Medical Thoracoscopy

Information for patients

Lung Nurse Specialist
Phone no: 01625 661350

Macclesfield District General Hospital
www.eastcheshire.nhs.uk

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An appointment has been made for you to attend Ward 4 at Macclesfield Hospital for a medical thoracoscopy.

Day .................................................................
Date .................................................................
Time of Arrival ..................................................
Fasting from .......................................................
Time of procedure .............................................

**A doctor will speak to you before and after the procedure**

**Introduction**
Your doctor has advised you to have a thoracoscopy for one of two reasons
- to help find out the cause of your chest symptoms
- to remove fluid which may have collected around your lungs, and try to prevent this from happening again.

**What is Thoracoscopy?**
A thoracoscopy involves putting a small telescope into the chest through a little hole (about 1-2cm). This allows the doctor to look inside the chest and around your lungs.

Some samples may be taken from the lining of the chest wall (biopsy), and a pleurodesis may be performed if necessary. This is a procedure where talc is distributed into the affected lung causing the membranes around the lung to stick together and prevents the build-up of fluid in the space between membranes.

**Before the Procedure**
- You must not eat or drink anything for at least 4 hours before the test.
- You still take your usual medicines with a small amount of water (diabetics will be advised by the medical staff).
- You will not need a general anaesthetic. You will be given some medicine to make you feel relaxed and sleepy before the test.

**The Thoracoscopy**
The Thoracoscopy takes between 40-60 minutes. The doctor will inject you with painkillers and medication to help you relax; this may make you feel sleepy. You will have a small probe placed on your finger to monitor your oxygen levels and your heart will be monitored throughout the procedure.

The doctor will numb the area of your chest where the tube goes in. You may feel the doctor pushing on your chest but this will not last long. If you find this uncomfortable, the doctor will give you more painkillers intravenously.

The fluid will be drained via a chest drain and a biopsy may be taken. The doctor may perform a pleurodesis, as previously described.
After the test
You will be taken back to your bed on Ward 4 and made as comfortable as possible. You may have a drink and something to eat after about one hour if you are not too sleepy and feel able to manage. You will be then reviewed again by the doctors on the ward.

Pain
You may experience some pain or discomfort in your chest, but if this happens you must inform nursing staff or doctor so that they can give you some painkillers.

Chest Drains
You will have a chest drain in after the thoracoscopy. This is to help drain any blood or air that remains in your chest after the procedure. The drain will usually be removed within 24-48 hours after which you will probably be discharged. You will have a small stitch where your drain was inserted and this will need to be removed within 7-10 days. Your GP Practice Nurse or District Nurse will be able to do this.

After your Procedure
You may see some bubbles of air and a little blood draining into your chest drain bottle. This is normal. Sometimes, especially if samples have been taken, you may bleed slightly more. The nurses will record your blood pressure, pulse and temperature at frequent intervals after the procedure.

How long will I be in hospital for?
Most people should go home the next day, but you may need to stay for a couple of days.

When will I get the results?
An outpatient’s appointment will be made for one week after the procedure. On this appointment the doctor will discuss the results of the thoracoscopy with you. Please feel free to discuss any questions or queries with the doctor, some patients find it easier to write them down prior to the appointment, in order not to forget.

What are the possible problems with the procedure?
The problems that may occur after this procedure are not usually serious.

- There is a small risk that the lung may be punctured (a pneumothorax), or that the air or fluid is difficult to drain. This would mean that the chest drain would have to stay in for a few more days.
- Very rarely patients can bleed heavily afterwards, this can be dealt with if necessary but usually stops on its own.
- When the chest drain has been removed, the small wound it leaves can become sore or infected. If this happens, a district nurse or practice nurse will be informed and arrangements made for it to be re-dressed.
- If you have a pleurodesis, the talc that is used can sometimes cause inflammation of the lungs. This may cause breathlessness but usually settles quickly.
What to do if there you have any problems after discharge
If you have any problems or questions after you have gone home please contact:

Dr Iyers Secretary - 01625 661350 or
Dr Babores Secretary - 01625 663211
Macmillan Lung Cancer Nurses – 01625 661997

If you become suddenly short of breath contact the Accident & Emergency department 01625 661450 or dial 999 for urgent assistance.

References
European Respiratory Society: Medical Thoracoscopy
http://www.youtube.com/watch?v=Oud7GgHb27I [podcast]