Going home after kidney surgery
Radical nephrectomy or partial nephrectomy (total or partial removal of a kidney)
Information for patients
This leaflet is designed for the use of patients being discharged from hospital following removal of a kidney using ‘keyhole’ or laparoscopic surgery.

The aim is to provide general guidance on what you, the patient, should expect to happen once home from hospital and during the recovery period. It will also contain useful contact numbers should there be any cause for concern. There is also a website which you can access that you may find useful www.baus.org.uk

By the time of discharge from hospital, you should:

• Be given advice about your recovery at home.
• Know when to resume normal activities such as work, exercise, driving, and housework.
• Have contact numbers if you have any concerns once you get home.
• Know when your follow up will be and who will do this.

Care of wounds

For those who have had laparoscopic or ‘keyhole’ surgery, you will have four small incisions on your abdomen, one slightly larger than the rest, with small dressings covering them. There is a small possibility you may
return from surgery with a drainage tube in position, which is usually removed the following day when it is no longer draining. The operation scars on the outside of your body will shrink and fade over time, it only takes a couple of weeks before the wound is healed but it often takes longer to feel fully recovered from surgery.

For those who have had open surgery you will have one larger incision to your side (loin). Your wound can take up to two weeks to heal properly and it could be up to 2-3 months before you fully recover from open surgery.

You can shower or bathe as normal but don’t scrub or pick at your wound. Avoid soapy products for a week or two, so as not to irritate healing skin, and avoid long soaks in the bath so as not to get your wounds too soggy.

It is common to have twinges of discomfort to your wounds; this may persist for several months. This is often part of the healing process but contact your GP or Specialist Nurse if you are concerned.

**Bowel / bladder function**

You may notice that your bowels are not working as normal. This is a result of your surgery and the effects of the anaesthetic and painkillers. It is important that you should ask for a gentle laxative before you leave hospital should this be a problem. If you have not moved your bowels when you get home you can obtain gentle laxatives such as Movicol from your chemist. If you are in any way unsure, please telephone your Specialist Nurse, your GP, or the ward you have been discharged from.
Try not to strain. Drinking plenty of fluids plus a good daily intake of fresh fruit and vegetables helps to prevent constipation. Gentle activity also helps with trapped wind.

You should be passing urine as normal, if you experience any problems, telephone your GP or contact your Specialist Nurse.

**Diet**

Your appetite may not be the same when you first come out of hospital. It is important not to force yourself to eat. A little bit of what you fancy is best! Your appetite will gradually return to normal. You do not need any special diet but it is important to keep taking regular drinks during your recovery period.

Alcohol in moderation is generally allowed unless you have been advised otherwise because of specific medicines you are taking.

**Pain relief medication**

You will probably have been given some painkillers to take home with you. You only need to take these if you feel it is necessary. Paracetamol is often sufficient, and taken regularly should be the first pain killer you try before anything stronger you may have been given. If you do experience pain that does not go away following pain relieving medicine, you should again contact your GP, your specialist nurse or the ward.

It is normal to experience mild aches and pains around the area where you had your operation as already mentioned. There may even be areas that feel quite numb. This is normal and because of the operation.

You can take your normal medications following your operation.
Activity

It can take anything from 4-6 weeks to get back to full fitness after keyhole surgery. Those who have an open procedure will need to take recovery at a slower pace and will find it may be a few months until you are back to your normal fitness.

You will benefit from short walks each day but you should take care not to do too much and make sure you take plenty of rest in between.

You should avoid long walks, excessive stair climbing, running, gardening, strenuous exercise, cycling, and lifting heavy objects, for approximately six weeks. Patients who have had open surgery may not resume all normal strenuous activities for 2-3 months.

You will require approximately seven days of tinzaparin injections, to help prevent blood clots (DVT), this may vary. The ward nurses will teach you or a member of family how to safely administer this before discharge. If you have difficulty, a District Nurse referral can be made to assist you.

It is your responsibility to ensure you are fit to drive. You do not normally need to notify the DVLA unless you have a medical condition that will last longer than three months after your surgery and may affect your ability to drive.

You should, however, be able to safely perform an emergency stop and check with your insurance company before returning to driving.

You may return to work when you feel able. It depends on the amount of physical effort your job entails. It may be between 4-6 weeks before you are ready to return following keyhole surgery. We advise following open surgery that your employer
expects you to need three months recovery but then you can return to work earlier if you feel ready. Your GP will provide you with a sick note.

You will be discharged from hospital the next day if you have had keyhole surgery with no complications. Open surgery requires a longer stay in hospital up to 3-5 days.

It is important that you have support from family and friends, particularly for the first week after discharge, to help with tasks at home.

It is normal to feel tired when you leave hospital and for several weeks afterwards. You may also feel quite emotional in the days and weeks following your surgery, this is also quite normal and you should discuss any concerns you have with your Specialist Nurse, or your GP.

Some patients who have their kidney removed, do so to treat a cancer. This can understandably have an emotional impact.

**As well as speaking with your specialist nurse, you can also contact charity help lines such as:**

**Kidney Cancer UK** on 024 7647 4993 or **Macmillan Cancer Services** on 0808 800 1234.

You can also make contact with someone from the Sir Robert Ogden Centre at St James’s University Hospital to support you during this time (see back page). It is important that you do not bottle-up your feelings.
What else should I look for?

*If you develop any of the following, it is important that you contact your GP, the ward or your specialist nurse and discuss the concern as it may be a sign of a possible complication after your operation:*

- Worsening and persistent pain in your tummy including increased swelling and tenderness
- Temperature and fever
- Persistent nausea (feeling sick), poor appetite
- Being unable to walk
- Not passing urine or motions
- Excessive leakage of blood / bile stained fluid from wounds
- Difficulty in breathing

These signs are unusual but it is important to be aware of possible complications. Although very rare they can occur in the period immediately following discharge home.

If symptoms become severe, then you should attend A&E or call an ambulance.

**Follow up**

You will receive a telephone call from the CNS team approximately seven days after surgery to check on the progress of your recovery.

You will have a clinic appointment to see the Consultant 4-6 weeks after discharge. This will be to assess your progress, discuss the pathology results from your surgery and to plan follow up care for the future.
Useful contact numbers

**Urology Oncology Specialist Nurses:** 0113 206 7692
Michelle Donachie and Anneliese Peach (Monday-Friday 8am-4pm)
**Ward 42 (24hrs)** 0113 206 9142  **Ward 43 (24hrs)** 0113 206 9143

Your GP: ........................................................................................................

District Nurse: ......................................................................................................

Consultant secretary (Monday - Friday 8am-4pm)

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<th>Mr Cartledge 0113 206 4949</th>
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<td>Mr Kimuli 0113 206 6993</td>
<td>Mr Jain 0113 206 5815</td>
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**Leeds Cancer Support**

Leeds Cancer Support is here to help you and your family. We aim to offer high quality information, advice and support, to patients, families and friends.

| Level -2 Information Lounge | Tel: 0113 206 7603  
Radiotherapy Department (8am-6pm) | Monday - Friday |
|-----------------------------|-------------------|
| Level 1 Information Centre | Tel: 0113 206 8816  
Outpatients Unit (10am-4pm) | Monday - Friday |
| The Sir Robert Ogden Macmillan Centre | Tel: 0113 206 6499  
(10am-4pm) | Monday - Friday |

They can all be emailed on: leedsth-tr.cancersupport@nhs.net