

Laparoscopy and Associated Treatment in Adolescence

An information leaflet for patients, parents and guardians

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Introduction

1.

1. Introduction

Your specialist has suggested an operation called a laparoscopy. This operation is done to find out what is happening inside your tummy, for example, if you have pain. A laparoscopy can also be used to treat any problems such as a cyst on the ovary that may have been found on scan (Ultrasound or MRI) which you may have had previously.

2. What is laparoscopy?

A laparoscopy is an operation which allows the doctor to look inside your tummy with a telescope. This is carried out through small skin cuts (incisions). It is performed under a general anaesthetic which means that you will be asleep during the operation.

3. How is it done?

A small cut (0.5 to 1 cm, the width of a finger nail) is made inside your belly button. Your tummy is stretched up with gas (carbon dioxide) and a telescope (laparoscope) is inserted through the cut in the belly button. The laparoscope has a camera on one end which shows the operation on the television screen for the specialist to have a clear view of the inside of your tummy. Up to 3 other cuts (of similar size) may also be used to put some special instruments in your tummy. The number of cuts will depend on what needs to be done during the operation. The time it takes for the operation will also depend on what needs to be done. Your doctor will talk about this before your surgery.

4. What tests are carried out before laparoscopy?

It is very likely that you will have had an ultrasound scan of your tummy before your operation. Sometimes more detailed scans such as MRI (body scan) will be needed to plan the best operation for you.

If this is a planned operation and not an emergency, you will usually be asked to come to clinic for a pre-operative assessment. This will include a blood test which is routine and is done on every patient undergoing surgery. You will also have swabs taken from your nose (using a small cotton bud) to check that you are not carrying any infections into hospital.

Please do ask the doctor or nurse at this appointment if you are not sure about anything.

5. What type of anaesthesia will be administered?

This operation is only done under general anaesthetic which means you will be asleep.

6. What are the good and bad (risks) things for laparoscopy?

Good things:

The main aim of doing this operation is to find the cause of the problem and treat it if possible. The surgeon can normally have better views of the insides of your tummy with laparoscopy than with traditional surgery which needs a much bigger cut on your tummy. In addition there is a shorter recovery time and you will be back to school or college and normal activities more quickly. The laparoscopy leaves much smaller and less visible scars on your tummy.

Bad Things:

All operations have risks. The main risks include

- Bleeding
- Infection.

These are not usually serious and are easily treated.

However there are some rare but more serious risks. These include

 Damage to the other organs inside your tummy such as the bladder, the gut and the blood vessels. If any damage does occur, it will usually be repaired at the time of laparoscopy. However, this might mean making a bigger cut on your tummy and a longer stay in hospital. If the damage is to your gut, there is a very small chance you will need a "stoma". This is a bag on your tummy to collect your motions (poo). This will be temporary whilst your tummy is healing.

All of these risks will be explained to you and your parent or guardian. If you are under 16, your parent or guardian will need to sign a consent form to say they have understood these risks. If you are over 16, you will be able to sign the consent form yourself. The consent form will usually be signed in clinic when the decision is made that you need a laparoscopy.

7. What other treatments are available?

Other treatments should be discussed during the clinic appointment before planning surgery. However, if you or your parents are not sure about anything or this was not discussed, please do not hesitate to ask.

8. What preparation will be required before the operation?

- There is a period of fasting before any operation when you are expected not to eat or drink. This length of time depends on the arrangements of your hospital. As a general rule you will not be able to eat for 6 hours before and drink 4 hours before an operation.
- It is important not to have any chewing gum or sweets before the operation as this may lead to your operation being cancelled.
- You need to check with your doctor or nurse at what time you need to stop eating or drinking before your surgery and whether or not you should take any medication.
 Please ask about any regular medication that you normally take.

9. How long will it be necessary to stay in hospital?

Laparoscopy is most often carried out as a day case procedure so you would expect to go home on the same day. Your parent or guardian will need to be at home to look after you for at least the next 24 hours after the surgery. If you have treatment during the laparoscopy, then you may need to be in the hospital longer. Depending on your hospital, your parent or guardian may be able to stay with you and may be able to come to the operating theatre with you. If you wish, they can also come to the recovery area when you wake up.

10. What care will be needed after laparoscopy?

Stitches: There will usually be some skin stitches to close the small cuts. These are normally dissolvable. Please keep any dressing clean and dry for 2 days after which you can remove the dressing and bathe the area as usual. Please do not rub the area as it can cause irritation. Also avoid any cream or talcum powder onto the wound. Stitches may take a few weeks to dissolve. If after 2 weeks they cause discomfort, please go to your GP's surgery and ask the practice nurse to remove them.

Pain/discomfort: Feeling pain or discomfort in the first few days is quite common. It is important to take regular painkillers for the first few days after the operation. You may be given painkillers by the hospital or advised to buy ibuprofen and paracetamol. If, however, the pain gets worse or does not settle after taking pain killers, please contact the ward.

If you have had just a laparoscopy but no treatment, then you will usually need 2-3 days off from school or college. If you have had some treatment at the same time then you may need 1 or 2 weeks off. Your hospital consultant or GP will advise you on this and will provide a sick note.

11. When should I seek hospital advice?

It is quite common to have shoulder tip pain or discomfort in the upper part of the tummy after the operation. Most laparoscopic operations do not cause any problem afterwards, but there are certain signs you will need to look out for at home:

- If you have raised temperature, redness around the stitches or discharge then infection is a possibility. If this happens seek advice from your GP.
- Bleeding is another complication after this operation. This does not usually happen following discharge but if you have heavy and fresh bleeding from the cuts, you should seek advice immediately.
- Injury to bowel is another rare complication of this operation. Normally it is
 identified during the operation and repaired. However, sometimes it can go
 unnoticed. If you have persistent or increasing abdominal pain or vomiting, contact
 the hospital immediately.

12. Will I need to visit the hospital again after the operation?

Your doctor will tell you after the operation if there is a need for a hospital appointment. If so, this will either be arranged before you go home or you will get an appointment letter through the post.

13. Useful Telephone Numbers:

You may be given the telephone number for your hospital ward or for you clinical nurse specialist.

In addition you can contact your own GP.

NHS 111 (This number is if you need medical advice but it is not a medical emergency)

NHS Direct Online (www.nhsdirect.nhs.uk). This e mail address will be changing

14. Acknowledgements:

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