University Hospitals Dorset
NHS Foundation Trust

Thoracoscopy

Respiratory Medicine Patient Information

This leaflet is for people who are going to have a **thoracoscopy**.

A thoracoscopy helps your doctor find out why fluid has built up around your lung. It can also be used to treat the fluid.

What is a thoracoscopy?

A thoracoscopy is a test that lets a doctor look inside the space between your lung and your chest wall.

The doctor uses a **thoracoscope**. This is a thin tube with a small camera and light on the end. The procedure is carried out by a specialist doctor.

During the test, the doctor may take small pieces of tissue. These are called **biopsies**. The samples are sent to a laboratory to help find the cause of your illness and decide on the best treatment.

The doctor may also treat the problem during the same procedure. This may include:

- **medical talc**: Medical talc can help stop fluid from coming back. A special sterile talc powder is put into the space around your lung. The talc helps the lining of your lung stick to the inside of your chest wall. This closes the space where fluid or air can collect.
- **indwelling pleural catheter (IPC)**: An IPC is a small, soft tube. It is like a chest drain but is made to stay in place for weeks or months. It lets you drain fluid at home if you need to. This may mean fewer visits to hospital

You will be given:

- pain relief before, during, and after the procedure
- a sedative to help you relax and feel sleepy.
- a local anaesthetic to numb the area.

Why do I need a thoracoscopy?

Your doctor thinks this is the best test to learn more about your condition or to help treat your symptoms.

It is your choice whether to have the procedure.

The results can help your doctor:

- pain relief before, during, and after the procedure
- find out why there is fluid around your lung.
- choose the best treatment for you.
- decide if you need more tests.

What are the benefits?

A thoracoscopy can:

- help find the cause of your illness.
- remove fluid from around your lung.
- treat the fluid so it is less likely to come back.

What are the risks?

Thoracoscopy is a very safe procedure. Serious problems are rare.

Like all medical procedures, thoracoscopy has some risks. The risk of dying from a thoracoscopy is very low. It happens in less than **1 in 1,000 people (very rare)**.

The doctor will make a small cut in your chest to do the procedure.

Possible risks include:

- **Pain**
  - The local anaesthetic may sting for a few seconds.
  - The chest drain may feel uncomfortable.
  - You will be given pain relief if you need it.

If medical talc is used, your chest may hurt for the first 24 hours. Painkillers usually help.

Your chest may feel sore for about a week after you go home. Some people notice short, sharp pains around the scar for several months. This is common. It does not mean there is a problem.

- **Infection**

About 1 in every 100 people (1%, uncommon) gets an infection where the chest drain was put in.

Most infections can be treated with antibiotics. Sometimes this means staying in hospital for longer. Very rarely, another operation is needed.

- **bleeding**

About 1 to 2 people in every 1,000 (0.1% to 0.2%, very rare) have heavy bleeding. This is very rare.

This is usually treated during the procedure. Very rarely, an operation may be needed.

Your doctor will discuss these risks with you before the procedure.

What happens if I do not have a thoracoscopy?

Your doctor believes this is the best test to find out what is causing your symptoms.

If you decide not to have it, it may be harder to find the cause of your illness or choose the best treatment.

Is there another test I can have instead of a thoracoscopy?

Yes. Another option is to take a biopsy using a needle through a small cut in the chest.

This test is only about half as good at finding the cause of fluid or air around the lung. It is about as painful as a thoracoscopy.

It also cannot be used to put in medical talc to help stop fluid or air from coming back.

What happens next?

You will receive an appointment letter.

Please contact the Endoscopy Department to confirm the date and time of your appointment.

What about my medication?

Take your usual medicines unless your doctor tells you not to.

Please tell the Endoscopy Department if you:

- have diabetes.
- take warfarin or any other clot preventing medicine.

You may need special instructions before your procedure.
Please bring all your medicines with you, including any inhalers.

What preparation is needed?

Before the procedure:

- do not eat for six hours before your appointment.
- do not drink for four hours before your appointment.

What happens when I arrive?

A nurse will ask you some questions about your health. This is a good time to ask any questions.

A doctor will explain the procedure and ask you to sign a consent form. This shows that you agree to have the procedure and the sedation.

You will change into a hospital gown.

A doctor or nurse will put a small plastic tube, called a cannula, into a vein in your hand. This is used to give you medicines if needed.

You will also have an ultrasound scan of your chest.

You will then go to the procedure room.

The thoracoscopy usually takes about one hour. You should expect to be in the department for longer because of preparation and recovery.

What happens during the thoracoscopy?

You will lie on your side.

A nurse will stay with you during the whole procedure.

The sedative is given through the cannula. You will feel relaxed and sleepy. You will not be fully asleep. Most people remember very little afterwards.

Tell the doctor or nurse if you feel uncomfortable at any time.

The doctor will make a small cut in the side of your chest and gently place the camera inside. They will:

- look inside your chest.
- take tissue samples (biopsies).
- drain fluid from around your lung.

At the end of the procedure, a chest drain is put in. A chest drain is a soft plastic tube placed between your ribs, into the space around your lung. It removes air or fluid so your lung can expand properly. The drain usually stays in overnight. It is removed the next morning.

As University Hospitals Dorset is a teaching hospital, student doctors or nurses may be present. If you would prefer this not to happen, please tell a member of staff before the procedure.

After the thoracoscopy, you will go to a ward and stay in hospital overnight.

What should I bring to the hospital?

Please bring:

- all your medicines.
- nightwear, dressing gown and slippers.
- comfortable clothes for daytime.
- toiletries.
- a book, magazine or other entertainment.
- a small amount of money for snacks, drinks or newspapers.

If you can, leave valuables at home.

What happens after the thoracoscopy

After the procedure, you will go to the recovery area. Nurses will check you regularly.

The chest drain will stay in overnight.

The next day you will have a chest x-ray. The drain is usually removed after this.

You will stay in hospital overnight. You can usually eat and drink again when you return to the ward.

Before you go home, a doctor will explain:

- what happened during the procedure.
- whether you need any medicines.
- whether you need more tests.
- any follow-up appointments.

After you have gone home, contact your respiratory team or seek urgent medical advice if you have:

- more breathlessness or trouble breathing.
- new or worsening chest pain.
- a high temperature, shivering or feeling unwell.
- redness, swelling, leaking or increasing pain around the drain site.
- coughing up blood.
- any symptoms that worry you.

Call **999** or go to your nearest Emergency Department if you have severe breathing problems, severe chest pain, or feel very unwell.

When will I get the results?

Your results will not be ready straight away.

The tissue samples take several weeks to be tested.

You will usually have an appointment at the Chest Clinic about two weeks after your procedure. Your doctor will explain your results and discuss the next steps with you.

Contact information:

Endoscopy Department: Telephone: **0300 0192772** or **0300 0194667**

For help and guidance out of Endoscopy hours (24 hours): Telephone: **111**

If you have any queries or need further information, please contact the Endoscopy Department between 8am-5pm.

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