Laparoscopic Nephrectomy

Exceptional healthcare, personally delivered
You have been advised that you need a nephrectomy (removal of the kidney). The aim of this leaflet is to give you information regarding one method (laparoscopic or ‘keyhole’ method) of removing the kidney.

**What is a nephrectomy?**

A nephrectomy is an operation to remove a kidney. It is sometimes necessary to remove the surrounding tissue as well. This is known as a radical nephrectomy. The adrenal gland is sometimes also removed.

**What is a laparoscopic nephrectomy?**

Laparoscopic nephrectomy uses the ‘keyhole’ method of surgery to remove the kidney. Three or four small (1 cm) puncture wounds are made in the abdomen.

The surgeon then inserts a slim tube with a tiny camera on the end so that the operation can be seen on a television monitor.

A larger incision (6 cm) is made in the lower abdomen to bring out the kidney.

**Why is a nephrectomy performed?**

It may be performed to treat cancer of the kidney. It can also be done to remove a kidney that is no longer working due to chronic infection or obstruction.

**What does the kidney do?**

The two kidneys filter the blood. They take out waste products and balance fluids, producing urine as a result. They also help to keep blood pressure within normal limits.

**Can you live with only one kidney?**

Yes. It is important that you look after the remaining kidney by keeping your blood pressure under control, by drinking plenty of fluid (about two litres per day). You may want to avoid activities that could injure your remaining kidney (such as rugby or martial arts) and look out for signs of infection (cloudy smelly urine and fever).
About your operation

Before the operation

Before your admission for surgery you will be invited to the hospital for a pre-operative assessment. This is to sort out any health problems that might otherwise delay your surgery. This should take half a day. You will see a doctor and a nurse.

Please bring along any medication that you take on a regular or ad hoc basis.

Most patients are admitted to the hospital on the day of surgery. You will stay in the hospital about two to three days after your surgery but each patient varies so you will go home when recovering well.

You will be seen by a doctor on the morning of surgery. They will discuss the operation and answer any questions that you might have. An anaesthetist will discuss the anaesthetic and type of pain relief you will have. You may be prescribed a tablet to help you relax before your surgery. This is known as a premed.

Before you go to theatre you will be asked to put on a theatre gown. You will be asked to put on a pair of tight fitting stockings. These are designed to aid circulation and you should continue to wear them until you are discharged from hospital. You will be accompanied by a member of ward staff up to the theatre.

The ward staff will advise you when to stop eating and drinking.

During the operation

The operation usually takes between two to three hours, and is performed under a full general anaesthetic.

Occasionally removing the kidney using the ‘keyhole’ method is unable to be completed and the surgeon will proceed to take the kidney out using a larger incision whilst you remain under the anaesthetic. This happens in about 5 in 100 of cases.
After the operation
Immediately after the operation you will be transferred to the recovery ward where you will stay until you are fully awake, and comfortable. You will be given some oxygen through a mask.

Risks of Surgery
As with all surgery there are small risks attached to this procedure which will have been discussed with you. These include:

- Need to convert to open surgery in around 1 in 20 patients
- Bleeding requiring transfusion in 1 in 20 patients
- Rarely injury to adjacent structures

Will I be in pain?
The amount of pain experienced after the surgery varies with each individual. You will be assessed.

Sometimes pain relief can be administered through a pump that you control yourself (called Patient Controlled analgesia or PCA). Otherwise injections or oral medication is used.

What sort of tubes will I have?
You will have a urinary catheter, a tube that drains urine from the bladder into a bag. This will be removed the day after surgery.

You may have a wound drain. Thin tubes that drain any fluid that accumulates during surgery and drain into small bags. These usually stay in for a few days and are removed by the ward staff.

Getting out of bed
You will be encouraged to get up and about as soon as possible, usually the day of surgery. This is to prevent complications such as a chest infection, pressure sores or a deep vein thrombosis (clot in the leg veins).
Eating and Drinking
You will be able to start eating and drinking once you are awake and not feeling nauseous.

Going home
Your recovery following surgery varies with each individual. However by the time you are ready to go home you will be able to look after your own personal needs (wash and dress yourself). Ideally you should have someone to stay with you for the first week. You will also need someone to help you will heavier chores such as vacuum cleaning, and food shopping. You should be able to cook/make light meals.

Will I get any pain?
You may feel some abdominal discomfort for the first few weeks. You will be supplied with some painkillers to take home.

When can I return to work?
You may be able to return to work after about three to four weeks. This is dependant on the type of work that you do. Those involved in heavy manual work should remain off work for longer. If unsure please discuss this with a member of staff.

What about exercise?
Gentle exercise can be resumed after a few days if you feel up to it. You should go for a walk at least once a day, going further each day to mark your progress. More strenuous exercise should be avoided for several weeks.

Driving
You should be able to drive after 2 weeks but check with your insurance company that you are covered.
Follow up
You will be seen in the Urology Outpatients Department 4 - 6 weeks after your operation to discuss your operation, recovery and any questions you may have.

Further information and Support groups
Kidney Cancer UK
Macmillan Cancer Relief
NHS Choices
NHS Constitution. Information on your rights and responsibilities. Available at www.nhs.uk/aboutnhs/constitution
If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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