



## Having a percutaneous abscess drainage

This leaflet tells you about the procedure known as a percutaneous abscess drainage, explains what is involved and what the possible risks and benefits are.

### **What is a percutaneous abscess drainage?**

An abscess can be very painful and can make you feel very ill. In the past, drainage of an abscess inside your chest or abdomen would have required an open operation. Now it is possible to drain abscesses by inserting a fine plastic tube, called a drainage catheter, into it through the skin with only a tiny incision (cut). This procedure is called percutaneous (through the skin) abscess drainage.

Other tests that you have probably had, such as an ultrasound or CT scan, will have shown that you have an abscess and that it is suitable for draining. If an abscess occurs after surgery it will delay your recovery. Although antibiotics can help, they cannot always be effective against a large abscess. Some of the pus removed during the drainage can be sent to the laboratory for tests to show which is the best antibiotic to treat the remaining infection.

### **How do I prepare for an abscess drainage?**

You need to be an inpatient in the hospital. If you are an outpatient you will be admitted to a ward. You may be asked not to eat for a short time beforehand.

### **What actually happens during an abscess drainage?**

You will lie on your bed or on the scanning table in the position that the radiologist has decided is most suitable to undertake your procedure. The radiologist will keep everything as sterile as possible and may wear a theatre gown and operating gloves. Your skin will be cleaned with antiseptic and then most of your body will be covered with a theatre towel. The radiologist will use the ultrasound machine or the CT scanner to decide on the most suitable point for inserting the drainage catheter. Your skin will be numbed with local anaesthetic and a fine needle inserted into the abscess.

What happens next will vary in different situations. The pus may simply be drained through the needle. Alternatively, it may be necessary to place a larger drainage tube into the abscess and attach it to a drainage bag so that pus can continue to drain over the next few days.

### **Will it hurt?**

When the local anaesthetic is injected, it will sting at first but this soon wears off and the skin and deeper tissues should then feel numb. There will be a nurse or another member of the clinical staff standing next to you and looking after you. If the procedure does become painful, they will be able to arrange for you to have some pain relief.

### **How long will it take?**

Every patient's situation is different and it is not always easy to predict how long it will take. It usually takes around 20 minutes, although this can vary.

### **What happens afterwards?**

You will be taken back to your ward. Nurses on the ward will carry out routine observations, such as taking your pulse, blood pressure, and temperature to make sure that there are no problems. You will generally stay in bed for a few hours until you have recovered. If you have been admitted just for this procedure, you will usually need to stay in hospital overnight. If the drainage catheter has been left in, it will be attached to a collection bag. It is important that you try and take care of this catheter and bag. You should try not to make any sudden movements and make sure that the bag can move freely with you. It may need to be emptied occasionally so that it does not become too heavy, but the nurses will want to measure the amount in it each time.

## Having a percutaneous abscess drainage (continued)

### **How long will the catheter stay in and what happens next?**

These are questions that only the doctors looking after you can answer as everyone is different. It may only need to stay in a short time. It is possible that you will need further scans or X-rays to check that the abscess has been drained satisfactorily.

### **Are there any risks or complications?**

As with all medical procedures there are some risks. It is not always possible to place the drainage tube satisfactorily in the abscess. If this happens your consultant will arrange another method of draining the abscess. This may involve surgery.

Depending on where your abscess is, the needle may need to pass through some of your internal organs to reach the abscess. This may result in some internal bleeding. The nursing staff on the ward will check for signs of this. If this is severe you may require an operation.

Very occasionally, patients may get a shivering attack (rigor) during or shortly after the procedure, but this is generally treated satisfactorily with antibiotics. Despite these possible complications, an abscess drainage will almost certainly make you feel more comfortable.

### **Who should I contact if I have any questions?**

If you have any questions about the information in this leaflet or about the procedure, please ask the staff looking after you.