Drainage of ascites (paracentesis)

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What is ascites?

Ascites is a medical term which describes the build-up of fluid within the abdomen. It is normal for there to be a small amount of fluid within the abdominal cavity, which is continually created and absorbed. Ascites develops when the body is unable to remove this fluid adequately and the amount of fluid in the abdomen increases. There are a number of reasons for this imbalance. It occurs commonly in liver disease.

What symptoms does it cause?

The presence of excess fluid in the abdomen can cause a number of symptoms, including pain, poor appetite, difficulty breathing, indigestion, nausea and vomiting and reduced mobility.

What can be done about it?

To relieve symptoms we need to remove the excess fluid. This can be done by taking medication called diuretics (commonly spironolactone). However this is not always possible, sometimes because of side effects, the drugs stopping working or the drugs taking a few weeks to work. The quickest way to remove the fluid is to drain the fluid through a plastic drain inserted into the abdomen. This is called paracentesis.
What does paracentesis involve?

We carry out paracentesis on you either as an inpatient at QEHB on the ward or as a day case in ambulatory care/outpatient area. This will be dependent on individual need following assessment. You will be seen by a doctor or Clinical Nurse Specialist. We will talk you through the procedure, answer any questions you may have and ask you to sign a consent form if you are happy to continue with the procedure.

Before the procedure you will have a clinical examination and, on occasion, an ultrasound scan performed to confirm the fluid to be drained (see ultrasound examination leaflet).

You will have a blood pressure check, weight measurement, blood sample taken and a cannula (small needle) will be inserted as you will need to receive replacement fluid during the drainage. We may have to wait for the blood results to be analysed before starting the procedure and this may take a couple of hours.

You will be asked to lie on the bed or recliner. The doctor or Clinical Nurse Specialist will inject local anaesthetic to numb the area before inserting the drain using a needle. The drain will then be attached to a drainage bag.

The drain will stay in for no more than six hours before it is removed by nursing staff. A dressing will be placed over the area and should remain in place for 48 hours and needs to be kept as dry as possible. Sometimes there can be small amounts of the fluid still draining when the drain has been removed and we may place a small bag over the hole to stop this getting your clothes wet. If this is the case we will show you how to empty this bag before you go home and we will give you some small dressings to take home with you.
What are the risks?

Any procedure does carry a risk of complications and side effects. Paracentesis is a safe procedure, with a very small rate of significant side effects:

• Infected fluid inside your abdomen (this will cause your temperature to rise, feeling sweaty and feverish/shivering)
• Injection of the anaesthetic may cause a pain described as a stinging pain
• Puncturing a blood vessel can result in bleeding which can be significant and associated with low blood pressure, which potentially could be life-threatening
• Damage to organs inside your abdomen (e.g. liver, spleen, intestines). This is a very serious complication of the procedure but occurs in less than six in 1000 cases

During the procedure

You will be restricted to the bed/recliner during this time but able to move position and sit up. You will be restricted due to the drain and fluid administration. Painkillers can be given if the drain becomes uncomfortable. You are advised to bring reading material/an electronic device to pass the time as you will be in hospital for at least 6 hours. For most patients this procedure will be performed as a day case. Once the drain has been removed and you are feeling well, you will be able to go home. If any problems occur after the procedure, please refer to your hospital discharge letter with instructions of who to contact and when to seek medical attention.

Further appointments will be made for you by your medical team. If
you feel you have problems relating to the fluid build up before this please contact the Clinical Nurse Specialist or your liver Consultant’s secretary for advice.

It would be useful to weigh yourself at home post-drainage, then twice weekly to guide us with your treatment.
Please use the space below to write down any questions you may have and bring this with you to your next appointment.

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The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4323.