

Patient Information Leaflet: Percutaneous Transhepatic Cholangiogram (PTC) and/ or Drainage

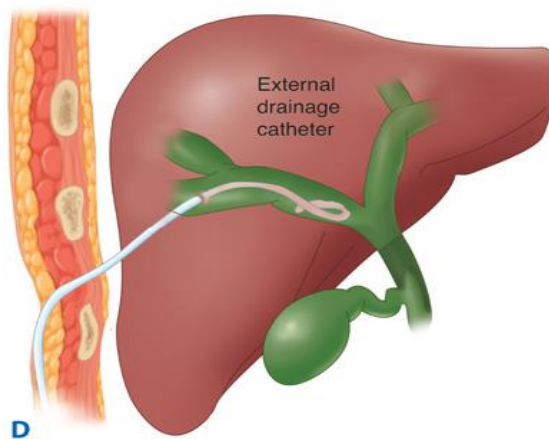
Radiology department

Introduction

We hope this guide will answer your questions about your percutaneous transhepatic cholangiogram (PTC) and drainage. Please contact the team if you require further information via the details at the end of this leaflet.

What is a percutaneous transhepatic cholangiogram (PTC) and /or drainage?

A percutaneous transhepatic cholangiogram (PTC) and drainage is a procedure where a doctor uses imaging guidance to insert a needle and small plastic tube through the skin and into the liver to access the bile ducts. This allows them to see the bile ducts using contrast medium (x-ray dye), and if necessary place a drainage tube to relieve a blockage and drain bile from the liver if there is an obstruction.



Why do I need a percutaneous transhepatic cholangiogram (PTC) and /or drainage?

Your doctor should have explained the reason why you need this test.

It will help your doctor to decide on the cause of your symptoms giving clearer information to the specialists treating you.

Biliary drainages are typically performed because you have become jaundiced (yellow) and extremely itchy. This is because the bile cannot flow normally into the gut and the condition makes you susceptible to infection.

The most common reasons for this are gallstones and pancreatic masses, although there are other causes.

Other imaging that you probably have had performed, such as an ultrasound scan or a computed tomography (CT) scan, will have shown that there is a blockage or leak within the bile ducts.

This procedure is often done after percutaneous biliary drainage to allow the external drain and bag to be removed.

Are there any risks?

X-ray radiation: All x-ray procedures involve exposure to radiation in varying amounts. The dose you get from a medical x-ray is very low and your doctor has determined that the benefits of having the examination outweigh potential risks.

The radiographer is present throughout your test making sure that the dose is kept as low as reasonably possible and the duration and level of x-rays are kept to a minimum.

Procedure: PTC and drainage is a safe procedure, but as with any medical procedure there are some risks and complications that can arise. If the bile is infected, although you may be on antibiotics, there is a small risk that infection might be released into your bloodstream, making you unwell for a period.

There is a risk of bleeding, though this is generally very slight. If the bleeding were to continue, then it is possible that you might need a blood transfusion. Very rarely, an operation or another radiological procedure is required to stop the bleeding.

Contrast medium: A very small number of patients have an allergic reaction to the contrast medium (x-ray dye). This can be minor, severe, or even life threatening but the chances of this occurring are very rare. If you get an itchy rash or difficulty breathing during the procedure tell a member of staff, the team will provide appropriate treatment.

Before your examination begins, the radiographer will ask you a series of questions about your medical history, including any allergies you may have. This will help us assess if you are at risk of an allergic reaction to the x-ray dye.

Blood Clotting: If your blood clotting is abnormal, you may be given special blood transfusions to try and correct this. If you have any concerns about having blood transfusions, you should discuss these with your doctor.

Preparing for your procedure

Please do not have anything to eat for 4 hours prior to your procedure. You may still drink clear fluids such as water.

The procedure is performed using local anesthetic and often sedation.

A PTC and drainage are usually carried out as a day case procedure under local anesthetic, however you will be asked to bring an overnight bag because you may be admitted for observation.

If you have a stoma (opening onto the surface of the abdomen), please bring a spare stoma bag with you just in case it is needed after the examination.

