

Guide to Thoracic Surgery

Information for patients, relatives and
carers.

If you would like a large
print version of this booklet
please ask a member of
staff.

Introduction

You have been referred by your chest doctor (chest physician) for an operation or procedure on your chest and/or lungs. Chest surgery is known as “thoracic surgery”. All of the thoracic (chest) surgery for the UCLH NHS Trust and other hospitals in North London is performed at the Heart Hospital in Westmoreland Street in central London. A map is provided at the back of this booklet.

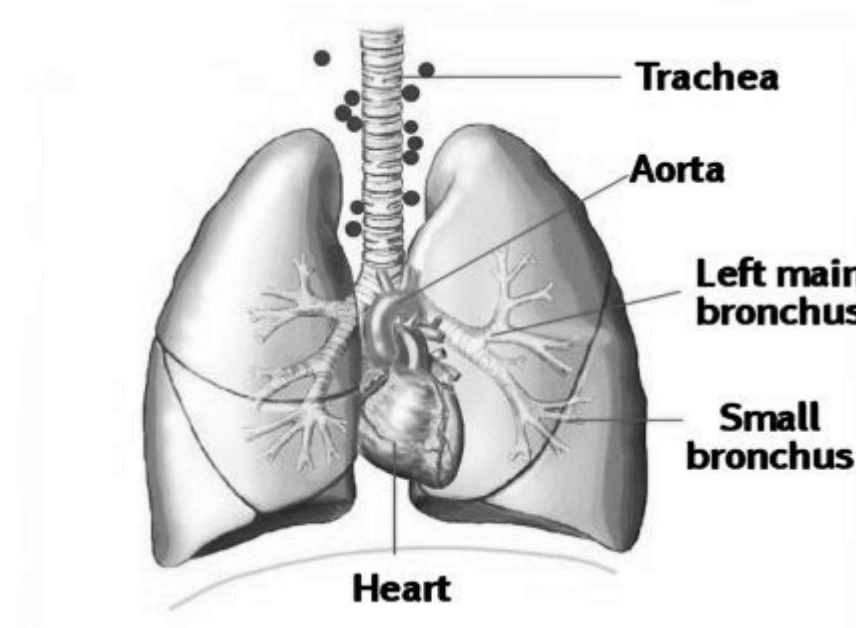
This booklet has been written to provide information about the procedures or operation that you will be having. It is designed to support the information given to you by healthcare professionals such as your doctors and nurses.

If you are unsure about any aspects of your disease or treatment please ask a member of the team looking after you.

The chest and lungs

As we breathe air is drawn into our nose and/or mouth and into our windpipe (called the trachea) which takes it down to the lungs.

Below is a picture of the lungs for your information. You may wish to use this picture so that your doctor or nurse can explain the procedure you are to have



www.roycastle.org

Arriving at hospital

At 10am on the day of your planned admission you will have to contact the hospital by telephone to ensure a bed is available.

The number to telephone is:

020 7573 8888 and ask to be put through to the bed manager.

A bed is usually available and we try to keep cancellations to the absolute minimum. Once it has been confirmed that we have a bed for you, you will be asked to come in to the Heart Hospital and advised which floor to go to on arrival. When you arrive you will be shown to your bed and you will meet the nurse looking after you. There is sometimes a short wait whilst your bed is prepared.

A doctor from your consultant's team will record your medical history, examine you and explain the procedure you are going to have. Your nurse will also ask you for information and begin planning for your discharge home. If you have any concerns this is a good opportunity to ask questions.

You may also need some tests when you come into hospital such as

- Chest X-ray
- Blood tests
- Breathing tests
- ECG (recording of the heart)

You may meet other patients at this time that have had surgery and you may find it helpful to talk to them.

Our Team

Nursing staff You will be allocated a named, fully qualified nurse when you arrive on the ward. You will be cared for by a team of nurses throughout your stay. Many of the nurses working at the Heart Hospital hold specialist qualifications and are experienced in looking after patients having chest and heart surgery.

Surgical Team All surgical teams are led by a consultant surgeon, who is responsible for your overall surgical care. All of the consultant surgeons at the Heart Hospital are specialist cardiothoracic (heart and chest) surgeons. Each team is also made up of a number of doctors (who are also trained surgeons or undertaking specialist training) and you will meet one of them before your surgery.

Physiotherapist Physiotherapy is an important part of your recovery, after chest surgery it is important that you practice deep breathing exercises and move about as early as possible. The physiotherapy team will show you how to do this

Anaesthetist An anaesthetist is a specially qualified doctor who will answer any questions you have about the anaesthetic and pain relief after the operation. The anaesthetist also will ask you questions about your health.

Ward Administrator Looks after the administration during your stay such as booking your follow up appointments.

