Gloucestershire Hospitals NHS Foundation Trust

**Patient Information**

# Indwelling pleural catheters

## Introduction

This leaflet provides information for patients who may need to have an indwelling pleural catheter.

## Why do I need an indwelling pleural catheter?

Some conditions, including cancer, can cause fluid to build up in the chest, around the lung, making you breathless. An indwelling pleural catheter is a way of draining the fluid and relieving breathlessness caused by this problem.

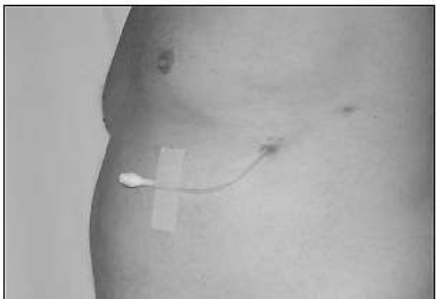

**Figure 1: Image of an indwelling pleural catheter**

## What is an indwelling pleural catheter?

An indwelling pleural catheter is a small, soft tube which is inserted into the side of the chest to drain fluid from around your lungs. The design of the tube allows it to remain in the chest for long periods of time. This means fluid can be drained at home whenever needed. An indwelling pleural catheter avoids the need for repeated drainage using needles or chest drains in hospital.

## Insertion of an indwelling pleural catheter

The tube can be inserted as a day case. The procedure is done with you lying on your side. We use local anaesthetic to numb the area and then 2 small incisions (cuts) are made and the drain is passed under the skin and into the chest. Two or three stitches are used to close the incision.

## Will it be painful?

You may feel some discomfort or pushing but this should not be painful. If you experience pain, then let us know and more local anaesthetic can be injected.

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After the procedure, the area may feel sore or bruised for a few days. You will be given pain relief medication to relieve this discomfort.

## How long will I need to be in hospital?

You will be observed for a short period after the procedure. If there are no problems you will be discharged. Someone will need to drive you home after the procedure.

## What happens after the drain is inserted?

After you have gone home, the district or community nurses will visit you to drain the fluid using drainage bottles (shown in Figure 1). At first, this is usually done 2 or 3 times a week, but over time, the frequency of drainage will depend on how quickly the fluid accumulates.

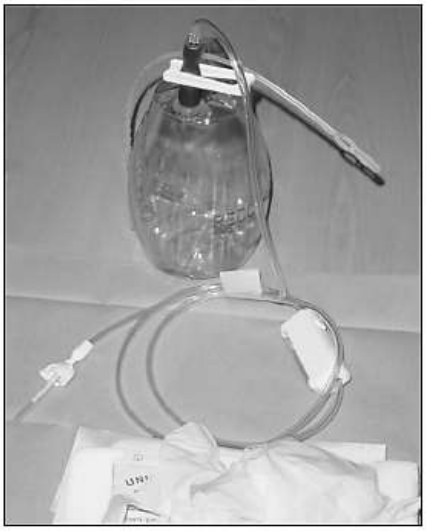

**Figure 2: Drainage bottle**

The community nurses can also teach you and a relative or a friend how to drain the fluid when you return home.

This procedure is simple to do, but it is important that you drain the fluid in the way that is shown to you in order to avoid infection.

The stitches will need to be removed by the district nurses about 10 to 14 days after the drain was inserted.

## Can I wash and shower with an indwelling pleural catheter?

We advise that you keep the site dry for the first 7 days after insertion. After this you can take a shower or bath with an adhesive waterproof dressing securely fixed around the drain and gauze pads.

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## Can the indwelling catheter be taken out?

Indwelling catheters are designed to remain in place for as long as they are needed. In some patients the fluid dries up over time. It is possible to have the catheter removed as a hospital day case procedure if it is no longer needed. You can discuss this with your doctor.

## What are the risks associated with an indwelling pleural catheter?

There is small risk that over time infection can get into the chest along the tube. This risk is reduced by good catheter care. About 1 in 30 patients may develop an infected catheter.

If you develop pain or redness around the catheter or if the fluid coming out of the drain becomes cloudy, then tell your lung cancer nurse specialist straight away.

As with any invasive procedure, there is a small risk of damaging a blood vessel and causing bleeding during the insertion of an indwelling pleural catheter. It is very rare for this bleeding to be severe (around 1 in 500 cases).

Occasionally, cancer tissue can affect the area around the catheter. This usually responds to treatment, but if you develop lumps or pain around the catheter site then let your lung cancer nurse specialist know.

## Are there alternatives to an indwelling pleural catheter?

A talc pleurodesis (injecting talc into the space around the lung via a short-term tube) is an alternative to an indwelling pleural catheter. This is a treatment that is possible for some patients and would involve staying in hospital for a few days. It is effective in 60 to 70 of every 100 cases. Your doctor can discuss with you whether this is a suitable alternative for you.

Another alternative is to manage without a tube or by having fluid taken off with a needle and syringe. This may be an option if you are not too breathless and the fluid isn't building up quickly.

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# Contact information

If you have any problems with your indwelling pleural catheter please contact your lung cancer nurse specialist:

**Lung Cancer Specialist Nurse**
Gloucester Royal Hospital
Tel: 0300 422 5967
Monday to Friday, 9:00am to 5:00pm

Cheltenham General Hospital
Tel: 0300 422 2379
Monday to Friday, 9:00am to 5:00pm

Alternatively, you can contact Dr Steer's or Dr Bintcliffe's secretary on:

Tel: 0300 422 6121 or 0300 422 4367
Monday to Friday, 9:00am to 5:00pm

For urgent medical advice at other times, please contact NHS 111 for advice.

**NHS 111**
Tel: 111

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# Making a choice

## Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.

## Ask 3 Questions

**To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.**

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation.

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84:379-85

AQuA NHS https://aqua.nhs.uk/resources/shared-decision-making-case-studies/