

Patient information

Advice for patients being discharged home with a drain following surgery to the breast and/or axilla - Conquest Hospital patients

Introduction

Following your surgery to the breast and/or under the arm (axilla), a wound drain may be inserted. A drain is used to prevent or minimise bruising or swelling caused by fluid collecting in the wound cavity. The drain(s) may be required to stay in for a period of between five to seven days, depending on the amount of fluid drained over a 24 hour period.

A referral will be completed by the ward nurses when you are discharged home requesting daily visits by the district nursing team, starting the day after discharge. We are unable to book appointment times for these visits, but occasionally the nurse may phone you to advise of any delays. If the nurse does not arrive by mid afternoon, please contact your doctors surgery or ward you were discharged from for advice.

On day of discharge

You will be supplied with additional bottles to take home, and a copy of the drain chart. Please return any unused bottles when you are seen in post-operative clinic. Prior to discharge a nurse will show you how to check that the drain is working.

How to check a drain is working?

Patients have drain (A) shown below. Drain (A) is a closed vacuum drainage system so the drain does not need to be in a specific position when you are carrying it with you. When the bottle is first attached and the vacuum is working the green concertina valve will be flat (B). As the drain bottle fills up this will expand. Once the bottle is full or if the vacuum has stopped working it will appear fully expanded (C)



There can be several reasons for loss of suction:

- The bottle may be full or blocked in tubing
- Accidental pulling of drain despite being stitched
- Tube may have become disconnected

If the drain bottle loses suction over-night and doesn't become disconnected you don't need to worry. It is safe to wait for the district nurse to change the bottle the following day.

Will I have to come back to hospital with the drain?

If there are no problems with your drain whilst it is in, the district nurse will be able to remove it when it drains less than 50mls in 24 hours, from day two following your operation. If the drain, (s) is draining large amounts then it will be kept in till day five. If necessary, day six, but the drain (s) must be removed on day seven regardless of its amount. You will then be followed up in clinic approximately two -four weeks after your operation.

If there is a problem with your drain you may need to come back to the hospital to have it checked, removed or replaced.

- For example, if you develop a large amount of swelling whilst your drain is in.
- Or you are having a lot of leakage from the drain entry site and/or the vacuum does not appear to be working then you may need to return to hospital to be reviewed. The drain bottle may need to be replaced or the drain removed.
- If the drain bottle becomes disconnected.

Any problems with your drain:

- First point of access: Contact the ERAS Specialist Nurse in Breast Surgery (available: Wednesday, Thursday and Friday, please leave a message and your call will be returned 0300 131 4500 Ext: 147269 or 07971131913). If your call is not returned please phone Macmillan Breast Care Nurse Specialist for advice.
- Second point of access: You can contact Gardner SAU Ward for advice 0300 131 4500 Ext: 148448 if you are unable to get in touch with the ERAS Specialist Nurse in Breast Surgery or out of hours in the evenings or at weekends.

If you have had any problems and have had to seek further advice, please inform the Enhanced Recovery Nurse Specialist in Breast Surgery, so they can be kept updated.

Disposal of bottles

Used drain bottles must not be disposed of with general household waste. Your district nurse will be able to advise on disposal of used bottles, alternatively please contact your GP surgery, or Enhanced Recovery Specialist Nurse in Breast Surgery (number at end of leaflet).

After the drain is removed

Once the drain has been removed the affected area should be more comfortable. Paracetamol may be taken if required to aid any discomfort, if it does not resolve please contact your GP or Enhanced Recovery Specialist Nurse in Breast Surgery for advice.

It is unlikely that you will develop a wound infection but it is important that you know what to look for:

The wound feels:

- Tender, swollen and warm to touch or has redness in the affected area.
- Leakage from the wound and/or drain site.
- Generally feeling unwell, with a raised temperature.

If you have any of these symptoms please get an emergency appointment with your GP or out of hours service (e.g. NHS 111). Please ensure a Health Professional reviews the area of concern on the day it is identified in case antibiotics are required.

Please leave a message on the answer phone of the Enhanced Recovery Specialist Nurse in Breast Surgery to update them on the situation but do not wait for a return call before contacting your doctor.

