-cannot pass urine after this catheter is taken out let the nurses know.

Sleeping

You will be offered painkillers rather than sleeping pills to help you to sleep. If you cannot sleep despite the painkillers please let the nurses know.

Physiotherapy

The physiotherapist will check that you are clearing your lungs of phlegm by coughing and that you are helping your circulation by continuous movement of body and limbs.

The wound and stitches

A little dark red blood, changing to a yellow liquid after a day or two, may ooze around the drain tube.

Once the x-ray tests on the drain tube are alright, the tube is taken out inch by inch over several days. This does not hurt. The wound then heals up in 5 or 6 days. If there is more discharge for a time, a collecting bag can be stuck onto the skin over the wound.
Sometimes the tube needs to stay in place for a week or two, while the abscess space inside your body closes down.

Washing

You can wash round the tube. Once the tube is out you can wash or bathe normally. Ordinary soap and water are all you need. Salt water is not needed.

How long in hospital?

An abscess like this means that you have been quite ill and will take time to get better. It is sensible to plan to be in hospital for at least two weeks after the abscess is drained. Sometimes a longer stay is needed. Your surgeon will give you the details.

Once you are ready to leave hospital you will be given an appointment to see the surgeon for a check up.

Aches and twinges may be felt in the wound for up to 6 months.

General Advice

These abscesses can be troublesome. You will need patience before you are back to your normal health. If you have any problems or queries, please ask the nurses or doctors.

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LARGE INTRA-ABDOMINAL ABSCESS

What is the problem?

You have an abscess which has formed deep inside your tummy (abdomen). This is something brought on by infection after, for example, appendicitis, a burst ulcer, an operation or various other causes. The abscess is a pool liquid pus. It makes you feel ill and feverish. If left it can get worse and cause serious problems. Commonly these abscesses only show up two or more weeks after the infection. Also, they often need to be left even longer than this before they are 'ripe' enough to be opened up and drained safely. The abscess can form high up under the ribs, or deep down in the pelvis, or anywhere in between. Sometimes there are more than one.

What does the operation consist of?

A cut is made in the skin of the tummy as near as possible to the abscess. The cut is deepened until we hit the abscess. The pus then drains out to the skin. We put a drainage tube down into the abscess space to drain out any further pus. This tube stays place until it is clear from x-ray tests that the abscess space is getting smaller. We can then shorten the tube, bit by bit. Finally the wound dries up and heals over.

WHAT HAPPENS BEFORE THE OPERATION?

You may well be in hospital already, so some of the notes below are only for new comers.

Reception

When registering at reception your medical aid details will be required. If you are not on a member of a medical aid you will be required to pay a deposit or to sign an indemnity form. As far as possible we will try to advise you about hospital costs before your admission.

Welcome to the ward

You will be welcomed to the ward by the nurses or the receptionist and will have your details checked. Some basic tests will be done such as pulse, temperature, blood pressure and urine examination. You will be asked to hand in any medicines or drugs you may be taking, so that your drug treatment in hospital will be correct. Please tell the nurses of any allergies to drugs or

dressings. The surgeon will have explained the operation and you will be asked to sign your consent for the operation. If you are not clear about any part of the operation, then read this again and then ask for more details from the surgeon or from the nurses.

Visit by the anaesthetist.

The anaesthetist who will be giving your anaesthetic will interview and examine you. He will be especially interested in chest troubles, dental treatment and any previous anaesthetics you have had.

Diet.

You will have your usual diet until 6 hours before the operation when you will be asked to take nothing by mouth. This will let your stomach empty to prevent vomiting during the operation.

Timing of the operation.

The timing of your operation is pre-arranged so that the nurses will tell you when to expect to go to the operating theatre. Do not be surprised, however, if there are changes to the exact timing.

Transfer to theatre.

You will be taken on a trolley to the operating suite by the staff. You will be wearing a cotton gown, wedding rings will be fastened with tape and removable dentures will be left on the ward. There will be several checks on your details on the way to the operating theatre where your anaesthetic will begin.

The operation is then performed.

WHAT HAPPENS AFTER THE OPERATION.

Coming round after the anaesthetic.

Although you will be conscious a minute or two after the operation ends, you are unlikely to remember anything until you are back in your bed on the ward. Some patients feel a bit sick for up to 24 hours after operation, but this passes off. You will be given some treatment for sickness if necessary.You may be given oxygen from a face mask for a few hours if you have had chest problems in the past. You will be given salt solutions or blood down a plastic tube into an arm vein until you are drinking normally. You may have a fine plastic tube down the back of your nose to drain your stomach for a day or two. Occasionally a tube (catheter) is put into your bladder to drain urine until you are more mobile.

Will it hurt?

The wound is a little painful. You will be given tablets or injections to control this. Sometimes, the drainage tube tugs painfully on the skin after three or four days. Ask for more painkillers as needed.

You will be expected to get out of bed the day after operation despite the discomfort. You will not do the wound any harm, and the exercise is very helpful for you. You should be able to walk (with the tube and bags) about 25 yards further each day than the day before.

Drinking and eating

The operation causes the bowel to stop working for a day or two. Until the bowel starts up again, you will be given water, salts, and sugar solutions into your arm vein. The tube in your nose will be used to draw off any build-up of stomach juices. The first signs of the bowel starting up again are noises in your tummy and passing wind out of your back passage. Once these have happened you will be able to start drinking - a little at a time. When you are able to drink freely, the arm drip tube is removed. You should be eating normally after 4 or 5 days.

After you leave hospital

You are likely to feel very tired and need rests 2 or 3 times a day for a month or more. You will gradually feel stronger. It may be 2 or 3 months before you are back to your normal strength.

Walking

You can build up your walking by an extra 50 yards each day.

Lifting

At first discomfort in the wound will prevent you from harming yourself by too heavy lifting. After two months, you can lift whatever you like. There is no value in trying to speed the recovery of the wound by special exercises before the months are out.

Driving

You can drive as soon as you can make an emergency stop without discomfort in the wound, ie about 3 weeks.

Work

You should be able to go back to a light job after about 2 months. A heavy job may take 3 months or more.

Complications

This type of abscess can be quite a problem to fix. Sometimes, more than one operation is needed to get rid of all the pus. Sometimes, there are more than one abscess to deal with, we will talk to you about this.

Sometimes, the cause of the abscess still needs to be treated once the abscess has been dealt with. We will go into this further with you.

Passing urine

Because of the drainage tube (catheter) in the bladder, passing urine is not a problem. Sometimes there is a feeling that there is a leakage all the time, but this is just an irritation by the tubing and it

passes off. Once you can walk about in reasonable comfort, the catheter is taken out. If you