Thoracic Liaison Officer A specialist nurse who co-ordinates your admission and liaises with the chest doctors and specialist nurses you may have already met in your own hospital. Provides support and advice for patients and carers.

There are many other members of the team that you may meet, such as the **Dietitian** who can help if you have problems with your appetite, **Occupational Therapist** if you need help with activities of daily living, specialist **Chest Physicians** who work

closely with the surgical teams, the **Acute Pain Nurse Specialist** who can assess your need for pain medication and the **Pharmacist** who monitors your medication. There are also other specialists within our Trust who can help to care for you. For example if you are coming into hospital for lung cancer surgery you can see our **Lung Cancer Nurse Specialist** for support and advice. We are also happy to arrange a visit by **Religious Representatives** please ask the nurse looking after you.

On the day of your operation

You will be asked not to eat or drink for at least 6 hours prior to your surgery. You will also be asked to have a shower and put on a hospital gown. Your belongings can be stored and will follow you to the ward you return to (you do not always return to the same ward). We ask you not to bring valuables into hospital with you.

What happens in theatre?

Theatre reception

When it is time for your operation, a theatre assistant and the nurse looking after you will accompany you to theatre. In the theatre reception you will have your name and details checked. If you would like a relative to accompany you they may do so. From theatre reception you will be taken to the anaesthetic room.

Anaesthetic room

In the anaesthetic room you will have a small needle inserted into the back of your hand by the anaesthetist. This is how the anaesthetic drugs are given.

You will also be have sticky pads placed on your chest and/or back and be attached to a monitor by the anaesthetic nurse or operating department practitioner. This is to monitor you when you are asleep.

Operating Theatre

You will be asleep before being taken to the operating theatre. The length of time that your operation takes to do depends on the type of operation you are having.

Recovery

Depending on the type of surgery you have had you may go back to the ward after the operation or you may spend a night in the Intensive Care or High Dependency Unit. This is normal procedure for many types of chest surgery, and you will be monitored by experienced staff until you are fully awake.

After your operation you will need to stay in hospital. The length of time will depend on the surgery but is usually a few days. You will be given advice before you are discharged from hospital (for example if you have stitches your practice or district nurse will remove them for you).

Types of surgery

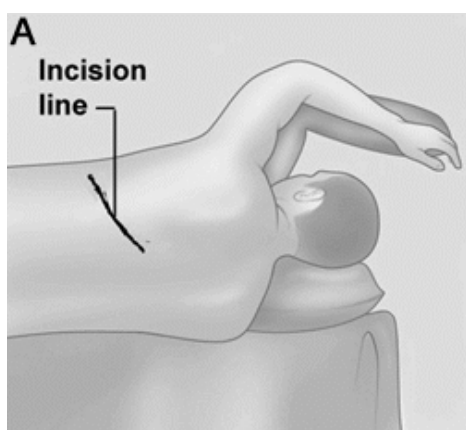
Mediastinoscopy A small incision is made at the top of the chest (just below the neck) and a telescope is passed down the space between your lungs and your chest (breast) bone. This allows the surgeons to take samples of the lymph nodes in the chest. These are then sent to the Histopathology department for tests. You can usually

go home the next day and you do not normally need to make changes to your normal routine, you may wish to continue taking pain relief

Mediastinotomy A small incision is made in the chest, usually next to the chest (breast) bone between two ribs. A surgeon can then take biopsies of tissue, which is sent to the Histopathology department for tests. Because the surgeon has made a hole in the chest which has let air in, a special tube is inserted whilst you are asleep to drain the air out again. This is called a chest drain and it will usually stay in for a couple of days. Once it is removed you can usually go home

VATS (Video assisted thoracic surgery) is a form of “keyhole” surgery. This involves having two or three small incisions, which allow a telescope, and instruments to be passed into the chest (for example to take biopsies of lung tissue or to perform a procedure called pleurodesis). Because the surgeon has made a hole in the chest which has let air in, a special tube is inserted whilst you are asleep to drain the air out again. This is called a chest drain and it will usually stay in for a few days. Once it is removed you can usually go home. You will need to refrain from strenuous exercise or activity for a few weeks depending on the surgery that you have had. Your team will give you more information.

Thoracotomy This type of operation is usually for the removal of larger pieces of lung tissue (called a lobectomy) or required if you need to have an entire lung removed (a pneumonectomy). It may be used to take biopsies. It is also often the way that a lung abscess (empyema) is removed. Because the surgeon has made a hole in the chest which has let air in, one or two special tubes are inserted whilst you are asleep to drain the air out again. These are called a chest drains and they will usually stay in for a few days. Once they are removed you can usually go home.



