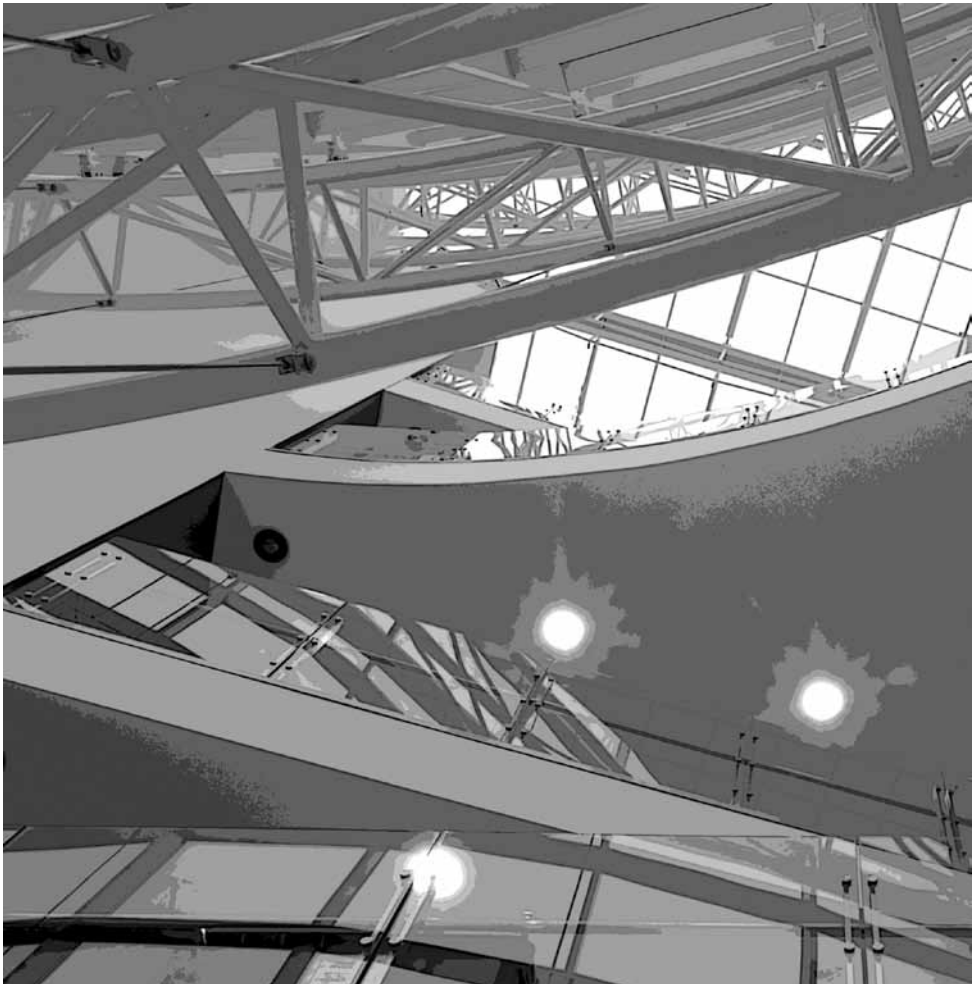


Department of Neurosurgery

Intrathecal Morphine Implants for Adults

Information for patients



Miss Bojanic has seen you in clinic as you have unmanageable pain and you will have already had a successful Morphine trial on a previous admission. This admission to hospital is for the pump implantation.

Precautions

It is important that you stop certain drugs before surgery, especially ones that thin your blood. If you are taking aspirin, warfarin, clopidogrel, any other drugs that thin the blood, or some types of painkillers, such as ibuprofen and diclofenac (Voltarol), it is very important that you contact the hospital at least two weeks before your admission. If you are taking warfarin we may need to admit you earlier before your operation, but each case varies, so it is important that you phone the hospital team so that we can discuss a plan for you.

