

Neurosurgery

Pituitary surgery for Mr Shad's patients

The Information provided in this leaflet aims to give you general information about your treatment. The details might vary to meet your individual medical needs. Always follow your consultant's advice.

This information is about pituitary surgery and what happens before, during and after it. You will get other information about the pituitary gland and any long-term monitoring needed from the Endocrinology team. If you have any questions or concerns, please ask the staff involved in your care at any time.

Admission

We'll ask you to come to the hospital a few days before surgery for medical assessment and blood tests. This pre-operative test is carried out as an outpatient appointment.

We may admit you to the ward the night before your procedure or ask you to attend the ward at 7am on the day of your procedure.

In most cases, you'll be in hospital for about 5 or 6 days.



Patient Information

Preoperative fasting instructions

Do not chew gum on the day of surgery.

For morning surgery	Stop taking at:
Food or milk	2:30 am
Black tea, coffee, squash (not juice), pre-op carbohydrate drink	6:30 am
Water	Arrival to hospital

For afternoon surgery	Stop taking at:
Food or milk	7:30 am
Black tea, coffee, squash (not juice), pre-op carbohydrate drink	11 am
Water	Arrival to hospital

Surgery

To prevent infection, we'll give you antibiotics before surgery. Please let us know if you have any allergy to any medicines.

The pituitary gland is located behind the nose. Your surgeon will make a small cut under the upper lip, just above the teeth. They'll then pass an operating microscope through this cut to reach the pituitary gland.

The surgeon will either operate on the pituitary gland or take a biopsy (small sample) for investigation.

Sometimes, your surgeon may need to seal the small hole behind the nose with a bit of muscle. They take this muscle from the side of one of your thighs. This wound will have stitches that we remove one week later.

Patient Information

At the end of surgery, your surgeon will stitch the cut with dissolving stitches. They then pack your nose with gauze (cloth) to soak up any discharge.

There is no scar left after this surgery. This surgery takes 1 hour.

After surgery

The doctors will see you daily to check everything is OK. They may need to do blood tests and check your vision. Ask the doctors and nurses involved in your care any questions throughout your stay.

Most people are up and about and eating the day after surgery.

- Headaches are common for a few days after surgery. We can control these with painkillers.
- You may have a dry mouth for a day or two, especially the first day until the packs come out. We can provide you with mouthwashes and lip cream.
- Your top teeth may be a little numb for a few weeks. This will resolve.

For the first 48 hours after surgery, we may need to limit how much fluid you drink to 2 litres a day (3 ½ pints). This makes it easier to know if the "water hormone" produced by the pituitary gland is working or not.

We'll place a catheter into your bladder. We need to record your urine output for at least 48 hours after surgery.

We remove your nose packs between 24 and 48 hours after surgery, usually with a sedative tablet given beforehand. The surgeon may decide to use dissolvable packs, which can take a little longer to dissolve. Until then, you need to breathe through your mouth.

Do not blow your nose for at least 3 weeks after surgery.

You need to take antibiotics for 1 week after surgery.

Discharge from hospital

Before we discharge you, you'll receive a note for your GP and also information about:

- Testing your hormones about a month after surgery.
- What to do if you were unwell before your return visit in a month.

Time off work

You'll need to remain off work for at least 6 weeks after your return home. You may need to inform the DVLA about your surgery. They may need to restrict driving for a period of time.

There is no restriction on other normal activities, including flying. Please check with your consultant if you are unsure.

Complications

Complications are rare. Many resolve themselves or can be treated. Please discuss the complications with your consultant if you have any concerns.

Complications can include:

- Damage to the pituitary gland, needing hormone replacement tablets: 3 to 5 in 100
- Loss of water hormone, needing tablets or nasal spray:
 - 30 in 100 in immediately after surgery
 - 3 to 10 in 100 after a week
- Meningitis - 0.5 to 3.9 in 100
- Worsening of vision - 1 to 4 in 100
- Nasal septal perforations - 7 in 100
- Fat graft haematoma in the thigh - 4 in 100
- Leakage of fluid from the nose - usually heals itself in a few days
- Dentures may not fit until the swelling goes down
- Infection in the pituitary gland

Patient Information

- Weakening of the sense of smell – this is rare and tends to improve
 - If your job depends on smell, discuss this with the surgeon before surgery

More information

The Pituitary Foundation provides information and help for patients with pituitary disease.

The Pituitary Foundation, 86 Colston Street, Bristol, BS1 5BB

Phone: 0845 450 0376

Helpline: 0845 450 0375

<http://www.pituitary.org.uk/>

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The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact 024 7696 5205 and we will do our best to meet your needs.

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