecystostomy tube drain. You can move around freely. However, to prevent accidental pulling, **you should make sure that the tube and the bag can move freely with you.**
- The cholecystostomy tube drain will stay in place for at least 4-6 weeks or longer depending on your condition.
- The catheter should be checked and flushed daily with 10-15 ml of normal saline every 8 hours to reduce the risk of blockage.
- You do not need to be in the hospital while the cholecystostomy tube drain is in place. You can be discharged home if you are well. The University Hospitals Coventry and Warwickshire @Home (UHCW @Home) service will flush and look after the cholecystostomy tube drain while you are at home. They are open from 8:00 in the morning to 4:00 in the afternoon. You can contact UHCW @Home at 024 76966903. If you feel unwell, worried and unsure what to do outside these hours, please ring 111 for advice.
- You will receive a letter through the post for an appointment to see your consultant surgeon for a check-up and further treatment plan.

The Trust has access to interpreting and translation services. If you need this Information in another language or format, please contact our Health Information Centre via switchboard, and we will do our best to meet your needs. Our switchboard telephone number is 024 76964000.

The Trust operates a smoke-free policy.

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