NHS
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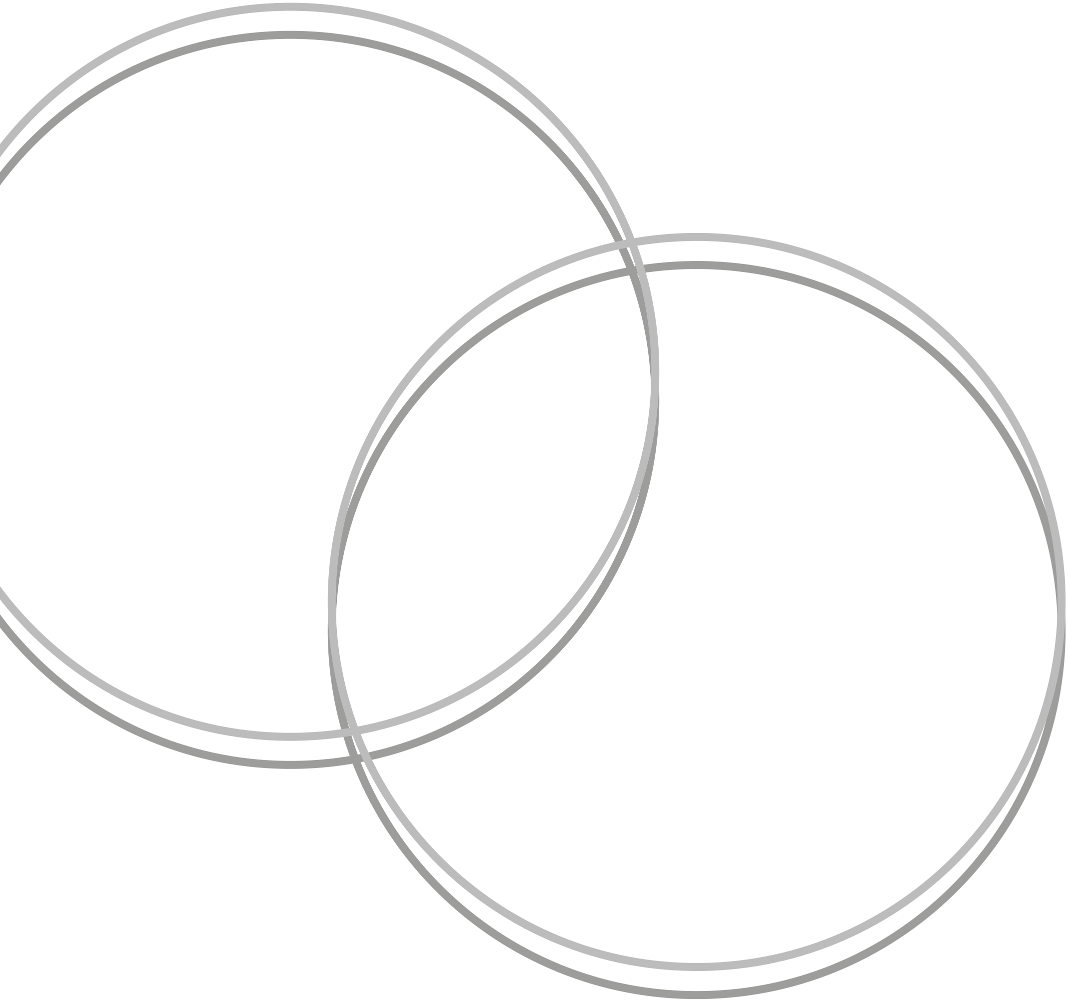
Living with your Indwelling Pleural Catheter (IPC)

Information for patients



People often have questions about living with an indwelling pleural catheter. This leaflet helps to answer some of the most frequently asked questions.

Section 1 explains more about returning to your everyday activities

Section 2 covers new symptoms or problems with your IPC

Section 3 covers issues with drainages and equipment

If you have any questions, please speak to a doctor or nurse caring for you.

Section 1: Returning to normal activities

When can you leave hospital

You can leave hospital shortly after your procedure if there are no issues. Driving straight after the procedure is allowed but might be uncomfortable, so consider arranging a lift or have someone travel with you.

Dressing and stitches

You will have a dressing over the wound that should be kept dry (see advice below on washing). Your district nurse will review the wound regularly. You will have stitches (also known as “sutures”) that help to keep the IPC in place. One suture will be removed after 7 to 10 days, and the other suture will be removed after 21 days. This will be done by the district nurses. Please call **07769 285354** if it has not happened.

Returning to normal activities

Having some anxiety with physical activity when you have an IPC is common. For the first 3 weeks, the stitches should keep the IPC secure, so walking or gentle exertion such as light housework or gardening should not be a problem. After 3 weeks your body will have formed a tight seal around the IPC, and you can then return to other activities if you feel up to it.

There should not be a problem with lifting or moving your arms above your head (for example fishing or golf). It would be sensible to start activities gently to build up strength and confidence. Heavy contact sports should be avoided.

