

# Spleen Removal - Splenectomy

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## What is it?

A **Splenectomy** is a surgery for the removal of your spleen. A spleen is about the size and shape of a person's fist. It is tucked under the ribs on the left. It filters the blood of impurities and helps the body fight infections. Sometimes the spleen filters too much of the blood causing bruising, bleeding and anaemia. Sometimes it causes pain if it swells up. Sometimes it splits after an injury and bleeds very seriously. In such condition it has to be removed.

## The Surgery

You will have a general anesthetic, and will be unconscious throughout the operation. An incision is made in the skin between your breast bone and your tummy button. Then the spleen is removed. Then this incision in the skin is closed up. You will need some treatment for a year or more to ward off infections. Plan to go home 7 days after the operation. That is, unless there is a need for you to go back to a medical ward for extra treatment from the haematology specialist. You will be told about this at the time. You will need to take antibiotics and have vaccinations for a year after the operation.

## Any Alternatives

If left untreated, the problem with your spleen will usually get worse. A bleeding spleen is usually life threatening and has to be removed. If bruises and smaller tears stop bleeding, then there is no need to remove the spleen. If the spleen is damaging the blood in your case, drug treatment or x-ray treatment are of no benefit. The benefits of removing the spleen outweigh the finer problems of living without one.

## Before the operation

Stop smoking and reduce the weight if you are overweight. (See Healthy Living). If you know that you have problems with your blood pressure, heart, or lungs, consult your physician and ask him to check that these are under control. Check the hospital's advice about taking the Pill or hormone replacement therapy (HRT). Check you have a relative or friend who can come with you to the hospital, take you home, and look after you for the first week after the operation. Sort out any tablets, medicines, inhalers that you are using. Keep them in their original boxes and packets. Bring them to the hospital with you.

On the ward, you may be checked for past illnesses and may have special tests to make sure that you are well prepared and that you can have the operation as safely as possible. Please tell the doctors and nurses of any allergies to tablets, medicines or dressings. You will have the operation explained to you and will be asked to fill in an operation consent form. Many hospitals

now run special preadmission clinics, where you visit for an hour or two, a few weeks or so before the operation for these checks.

### **After - In Hospital**

Some patients feel a bit sick for up to 24 hours after operation, but this passes off. You will be given some treatment for sickness if necessary. You will have a drain tube in an arm vein. There will probably be a fine plastic tube coming out near the skin wound. There will possibly be a fine plastic tube in your nose to drain your stomach. You may be given oxygen from a face mask for a few hours if you have had chest problems in the past. A general anaesthetic will make you slow, clumsy and forgetful for about 24 hours. Do not make important decisions during that time.

The wound is painful and you will be given injections and later tablets to control this. Ask for more if the pain is still unpleasant. You will be expected to get out of bed the day after operation despite the discomfort. You will not do the wound any harm, and the exercise is very helpful for you. The second day after the operation you should be able to spend an hour or two out of bed. By the end of 4 days you should have little pain. The wound has a dressing which may show some staining with old blood in the first 24 hours. The dressing will be removed and the wound will be sprayed with a cellulose varnish similar to nail varnish. There is no need for a dressing after this unless the wound is painful when rubbed by clothing. There are no stitches in the skin. The wound is held together underneath the skin and does not need further attention. The thin plastic drain tube is removed when it stops draining - usually after 48 hours. There may be some purple bruising around the wound which spreads downwards by gravity and fades to a yellow colour after 2 to 3 days. It is not important.

There may be some swelling of the surrounding skin which also improves in 2 to 3 days. After 7 to 10 days, slight crusts on the wound will fall off. The cellulose varnish will peel off and can be assisted with nail varnish remover. Occasionally minor match head sized blebs form on the wound line. These settle down after discharging a blob of yellow fluid for a day or so. You can wash the wound area as soon as the dressing has been removed. Soap and tap water are entirely adequate. Salted water is not necessary. The nurses will talk to you about your home arrangements so that a proper time for you to leave hospital can be arranged. Some hospitals arrange a check up about one month after leaving hospital. Others leave check-ups to the General Practitioner. The nurses will advise about sick notes, certificates etc. You may need to see the Haematology specialist after your operation. This will be arranged.

### **After - At Home**

You are likely to feel very tired and need rests 2 to 3 times a day for a week or more. You will gradually improve so that by the time 2 months has passed you will be able to return completely to your daily routine effortlessly. You can drive as soon as you can make an emergency stop without discomfort in the wound, i.e. after about 3 weeks. You can restart sexual relations within

2 or 3 weeks when the wound is comfortable enough. You should be able to return to a light job after about 4 weeks and any heavy job within 8 weeks.

## **Possible Complications**

Complications are unusual but are rapidly recognized and dealt with by the nursing and surgical staff. Chest infections may arise, particularly in smokers. Co-operation with the physiotherapists to clear the air passages is important in preventing the condition. Quit smoking. Wound infection is a rare problem and settles down with antibiotics in a week or two. Aches and twinges may be felt in the wound for up to 6 months. Occasionally there are numb patches in the skin around the wound which get better after 2 to 3 months. In the longer term there is a risk of you getting infections readily. We will arrange for you to take antibiotics for a year or longer just in case. You may need antibiotics and booster injections to prevent this. The haematologist or your GP will advise you.

## **General Advice**

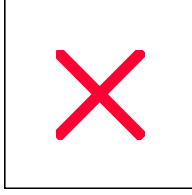
The operation should not be underestimated. Some patients are surprised how slowly they regain their normal stamina. However, virtually all patients are back doing their normal duties within 2 months. These notes will help you through your operation. They are a general guide. They do not cover everything. Also, all hospitals and surgeons vary a little. If you have any queries or problems, please ask the doctors or nurses.

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