Dynamic Sentinel Node Biopsy in Penile Cancer

Information for patients
This leaflet aims to give you information about having a dynamic sentinel lymph node biopsy.

*We will explain about:*

- The removal of lymph nodes from your groin,
- what the nodes are,
- why you need to have them removed as part of your ongoing treatment,
- what to expect, and
- the aftercare that you will need.

If you read any words or phrases that you do not understand, please ask your doctor or a member of your healthcare team what it means. It does not matter how many times you ask.

If you have any special needs (physical, religious, cultural, emotional or medical), please inform a member of staff so every effort can be made to meet your individual needs.

**What is a sentinel node?**

Lymph nodes drain fluid from specific body parts to help remove waste and toxins. The penis drains these toxins to the glands in both groins, this is a way by which penile cancer might spread. There are around 10-15 lymph nodes in each groin. The sentinel...
node is the first node in the groin that cancer could spread to in penile cancer patients. To locate this node, specialist scanning equipment is used. This uses with a small and safe dose of radioactive material, so that the surgeon may remove this node and have it tested for cancer.

How can a dynamic sentinel lymph node biopsy help?
The sentinel lymph node removes a single lymph node from each groin. It is then examined in the laboratory. If there is no cancer present then you will not need any further treatment. If cancer is present then you will need further surgery to remove all the lymph nodes in that groin.

**The standard surgery to remove all the lymph nodes from the groin can cause complications such as:**
- Wound infection,
- Leg swelling (Lymphoedema) and
- Reduced movement whilst the wound heals.

Dynamic sentinel lymph node biopsy is an improved method of detecting whether the nodes in the groin are involved with the tumour. It can mean less groin surgery is needed and less potential complications. This biopsy uses a small dose of radioactive material injected into the penis. The material will travel down to the lymph nodes and pictures are taken to locate the sentinel node. If the result of these biopsies is negative then you will avoid having to have more surgery to remove the lymph nodes.
What are the risks of having this type of biopsy?

All procedures and treatments have risks and we will talk to you about the risks involved in this biopsy.

When you are admitted to the hospital, you will have your scan in the Nuclear Medicine department. There is a possibility of discomfort at the time of the initial injection for this scan, although local anaesthetic can be used to reduce this discomfort. As you are having these injections you will be observed closely for any reaction. In our experience the risk of the injection causing an allergic reaction or later long term problems is extremely low and is no more risk than having a normal chest X-ray.

You will then go to theatre to have the biopsy itself. You will need a general anaesthetic and there will be a small incision (cut) in each groin to remove the lymph node.

During surgery, whilst you are asleep, you will have an injection of blue dye. This blue dye may make the colour of your urine blue-green and could also make your skin turn a slight grey colour. These side-effects are temporary.

Pain

You may experience some discomfort following your operation. We will give you pain killers to take home with you and we would advise you to take them as they have been prescribed for you. Please do not exceed the stated dose on the pack. Generally, the discomfort in the groins will take a few weeks to go away, but if it does not and you are worried please see your GP or the team here at St James’s.
Bleeding
You should not experience any major bleeding. It is perfectly normal to have a slight ooze or blood on your dressing. If you have any heavier bleeding, use a clean piece of gauze and apply firm pressure to the area for approximately ten minutes. If this does not stop, please seek medical advice. Please keep your wound as clean and as dry as possible.

Swelling/bruising
You may experience slight swelling and bruising after surgery. Occasionally, the swelling may be quite noticeable as you may have a build-up of lymph fluid under the skin. This will usually settle of its own accord, but if it becomes hot and red to touch or you have a smelly discharge, this could mean you have an infection. If this happens please seek medical advice.

Need for further surgery
The procedure aims at diagnosing whether cancer is present in the main node. If cancer is present, the team will suggest removing further nodes in that groin to make sure that there are no further cancer cells remaining.

What will happen if I choose not to have this type of biopsy?
The alternative to a sentinel node biopsy is to have a scan. However scans such as CT, MRI and ultrasound are not accurate enough in excluding cancer spread to your groins. The only way to be sure is to have surgery on these nodes. Sentinel node surgery is the least invasive of the different types of surgery and we would usually recommend this as the best approach.
What alternatives are available?

If you have a lower grade cancer, examining your groins on a regular basis may be enough, however, if your cancer is of a higher grade we may need to perform a more extensive lymph node sampling.

Your case will have been discussed at our multidisciplinary meeting (a meeting involving specialist doctors, oncologists, radiologists and a histopathologist) where the safest and most appropriate management for your care will have been agreed.