Seroma

Sometimes once the drain has been removed a collection of fluid can develop in the breast or under arm area. This is called seroma which is not a serious issue. It is normal fluid which the body has not yet found an alternative way of draining. A seroma can be described as “feeling like your carrying a golf ball or cricket ball under your arm or around the mastectomy scar” remember this is harmless. A seroma is normally re absorbed over a period of time but can take several weeks or months. If it is causing a lot of pain or discomfort it may need to be drained. This is a simple procedure which can be done as an outpatient, it is not usually painful and it is not a medical emergency.

- Any concerns regarding a seroma: first point of access is the Enhanced Recovery Specialist Nurse in Breast Surgery 0300 131 4500 Ext: 147269 or 07971131913.
- If the ERAS Nurse Specialist doesn't return your call then please contact the Macmillan Breast Care Nurse Specialists (numbers at end of leaflet).

The ERAS Specialist Nurse/ Macmillan Breast Care Nurse Specialists will arrange for your seroma to be drained. You only need to be reviewed by your GP or A/ E if you start to feel unwell and area (seroma/swelling) is red and inflamed.

If you develop a large amount of swelling within 24 to-48 hours of the drain being removed and start to feel unwell it is important that you are reviewed.

How soon will I be able to resume normal activities?

Once you have had your drain removed, you can try to do a little more physical activity each day. Try not to set yourself enormous tasks and remember to rest between them; your body needs time and energy to recover. You should be able to return to most of your normal activities within a few weeks of your operation but this will vary from person to person and it is helpful to take things gently at first try to avoid strenuous housework such as vacuuming, ironing or carrying heavy shopping for the first 1 or 2 weeks. You may have more discomfort and stiffness as you begin to move your arm more and become more active. This usually improves naturally over time. Eating well will also help your body recover and your wound to heal and a healthy balanced diet is recommended.

When will I be able to drive?

Depending in the type of surgery you have had you may be advised to avoid driving for between 1 and 4 weeks. It is important to wait for your wound to heal before you start driving and if you have a large amount of swelling allowing this to resolve first may make driving easier and more

comfortable. It is important that before you start driving again you feel safe and confident that you can handle your car in the event of an emergency. It is advisable to start with short journeys and may be useful to have a companion with you at first. Breast surgery does not exempt you from wearing a seatbelt and this may be uncomfortable. To alleviate this you may try using a small thin cushion or placing extra padding around the seatbelt or purchasing a seatbelt clip (available from motoring stores). You may also want to check with your insurance provider that you are covered.

When can I return to work?

How soon you return to work will vary depending on your job and any follow on treatments you require as well as your progress recovering from your surgery. Most people will usually require at least 4 to 8 weeks off work and then will be able to reassess the situation as more information becomes available. If you feel you want to return to work earlier than this and are feeling fit and well then you can.

Important contact numbers

If you have any questions/concerns following your discharge from hospital please contact the following:

- Monday to Friday - 9.00am to 5.00pm (Excluding Bank Holidays and weekends)

Conquest Hospital patients:

Macmillan Clinical Nurse Breast Specialists

Louise Hunter Telephone: 0300 131 4500 Ext: 148291 or

Juliette Twyman Telephone: 0300 131 4500 Ext: 148063

Enhanced Recovery Nurse in Breast Surgery:

Connie Bowyer Telephone: 0300 131 4500 Ext: 147269 or 07971131913.

Out of Hours:

You're GP, NHS 111, or Gardner Ward.

Sources of Information

More information can be found in the following Breast Cancer Care booklets which you may have been given before your admission:

'Your operation and recovery'

'Exercises after breast cancer surgery'

'Reducing the risk of lymphoedema'

Breast Cancer Care:

Free phone helpline: 0808 800 60 00

Macmillan Cancer Support:

Free phone helpline: 0808 808 00 00

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand Hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other Formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department:

Telephone: 0300 131 4500 - Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

Miss Elizabeth Shah Consultant Breast Surgeon
Mr Ash Subramanian Consultant Breast Surgeon
Miss Lis Grimsey Macmillan Consultant Nurse Breast
Mrs Juliette Twyman and Mrs Louise Hunter : Macmillan Breast Care Nurse Specialists.

The Clinical group that have agreed this patient information leaflet: Surgery. Specialty: Breast

Next review date: May 2021
Responsible clinician/author: Connie Bowyer (Enhanced Recovery Specialist Nurse)

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk