

## Radiology Department

### Biliary drainage

You have been advised by your hospital consultant that you need to have a biliary drainage catheter insertion. 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 you still have concerns or require further explanation after reading this information, 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)

Remember to bring all medications that you are taking with you to the X-ray department. This includes inhalers.



## Patient Information

We strongly advise that you leave any valuable possessions at home.

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, 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 drainage catheter.

If you need the biliary drainage catheter done as an emergency, there may be less time for discussion, but **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 mean such a procedure is necessary, then they will explain this to you. They will 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 have diabetes, please note that you are required to fast before the examination. **Please inform the ward staff so that an alternative medication may be given if necessary.**

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- 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 when an external drain (a catheter) is inserted into the bile duct to drain and remove excess bile. It is sometimes performed under sedation.

It does not treat the cause of the blockage, but it relieves your symptoms by allowing bile to drain into an external bag.

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. It is done 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. When the bile ducts become blocked, bile will back up into the liver.

An operation may become necessary to unblock the bile duct later. If this happens your doctor will discuss this with you.

### **Preparation**

- Please do not eat or drink anything for 4 hours before 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.

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- You will need a cannula inserted into a vein in your arm. This is to allow access for fluids and for administering medicines 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 the 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 happening 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 killers during the procedure.
- **Bleeding** - There can be bleeding after the examination. The ward nurses will monitor you closely for 4 to 6 hours after the procedure.
- **Infection** - Occasionally there may be infection in the bile ducts. Antibiotics are given before the procedure to help prevent infection and may be continued after the procedure if necessary.
- **Blockage** - It is possible that the catheter may block after the procedure. In this case, it will have to be flushed or possibly changed.

It is possible that you may have an allergic reaction from the X-ray dye used. You will be asked about your 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, the food we eat, and the ground. Exposure to X-rays carries a small risk, but your doctor

## Patient Information

feels that this risk is outweighed by the benefits of having the test. We will take all the safety precautions to minimise the number of X-rays you receive.

## Safety

The X-ray dye contains iodine and is removed by the kidneys when you pee. 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 your unborn child. You will be asked to confirm that you are not pregnant before the examination can proceed.

## 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.

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- 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. This will make you feel relaxed and sleepy. You will 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. This is routine.
- 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.

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- 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 difficult to predict how long the procedure will 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 interventional room 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 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, such as 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/>

## Patient Information

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.

To give feedback on this leaflet please email [feedback@uhcw.nhs.uk](mailto:feedback@uhcw.nhs.uk)

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