

Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services. www.bartshealth.nhs.uk/pals

Large print and other languages

For this leaflet in large print, please speak to your clinical team.

For help interpreting this leaflet in other languages, please ring 020 8223 8934.

Te informacje mogą zostać na żądanie przedstawione w formatach alternatywnych, takich jak łatwy do czytania lub duża czcionka, i w różnych językach. Prosimy o kontakt pod numerem 02082238934.

Macluumaadkan waxaa lagu heli karaa qaabab kale, sida akhriska fudud ama daabacaadda wayn, oo waxaa lagu heli karaa luqaddo kale, marka la codsado. Fadlan la xidhiidh 02082238934.

এই তথ্য বিকল্প ফরম্যাটে, যেমন সহজে পড়া যায় অথবা ডি বিন্ট প্রিং আপনার অনুটরাটে বিকল্প ভাষায় পাওয়া যেতে পারে। অনুগ্রহপূর্বক যোগাযোগ করুন 02082238934।

Bu bilgiler, okuması kolay veya büyük baskılar gibi alternatif biçimlerde ve talep üzerine alternatif dillerde de sunulabilir. İrtibat için lütfen 02082238934 numaralı telefondan ulaşın.

اس معلومات کو متبادل شکل، جیسے، پڑھنے میں آسان یا بڑے حروف، میں دستیاب کرایا جا سکتا ہے، اور درخواست کرنے پر اسے متبادل زبان میں بھی دستیاب کرایا جا سکتا ہے۔ براہ مہربانی 02082238934 پر رابطہ کریں۔

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Patient information

About your operation to remove your lymph nodes

It is important that you read and understand the information contained in this leaflet before you sign a consent form.

Department of Plastic Surgery

2nd Floor John Harrison House

Royal London Hospital

London E1 1BB

020 3594 7192 or 020 3594 7195



What are lymph nodes?

Lymph nodes form part of your body's immune system. They are found in your armpits, your groin and your neck. They are also known as lymph glands.

Lymph nodes can become enlarged and lumpy when your body is fighting infection or if they become infiltrated with disease such as cancer.

Skin cancer cells can spread to the lymph glands closest to where your skin cancer was situated, as such the site of your operation to remove your lymph glands will depend on where on your body your original skin cancer was situated.

What are the benefits of having your lymph glands removed?

This operation allows any suspicious lumps in your lymph glands to be removed and sent to the laboratory for analysis and diagnosis. Removal of cancerous lymph glands may help to prevent any further spread of the skin cancer.

What is the operation and what does it involve?

The operation to remove lymph glands is called a block dissection and is performed under a general anaesthetic (you will be asleep). During the operation the surgeon cuts through the skin and where appropriate, through underlying muscle to reach your lymph glands. The lymph glands will then be removed and your wound will usually be closed with stitches or staples.

You will usually need to spend one night in hospital following your surgery and you will go home with a drain. The drain will usually stay in for around a week and will be monitored regularly in our plastic dressing clinic.

How can I prepare for the operation?

- Before having a lymph node dissection you will need to

Deep vein thrombosis (DVT)

This is a blood clot that can arise in the deep veins of the leg or pelvis. A DVT can happen if your mobility is restricted or you are inactive for a time following your operation. You can reduce the risk of deep vein thrombosis by wearing the elastic stockings supplied both during and after your operation and moving your legs about whilst you are in bed.

Anaesthetic risks and complications

As you will have a general anaesthetic for the operation, your anaesthetist will talk to you about the anaesthetic and the risks and complications prior to your surgery.

There may be other risks specific to your individual case; your surgeon or nurse will discuss any further risks with you.

If you are concerned about any of these risks, or have any further queries, please speak to the plastic surgeon or a member of the Plastic Surgery Team.

Contact numbers

Ward 12C 020 3594 0684

Ward 3D 020 3594 0310

Dermatology Department 020 3594 5750

Lead Nurse for Plastic Surgery:

Daren Edwards – 020 7377 7000 Ext 46031 / bleep 1194

Daren.edwards@bartshealth.nhs.uk

Clinical Nurse Specialist:

Siobhan Moriarty – 07709134148 / bleep 1022

Siobhan.moriarty@bartshealth.nhs.uk

Fluid collection at the wound site

There is a risk that lymph fluid may pool beneath your stitch line after surgery. This can happen if the wound drains put in during the operation are not working properly, or if your body still produces a lot of lymph fluid after the drains are removed. A collection of lymph fluid can occur at any time after the operation. If this happens a doctor may need to remove the fluid by another method.