The day of admission

On the day of admission at 12:00hrs you need to telephone **01865 231526** to check that a bed is available for you. You will be given a time to come in. Your operation will usually be planned for the next day.

Some people may be asked to come in on the day of their operation. In this case we will tell you when you need to stop eating and drinking and what time to arrive on the day of surgery.

We will always do our best to make sure you have your operation as planned. However, we do have emergency admissions and times this may mean that your operation may have to be postponed.

Arriving at hospital

Please come to the Neurosciences Ward on level 2 in the West Wing of the John Radcliffe Hospital. Pay and display parking is available under and around the West Wing building.

In accordance with our Privacy and Dignity policy we will always try give you a bed in a bay with other people of the same sex and to make sure you have access to the appropriate shower and toilet facilities. During your hospital stay we may need to move you to another bed or ward. In rare circumstances we may have to put men and women in the same bay. In this case we will make every effort to move you to a single sex bay as soon as possible.

With your permission we will list your name and bed number on a poster board so that all our staff know where you are on the ward.

Visiting hours on the ward are from 3pm to 8.30pm. This allows patients to have time to rest. We request that only **2 people** visit at any one time. Flowers are no longer allowed on the wards for the purposes of health and safety and infection control.

The nurse will explain the menu system and how to order food.

You may require some extra tests and your blood pressure, pulse and temperature will be checked. You will be told approximately what time your operation will be and when to stop eating and drinking.

Consent

Our aim is to make sure that you have enough information to help you make an informed decision about whether to go ahead with the pump implant or not. You should have the opportunity to talk with different members of the Pain Team about any concerns or questions that you may have.

If you decide to go ahead with the implant, a surgeon who understands all the possible risks and benefits will explain the procedure to you. If you are happy with the explanation you will then be asked to sign a consent form before the procedure takes place.

The day of your operation

The nurse will help you to get ready for theatre. You will be asked to wear a theatre gown and special stockings to reduce the risk of a blood clot (deep vein thrombosis) developing in your leg.

The anaesthetist will also see you to talk to you about the anaesthetic. When it's time the nurse will take you down to the anaesthetic room, where you will be prepared for your operation.

You will be asleep through the whole procedure.

Complications

As with all types of surgery, there is a small risk of complications.

First from the pump and catheter:

- the pump may fail
- the catheter may leak, kink, disconnect or dislodge.

Side effects for these complications are that your spasms will probably return and it may need corrective surgery to put the problem right.

Secondly from the surgery itself:

- infection
- CSF Leak (spinal fluid leak)
- bleeding
- headaches.

You will be given a list of side effects to look out for.

Thirdly from the drug. This could cause:

- drowsiness
- dizziness
- nausea
- light headedness
- difficulty breathing (very rare).

If you experience any of the above, you must contact the hospital team immediately.

After the operation

You will wake up in the recovery room. There will be a drip in the back of your hand. You will have two wounds, one on your back where the catheter is inserted, and one on your tummy where the pump is placed. The catheter will link round from the pump to your back under the skin, and deliver the programmed amount of drug.

You will be taken back to the ward and we will monitor your pulse, blood pressure and wounds regularly. We will offer you regular pain relief. It is important that you tell a nurse if you are feeling sick or have pain so we can help make you comfortable.

It may take some time to get the dose right for you, but it is safer to start with a smaller dose and increase it slowly over time until the desired level is achieved. We will advise you about reducing your medication during your admission.

Going home

We will give you a separate discharge information leaflet while you are in hospital.

Questions or concerns

If you have any questions that you would like to discuss before you come into hospital or after you have left hospital you can contact one of the Clinical Nurse Specialists on:

Direct line	01865 231874
Fax	01685 231870
E-mail	karen.dawson@orh.nhs.uk liz.moir@orh.nhs.uk

or

Miss Stana Bojanic – Consultant Neurosurgeon

Via Sharon Cole (Secretary)	01865 231883 sharon.cole@orh.nhs.uk
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If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@orh.nhs.uk**

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