

Radiology Department

Biliary Drainage Information Leaflet

Introduction

You have been advised by your hospital consultant that you need to have a biliary drainage catheter insertion and you have been referred to the radiology department to have this procedure. This information leaflet has been produced to give you general information and is intended to answer most of your questions. This is not intended to replace the discussion between you and your consultant, but may act as a starting point for discussion. If after reading this information you still have concerns or require further explanation, please contact the Radiology team on the telephone number **02476 967115**

Please inform us on the above number us prior to your procedure if:

- You have allergies to contrast (X-ray dye)
- You are, or might be, pregnant
- You weigh more than 200kg (31 stone)

We strongly advise that you leave any valuable possessions at home and remember to bring all medications including inhalers that you are taking with you to the X-Ray department.

Please read this leaflet carefully to ensure you are successfully prepared for the procedure.

Referral and Consent

If you are having the biliary drainage as a planned procedure, then you should have plenty of time to discuss the situation with your consultant and the radiologist (a specialised X-ray doctor) who will be inserting the biliary



Patient Information

drainage catheter.

If you need the biliary drainage catheter done as an emergency, there may be less time for discussion, but none the less **you should have had sufficient explanation before you sign the consent form.** If after discussion with your hospital doctor or radiologist you do not want the procedure carried out, then you can decide against it.

You will be asked to sign a pink consent form confirming that you understand the procedure and are aware of the risks and benefits it entails.

If the radiologist feels that your condition has changed or that your symptoms do not indicate such a procedure is necessary then he/she will explain this to you, communicate with the referring clinician and ask that you return to your referring clinician or ward for review. At all times the radiologist and referring clinician will be acting in your best interests.

Points to remember

- Please bring any sprays or inhalers that you are taking with you to your appointment.
- We also ask you to leave any valuable possessions on the ward.
- If you are diabetic please note that you are required to starve before the examination. **Please inform the ward staff so that an alternative medication may be given if necessary.**
- If you are taking Aspirin or Warfarin please inform the ward staff, as this medication may need to be stopped prior to the procedure.

What is a Biliary Drainage?

A Biliary Drainage is a special X-ray procedure, sometimes performed under sedation, when an external drain (a catheter) is inserted into the bile duct in order to drain and remove excess bile. This procedure is called a percutaneous (meaning through the skin) biliary drainage (a tube put into the bile duct). It does not treat the cause of the blockage but relieves the symptoms by allowing bile to drain into an external bag, until a solution to the problem can be found.

The examination may take up to 45 minutes and will be performed by a radiologist who will be assisted by a radiographer and a radiology nurse.

Why do I need this procedure?

A biliary drainage is done if the bile ducts become blocked in order to prevent or help relieve infection, jaundice and skin itching. Bile is produced by the liver and stored in the gall bladder until needed to help in the digestion of fat. The bile empties through a system of tubes, (bile ducts), into the small bowel. In the event the bile ducts become obstructed, bile will back up into the liver. An operation may become necessary to unblock the bile duct later, in which case your doctor will discuss this with you.

Preparation

- Please do not eat or drink anything for 4 hours prior to your appointment.
- You will have had some special blood tests to check your blood clotting ability.
- Vitamin K may be required before the procedure if your blood clotting ability is lower than desired.
- You will need a cannula inserted into a vein in your arm to allow access for fluids and for administering medication such as antibiotics and sedation.
- You will need to wear a hospital gown. The Porters will collect you from the ward and bring you to the X-ray department, on your bed, for the procedure.
- Your ward doctors will explain the procedure and you will be asked to sign a consent form.

Risks/benefits of Procedure

As with any procedure or operation complications are possible. We have included the most common risks and complications in this leaflet. The possibility of these complications occurring will vary for each patient and will be discussed with you before you sign the consent form.

- **Slight Pain** - The radiology nurse will administer pain controlling drugs during the procedure.
- **Bleeding** - There can be bleeding after the examination. The ward nurses will monitor you closely for 4 – 6 hours after the procedure.