Asking for consent

For all procedures which directly involve you as the patient, by law we must ask for your consent to these procedures. You will need to sign a consent form and this confirms that you agree to proceeding with procedure identified and that you understand what this involves. The risks, benefits and alternatives will be discussed with you before you are asked to sign. At any time, if you are not sure of any details about your procedure, please do not hesitate to ask a member of your team.

How should I prepare for dynamic sentinel node biopsy?

There are two slots for the dynamic sentinel node imaging, Thursday afternoon and Friday morning. If you are given a date for the Thursday afternoon session, you will not need to starve that day. You will spend an overnight stay in the hospital and your actual operation will be on the Friday morning, you will need to starve from midnight. If your
imaging has been set for the Friday morning, you will be having your actual operation in the afternoon, and you will need to starve from midnight and drink water only up until 10am.

What happens during a dynamic sentinel node biopsy?

When you arrive at the nuclear medicine department, a small amount of local anaesthetic will be applied to your penis. Four injections of a small dose of radioactive material are injected into four areas at the tip of the penis. You will then have a number of images taken of where the material tracks to in your groin. Once the sentinel node has been identified, a mark on your skin will identify where the sentinel node actually is. You will then have an operation to remove the nodes from both groins.

What should I expect after the procedure?

If you live nearby you may be able to be discharged on the same day as your surgery. If you live further away, you will stay in the hospital for one night.

You will be asked to attend the hospital for a routine appointment approximately 2-3 weeks later for a wound check and to discuss the results of the biopsy.

Please keep your wound clean and dry as possible. You will be sent home from hospital with a dressing covering the site of the wound. You will be able to shower, however we do advise you not to soak in a bath until your review in clinic. Please avoid soap directly on to the wound and make sure that you
pat your wound dry following your shower. Any stitches you have are usually dissolvable.

You may notice some swelling and bruising at the wound site of the first few weeks. This is normal, however if you experience increased pain, redness, a discharge from the wound or you feel unwell, please contact your nurse key worker on the number at the back of this leaflet. For out of hours emergencies, please attend your local or nearest Accident and Emergency Department.

It is advisable to wear loose fitting clothing for the first four weeks. Avoid belts and tight trousers as this could increase the swelling you experience.

Contact numbers:
Victoria Washington - Urology Nurse Specialist:
Tel: 07585 961 253 / 0113 206 6792 Monday to Friday 8am-4pm

Mr. Eardley/ Mr Kayes/ Mr Elmamoun Secretary:
Tel: 0113 206 6994 – Monday to Friday 9am - 5pm
Leeds Cancer Support

Leeds Cancer Support complements care provided by your clinical team. We offer access to information and a wide range of support, in a welcoming environment for you, your family and friends. We can be found in the information lounges in Bexley Wing and also in the Sir Robert Ogden Macmillan Centre.

Leeds Cancer Support Information Centre
Level 1 Outpatients Department
Tel: (0113) 206 8816 Open from 10am - 4pm.

Information Lounge
Level -2 Radiotherapy Department
Tel: (0113) 206 7603 Open from 8.30am - 6.00pm

All the above services can be emailed on: leedsth-tr.Cancersupport@nhs.net

The Sir Robert Ogden Macmillan Centre

The Centre is on the St James’s Hospital site and offers a variety of support services including counselling, support groups and complementary therapies. These therapies include Reiki, relaxation and visualisation, hand and foot massage and many others.
You can just drop in for a coffee and a chat anytime. Open from 10am - 4pm Monday to Friday.

The Sir Robert Ogden Macmillan Centre
Tel: (0113 206 6498)

Health Talk support service
Health talk is an online service where you can find information and support by seeing and hearing patients real life experiences.

In co-ordination with researchers from the Centre for Men’s Health at Leeds Metropolitan University spoke to 27 men in their own homes. You can explore what these people felt about issues such as symptoms, treatment, body image and sex. We hope you find the information helpful and reassuring.

http://www.healthtalk.org/peoples-experiences/cancer/penile-cancer/topics

Where can I find more Information?

Macmillan Cancer Support
Freephone: 0808 808 1021  Website: www.macmillan.org.uk

Orchid Male Cancer Support
Website: www.orchid-cancer.org.uk

References:
Orchid male cancer support 2017. Partial Penectomy
Orchid male cancer support 2017. Total Penectomy
The Christie Patient Information Service May 2015
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