Transbronchial lung biopsy

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A transbronchial biopsy is a procedure performed during examination of your lungs with a flexible telescope (bronchoscopy) in which a small piece of lung tissue (biopsy) is removed for analysis. Your consultant has recommended a transbronchial biopsy to find out the cause of the problem in your lungs.

**Alternatives**

An X-ray or scan can show that you have a problem however a biopsy is more likely to find out exactly what is causing the problem.

**The procedure**

You won’t be able to eat anything for four hours before the procedure, but you can take your regular medication with a small amount of water.

You will be admitted to our daycase unit (Ambulatory Care) before the procedure. Please attend at the time stated on your letter. Once ready, you will be taken to the procedure room in the imaging department on a trolley.

Your doctor will use local anaesthetic gel and spray to numb your nose and throat. This can taste unpleasant but only lasts for a couple of minutes. Your doctor will also give you a sedative to help you relax. Your oxygen levels and heart rate will be monitored during the procedure.

A transbronchial biopsy procedure usually takes less than half an hour. Your doctor will pass a flexible telescope (bronchoscope) through your nose and down into your lungs. Sometimes the bronchoscope will be passed through your mouth instead of your nose. Your doctor will use the bronchoscope to examine your airways (bronchi), and then small forceps will be gently pushed down one of your airways (a bronchus) into your lung. Your doctor will use the forceps to take samples of lung tissue, using an X-ray machine to determine the location within the lung from which the biopsies are taken. Your doctor may also use small amounts of salty water to obtain other further samples for analysis. You will have a chest X-ray after the procedure.
Following the procedure, the samples will be examined to find out the cause of your problem.

**What to do about your regular medications**

Continue your normal medication unless you are told otherwise. If you take any blood thinning treatment (warfarin, clopidogrel, apixaban, rivoraxiban, dabigatran), please make sure that your consultant is aware of this; the biopsy procedure cannot take place unless specific arrangements have been made. It is safe for you to be taking aspirin.

If you are taking diabetic medication, please make sure that your consultant is aware of this as some treatment may need to be altered, and you will usually need to go first on the list.

**Possible complications**

- **Breathlessness**, which quickly settles after the procedure. Sometimes breathing can be more difficult due to the effect of the sedation or the procedure. Your oxygen levels will be monitored and you will be given oxygen if needed.

- **Pneumothorax**, where air escapes into the space around the lung. Usually a pneumothorax is small and does not cause any problems. If it is large, your doctor may need to insert a tube (chest drain) in the space around the lung to re-inflate the lung. This happens in fewer than 1 in 20 cases. If you do suffer this problem, you may not be able to fly for 4-6 weeks – tell your doctor if you plan to fly in the weeks that follow this test – you may want to delay this test until after your trip.

- **Bleeding** from a biopsy site which is usually minor and stops on its own. It is normal to cough up some streaks of blood for a day or two after the procedure.

- **Developing a high temperature** a short while after the procedure, which is easily treated with paracetamol.

- **Developing a sore throat**, which gets better quickly.

This is not a definitive list and symptoms will vary with each case.
patient. Please ask your consultant for more information of your individual risks.

Recovery

Once you are awake enough and able to swallow properly, you will be given a drink (normally about two hours after the procedure). You should be able to go home after you have recovered from the sedative, and have had a chest X-ray. Remember, you won’t be able to drive home after the procedure, to operate heavy machinery, or to make important decisions and you will need someone to collect you from the hospital.

Once at home, if you have any of the following let your doctor know immediately:

- severe chest pain
- continued vomiting
- a high temperature lasting more than twelve hours
- sudden breathlessness
- you cough up more than a tablespoon of blood

For more information, and if you have any queries about the procedure, speak to your consultant.

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.