This is the incision the surgeon uses for a thoracotomy. This involves an incision from the side to the back so that the surgeon can open the chest and perform the surgery. Many people worry that this involves removing or breaking ribs. In most cases this is not necessary. After this type of surgery you will need to avoid lifting heavy objects for 8-12 weeks. This includes some sports such as golf or walking strong dogs. You will receive further advice before you go home.

Useful websites and addresses

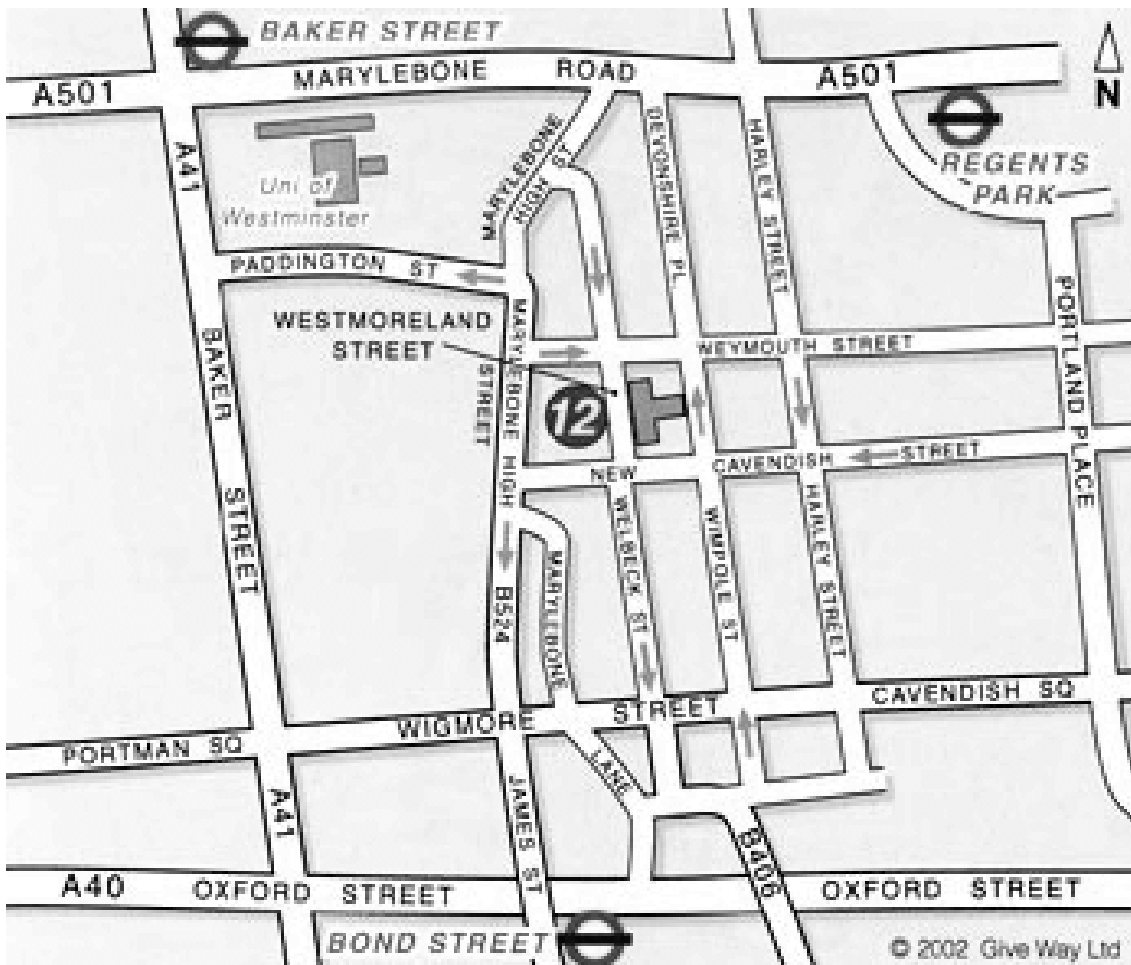
Please note, UCL Hospitals has no responsibility for the content of external web sites.

British Lung Foundation <http://www.lunguk.org/>

British Thoracic Society <http://www.brit-thoracic.org.uk/>

Cancer Bacup www.cancerbacup.org.uk

Roy Castle Foundation www.roycastle.org



The Heart Hospital

Address: The Heart Hospital, 16 - 18 Westmoreland Street, London, W1G 8PH

Switchboard: 020 7573 8888

By bus:

Portland Place - Bus No's 88, C2

Marylebone Road - Bus No's 18, 27, 30

Oxford Street (Bond Street Station) - Bus No's 7, 8, 10, 25, 55, 73, 98, 176

By tube:

Bond Street (*Central / Jubilee Lines*)

Regents Park (*Bakerloo Line*)

Baker Street (*Bakerloo / Circle / Hammersmith & City / Jubilee / Metropolitan Lines*)