Please contact the booking team before your appointment if:

- you are or think you may be pregnant
- If you have had a previous allergic reaction to x-ray dye (contrast agent) or are allergic to iodine.
- If you weigh over 30 stone/190 kilograms
- If you have problems standing or need a hoist to transfer
- If you require an interpreter – please inform us as soon as you receive your appointment letter, and we will arrange an interpreter for you.

Please leave any jewellery or valuables at home.

If you are unsure or have questions about your preparation contact your doctor or the X-ray department for advice.

Will I need an injection?

Occasionally, patients are given a small injection of hyoscine butylbromide (Buscopan) in the arm to help relax the muscles of the stomach. After this injection, you may experience some dryness of your mouth and blurred vision. This will disappear after a few minutes and cause no ill effect.

Allergies

If you have asthma or any allergies, especially to iodine or X-ray contrast (CT or coronary angiogram dye), please inform us in advance.

Medication

If you are taking any blood thinning medication (Anti coagulation medication) you will be advised to stop for a certain period before the procedure. If you are taking warfarin you will be given a short course of alternative medicine.

Getting to us

When attending The Princess Alexandra Hospital (Hamstel Road, Harlow, Essex, CM20 1QX), follow the signage to the radiology reception, which is located on the ground floor, green zone. Please let the receptionists know that you have arrived for your appointment.

When should I arrive?

Please arrive in the radiology department at your given appointment time. A notification through text or letter should have been sent to you to confirm this appointment.

Can someone stay with me in the hospital?

You may have a friend or relative attend with you, but they will be asked to stay in the waiting area while you have your procedure.

Children are not allowed in the waiting area unattended. Our staff are not permitted to supervise children, so please ensure child care arrangements are in place to avoid your tests being rescheduled.

The day of the procedure

You will be shown to a cubicle and asked to undress and put on a gown; please bring a dressing gown if you have one. You may also be asked to remove jewellery, dentures, glasses, or other metal objects, which may show up on the X-rays.

The procedure

Your identification will be checked by a radiographer or nurse, and a brief history will be taken; please tell the radiologist what medication, severe allergies, choking episodes, or other medical conditions you may have, such as thyroid disease and diabetes. The procedure will be explained to you by the radiologist who will get you to sign the electronic consent form.

You will lie on the X-ray table, generally flat on your back.

A small cannula (thin tube) will be placed into a vein in your arm. You may receive a sedative to relieve anxiety, as well as an antibiotic.

You may have monitoring devices attached to your chest and finger and may be given oxygen.

The skin at the side of your abdomen will be swabbed clean and covered with sterile towels. Local anesthetic will be injected into the skin to numb the area. Once the skin is numb, a small needle is inserted into the bile ducts. A small amount of dye (contrast agent) is injected to allow images to be taken of the ducts.

Once the interventional radiologist has enough information, a drain will be left in place and connected to an external drainage bag.

Is it uncomfortable?

This procedure is not painful, but it can be uncomfortable and unpleasant.

After the procedure

Nursing staff will carry out routine observations including pulse and blood pressure and will also check the treatment site. You will generally stay in bed for a few hours, until you have recovered, this may include an overnight stay.

Once the bile has been drained into the bag, your jaundice (yellow color) and itching will improve and you will feel much better.

Can I drive after my procedure?

No, it is important that you have a responsible adult to escort you home. You must not drive or use public transport for the journey home.

How soon can I return to work?

This will be advised by your attending physician.

When will I get my results?

You will not know the results of your examination immediately. The radiologist will report their findings to the clinician who arranged your procedure, who will discuss the results with you. It usually takes a couple of weeks for the results to become available.

Contacting the team

If you have any further questions about your procedure or an existing appointment, please contact the radiology nurses department (**Monday to Friday, 8am to 6pm**) at **01279 962527 / 3405**.

If you have any queries **outside of working hours (after 4pm and on weekends)**, you will be redirected to the main radiology reception.

Please note appointment bookings cannot be made during this time.

Your feedback matters

If you would like to give feedback on your care, please contact our patient experience team at paht.pals@nhs.net or **01279 827211**.

Please contact the communications team at paht.communications@nhs.net if you would like this leaflet in another language or format.