Patient Information

- **Infection** - Occasionally there may be infection in the bile ducts. Antibiotics are given before the procedure to help prevent infection (antibiotic prophylaxis); and may be continued after the procedure if necessary.
- **Blockage** - It is possible that the catheter may block after the procedure, in which case it will have to be flushed or possibly changed.

It is possible that you may have an allergic reaction from the contrast agent used. You will be asked about allergies by the radiology team when in the x-ray department.

Despite these possible complications, the procedure is normally very safe. At all times during and after the procedure the staff will be monitoring your responses to this treatment in order to minimise the effects of any complications.

X-rays are a type of radiation. We are all exposed to natural background radiation every day of our lives; this comes from the sun, food we eat, and the ground. Exposure to X-rays carries a small risk, but your doctor feels that this risk is outweighed by the benefits of having the test. We will take all safeguards to minimise the amount of X-rays you receive.

Safety

The contrast agent contains iodine and is excreted by the kidneys in your urine. Please inform the radiologist or radiographer:

- If you are allergic to iodine, have any other allergies or suffer from asthma.
- If you have reacted previously to the injection used for kidney X-rays and CT scanning.
- If you are on renal dialysis.
- **Patients aged 12 – 55 years- could you be pregnant?** The risks of radiation are slightly higher for the unborn child so you will be asked to confirm that you are not pregnant before the examination can proceed.

Patient Information

During your examination

The procedure will be again explained to you by the radiologist. You will be able to ask any further questions that you may have.

Biliary Drainage

- You will be taken into the X-ray room where you will be asked to get onto the x-ray table and lay on your back.
- You will be given some medication through the cannula in your arm to sedate you (make you relaxed and sleepy). It is routine for you to be given continuous oxygen through a face mask and have your blood pressure monitored by a radiology nurse who will stay with you throughout the procedure.
- The radiologist will use the ultrasound machine to decide on the best place for inserting the catheter (this is usually in your right side).
- Your skin will be cleaned with cold antiseptic solution and sterile drapes will be placed over this area. Then your skin will be numbed with local anaesthetic. When the local anaesthetic is injected, it will sting to start with, but this soon wears off, and the skin and deeper tissues should then feel numb.
- A thin needle will then be inserted into the bile duct. When the radiologist is sure that the needle is in the correct position, a guide wire will be placed through the needle and into the duct under X-ray control, which then allows the plastic catheter to be positioned correctly. Generally, placing the catheter in the bile duct only takes a short time and once in place it should not hurt at all.
- The catheter will then be fixed to the skin surface and attached to a drainage bag. A dressing will be placed on your skin over the catheter.
- It is not always easy to predict how complex or how straightforward the procedure will be and, thus, how long it could take. It may be over in 30 minutes, or very occasionally it may take longer than 60 minutes. As a guide, expect to be in the Radiology Department for about an hour altogether.

After your examination

- You will be taken back to your ward. Nurses will carry out close and regular observations, such as taking your pulse, blood pressure and

Patient Information

temperature, to make sure that there are no problems. You will have an overnight stay in the hospital. You should tell the nurses if you feel pain or a raise in your body temperature; as you may be given more antibiotics.

- The drainage tube stays in place attached to a drainage bag. It is important that you take care of this. You should try not to make any sudden movements, for example getting up out of a chair without remembering the bag, and you should make sure that it can move freely with you. The catheter should be checked regularly to ensure that it is draining properly and has not become blocked.
- You should drink plenty of free fluids and eat normally
- If you have any problems after the procedure please speak to the staff on the ward

Other Sources of Information

For information about the effects of X rays and information about radiology departments visit the NHS website: <https://www.nhs.uk/conditions/x-ray/>

Please note that the views expressed in these websites do not necessarily reflect the views of UHCW NHS Trust.

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact the telephone number on your appointment letter and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History

Department:	Radiology
Contact:	27161
Updated:	April 2020
Review:	April 2022
Version:	5.1
Reference:	HIC/LFT/777/08