Showering, bathing, and swimming

It is important to keep the IPC wound dry in the first 3 weeks to reduce the risk of infection. Showering is okay as long as the waterproof dressing is in place. We recommend using a hand-held shower so you can minimise soaking of the dressing. If the dressing does not stick well afterwards, it should be changed. At first, you could time showers to be just before your drainage, when the dressing will be changed anyway. After the first 3 weeks, your body will have formed a tight seal around the IPC and you can shower, bathe and swim as usual. It is still important to make sure the entry site is clean and dry afterwards, so if the dressing gets wet, please change it or ask for it to be changed.

Sleeping

It is common to find sleeping uncomfortable at first. This often gets better with time as your body becomes used to the IPC. Sleeping on your back or the opposite side is normally most comfortable. Some people find using extra pillows for support helpful.

Travelling by car or plane

There is no reason not to drive or fly with your IPC in place. As always, it is worth thinking about how you would get medical attention in an emergency when you travel and to make sure you have enough bottles with you or a plan for drainage.

Section 2: Symptoms or problems

Will you be in pain?

Pain or discomfort around the IPC site is common in the initial days following insertion, and it is important to manage this with appropriate pain relief.

You can take Paracetamol regularly (as per packet instructions) and Ibuprofen if needed (provided you are able to take Ibuprofen).

If you are struggling with pain despite this, please contact the pleural nurse on **07769 285354.**

Pain following IPC insertion usually improves after a few days, and after 2 weeks it should be barely noticeable. **If you get severe or worsening pain or breathlessness, contact the pleural team or call 999 in an emergency.**

Itching

Itching is common in the first few days after insertion. You can try over-the-counter antihistamine tablets. If there are signs of an allergic reaction to the dressing, such as a red rash, swelling, or blisters, speak to your district nurse about alternative dressings or contact the pleural nurse.

Damaged or displaced IPC

The IPC is stitched in place for the first 3 weeks. By the time your stitches are removed your body will have formed a tight seal around it so it should not get displaced with light knocks or pulls. If you are worried that the IPC is cracked or displaced, cover with a dressing and contact the pleural team, if you are unable to get through to us, please seek immediate medical attention.

Little or no fluid draining from your IPC

If the fluid output stops suddenly, this could mean the IPC is blocked. Please contact the pleural team if this happens so we can see you in the clinic / on the intervention list for a review.

If the pleural fluid has reduced on several visits (less than 50ml on 3 consecutive drainages) and you do not have a follow up appointment in the next few weeks, contact the pleural team for further advice.

Fluid colour changes

Variations in fluid colour can be normal but please note this is in your drainage diary so it can be reviewed at the next appointment. Pleural fluid due to cancer can become blood-stained with time; this is normal, especially if you're otherwise feeling well in yourself. If you notice the fluid becoming thicker, cloudy or with debris in it, please contact the pleural team. If you are feeling unwell in yourself, you should seek urgent medical attention.

Changes around the IPC

Some redness and pain are expected in the first days after insertion. If this is getting worse, or there is redness spreading to the surrounding skin, or pus at the insertion site please contact the pleural team. If you are feeling unwell in yourself, seek urgent medical attention.

Section 3: Drainages and equipment

Drainage schedule and frequency

The aim of having an IPC is to manage the symptoms of your pleural fluid, while minimising interruptions to your life. How often it is drained will depend on how quickly the fluid comes back and on your symptoms. This might reduce over time. Aiming to drain a specific amount is often not helpful. If draining the fluid is causing you discomfort, it is important to ask the district nurse to stop and speak to the pleural team for advice. It is fine to move the drainage to another day if you have an important appointment or activity that you do not want to miss. However, it would be sensible to see your district nurse at least once a week to check for signs of infection or other problems with the IPC, even if you do not need a drainage. The key is to adjust the IPC drainages to what works for you, to manage your symptoms and fit the dates around your life and the things you want to do.

Bottles and other supplies

You are given two weeks’ worth of initial supply when your IPC is inserted. Your GP will be notified in the referral for the prescription of IPC bottles. This maybe a repeat prescription or you may need to inform them if your supply is about to run out. If you have any difficulties getting the bottles, please contact the pleural team.

Used bottles

As per Oxford City Council, you can dispose the used bottles in the normal bins. For the other counties, please inquire to your local city council.

How long will the IPC stay in?

The IPC is designed to stay in for the long-term in most cases. If the fluid stops coming back it will be removed. If you want it to be removed sooner, we can discuss your options in clinic

Follow-up appointments

As well as the regular district nurse visits, you will receive a call from the pleural nurse about 2 weeks after IPC insertion. You will be seen face-to-face in pleural clinic a few weeks after insertion and at regular intervals thereafter. If you have any issues between appointments, you can contact the pleural team. Your district nurse should remove your stitches after 1 week (closing suture) and 3 weeks (holding suture) after your IPC was inserted.

Support and more information

The ‘My Pleural Effusion Journey’ website provides more information for patients, families and carers with malignant pleural effusions.

Visit website: mypleuraleffusionjourney.com

Contact us

If you have any questions or concerns about your IPC,
please contact the **pleural team**.

Phone: **07769 285354 (Monday to Friday, 9am-5pm)**.

Or seek urgent medical attention for emergency and if needed out of hours.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

We would like to thank the Guys and St. Thomas' NHS Foundation Trust for their contribution in the development of this leaflet.

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