Scarring

You will have a permanent visible scar on your skin; scars tend to improve over a period of 18 months following surgery. In some patients, for genetic reasons, scars can become raised, red and lumpy; unfortunately this is largely beyond surgical control.

Swelling of affected limb (lymphoedema)

After your operation you may experience gradual swelling of the limb. The affected area may become stiff, swollen or awkward to move. It is often treated using a combination of exercise, massage and the wearing of an elastic garment on the affected limb. Occasionally the affected limb may be permanently swollen. You will be given further information around lymphoedema before your surgery.

Shoulder weakness and pain

During an operation to remove lymph nodes from your neck there is a risk that the nerve to your shoulder may be affected. In rare cases this may result in long term pain and weakness of the affected shoulder.

Chest infection

A chest infection can occur following any general anaesthetic. You can reduce the risk of this happening by taking deep breaths in and out following surgery and getting up and sitting out of bed as soon as you are well enough. If you smoke you can reduce the risk of a chest infection by stopping smoking for at least a month prior to your surgery.

attend pre-assessment clinic

- If you take regular medications you will be told in pre assessment if you need to stop taking these for a period of time before surgery
- We ask that you bring any medications you do take in to hospital with you
- You may want to bring a dressing gown and nightwear as you will be staying in hospital for one night
- You will need to stop eating and drinking from midnight the night before your operation
- We ask that you have a bath or shower before coming in to hospital

What happens when I arrive at hospital?

On your letter you will be advised where to attend on the morning of your admission. You will be asked to arrive for 7am in the morning this is so that the surgeon and anaesthetist can both see you before they head in to theatre. In special circumstances it may be arranged for you to arrive later in the morning but this is at the discretion of the surgeon.

When you see the surgeon they will talk you through the operation again and you will be asked to sign a consent form. If you have any questions or concerns about your operation, please ask a member of the medical or nursing staff for assistance.

What can I expect after the operation?

The operation usually takes around three hours to complete; however you will be in the operating department for longer than this to allow time for recovery. Staff will monitor you in the recovery area of theatre until it is clinically safe for you to return to the ward. When you are back on the ward the staff will check your wound dressings,

drain and blood pressure regularly. You may find you have a drip in your arm to replace any fluid you have lost during the operation.

You may have stitches or staples and a dressing covering the wound. You will have one or more drains; these allow any excess blood and lymph fluid to drain into a bottle instead of collecting under the skin. The drains will be removed when there is only a minimal amount of drainage. This may take up to a week or longer.

There will be bruising, swelling and discomfort following your operation however you will be offered pain relief and this will be monitored by the nurses on the ward.

You will generally be encouraged to get up the day after your operation but you should limit your activities to routine tasks such as eating, brushing your teeth and walking short distances. You should also take care not to dislodge your drains.

What should I do after I leave hospital?

If you have had surgery to your armpits you can use your arms normally but do not push or pull any heavy objects for three weeks and avoid any vigorous arm movements.

If you have had surgery to your groins, you should rest your affected leg when possible, raising your leg on a footstool or something similar when resting.

You do not need any special care at home, however if you have small children it may be advisable to arrange for someone to help you to care for them.

Please keep your dressing as dry as possible and do not remove it unless instructed to do so. Avoid touching your wound as this could cause an infection.

Please do not smoke; smoking can seriously reduce the rate of wound healing as nicotine narrows your blood vessels. You must

stop smoking for at least two weeks after your surgery, or better still permanently. If you require help or information on stopping smoking, please speak to a member of the nursing staff.

What are the risks of having this operation?

As with any surgical procedure there is small chance of complications. The following are unlikely but you should be aware that they may occur:

Bleeding

There is a risk that you could experience bleeding from the site of the operation. This may result in a collection of blood beneath the stitch line and you may need another operation to remove it. Symptoms of excessive bleeding include bruising, pain and swelling around your wound site.

Infection

There is a risk of wound infection, which can occur at any time following surgery. Symptoms of infection may include increased temperature, swelling, redness, fluid leakage and increased pain at the site of the operation. If your wound becomes infected you will need treatment with antibiotics, occasionally this may mean admission to hospital for antibiotics to be given through a drip. After a wound infection, healing may be delayed and you may need dressings for a longer period of time than normal.

Wound breakdown

There is a risk that your wound may break down following surgery. Wound breakdown can happen if the stitch line does not heal properly and the wound gapes, or if the blood supply to the skin becomes interrupted. Very rarely the blood supply to the skin is disrupted and becomes inadequate meaning some of your skin may die. If this happens you will require dressings for a longer period of time than usual, or you may need further surgery.