

Neuromodulation Service

Caring for surgical wounds at home

Information for patients



This leaflet has been written to give you information and advice on caring for your surgical wounds once you get home.

There are different types of surgical wounds, so it is important to follow the advice you receive when you are discharged from hospital.

Surgical wounds

A surgical wound is the cut made to the skin by the surgeon during an operation. At the end of the operation the cut is joined back together with either stitches, Steristrips or adhesive dressings (glue), to allow the skin edges to come together and heal.

The skin edges usually form a seal within a day or two of the operation. The time this takes varies from person to person and from operation to operation.

Dressings

Not all surgical wounds need dressings. The purpose of a dressing is to:

- absorb any leakage from the wound
- provide ideal conditions for healing
- protect the area until the wound is healed
- prevent stitches catching on clothing.

Stitches

Stitches are also known as sutures. Adhesive dressings (glue), Steristrips or tapes may also be used.

Most types of stitches have to be removed by a nurse or doctor, but some stitches don't need to be removed as they dissolve. If you are told you need to have stitches removed, this can be done by your GP or Practice Nurse. The specialist nurses in Neuromodulation will give you a letter to arrange this.

Stitches are usually removed 14 days after treatment, depending on the type of operation you have had. You will have two different dates if you have had a trial of your neurostimulator, as the surgery will be done in two stages, over two weeks.

Problems with wound healing

A lot of wounds heal without any problems. However, the most common complication after surgery is wound infection. This means that germs have started to grow in the wound. An infection usually delays normal wound healing.

Wound infections are usually treated by treated by the Neuromodulation Nursing team. If you suspect an infection in any of your wounds, contact us directly. Do not go to your GP or Emergency department, as you will need specialist care from the Neuromodulation Nursing team.

Some people are more likely to develop wound infections than others. If we think that this might apply to you, the doctors will discuss the risk with you. You are at an increased risk of infection if you:

- smoke
- have diabetes
- have a condition or are having treatment which affects your immune system, such as leukaemia or chemotherapy.

The doctors and nurses will do everything that they can to prevent your wound from becoming infected while you are in hospital, but it is important that you know how to tell if you are developing an infection after you go home. If a wound becomes infected, it may:

- become more painful
- look red or swollen
- leak some blood-like liquid, pus or blood
- have an unpleasant smell.

If you develop a high temperature (above 37.5°C), notice any of the signs mentioned above, or have any concerns about your wound, contact us, your Neuromodulation Nursing team. Wound infections can be treated successfully if we catch them early.

Caring for your wound

There are a number of measures you can take to help lower the chance of your wound getting infected and to promote healing.

Changing the dressing

The original dressing can be left in place for up to two days (or as advised by the nurse/doctor), as long as it is not oozing.

The wound must be kept dry for two days. If the dressing becomes wet from blood or any other liquid, it must be changed.

When you change the dressing:

- wash your hands with soap and water
- carefully take the dirty dressing off, without touching the used side
- do not touch the healing wound with your fingers
- take care not to touch the inside of the new dressing, so that it remains clean
- do not apply antiseptic cream under the dressing.

If the wound is healing it can be left without a dressing, but you may prefer to have a dressing to cover the wound for protection, especially if your clothing can rub against it.

We will give you a supply of replacement dressings to use at home.

Taking care of stitches

Dissolving stitches usually disappear in 7-10 days. Other stitches need to be removed after 14 days. The Neuromodulation nurses will tell you when to have these stitches removed, on the day you are discharged from hospital. You will be given a letter for your GP and Practice Nurse about removing these stitches.

You may see nylon threads (the ends of the stitches) poking out of the healing scar. Please do not pull on these. If the loose ends are catching on clothes, cover the wound until the stitches are removed, to prevent them catching.

If you are worried about the stitches, always seek advice from your GP. If your stitches continue to cause you pain or discomfort, contact the Neuromodulation Nursing team for advice.

Bathing and showering

You will be advised to wait 24 hours before showering. When you come to wash, please note these general points about your wound:

- Showering is preferable to bathing. Soaking the wounds might soften the scar tissue and cause them to open up. Only take a bath if you are sure you can keep your wounds dry.
- Some waterproof dressings can be left in place whilst you take a bath or shower. Other dressings may need to be removed beforehand. The nurses will tell you which type of dressings you have.
- Do not put any soap, shower gel, body lotion, talcum powder or other bathing products directly onto your healing wound. This will cause discomfort and may also encourage an infection
- Do not worry if you splash the wound, but do not rub the wound area. This will cause pain and might delay the healing process.
- Pat the wound dry gently with a clean towel after bathing or showering.

If you have any concerns about your wound or the dressing, please contact the the Neuromodulation Nursing team.

How to contact us

Please contact us if you have any questions or concerns.

Neuromodulation Nursing Team

Tel: 01865 231 874

Movement Disorder Team

Tel: 01865 231 873/5/6

Outside of office hours, please call 01865 741 166 and ask for the Neurosurgery On-call doctor.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALS@ouh.nhs.uk**

November 2016 Review: November 2019 Oxford University Hospitals NHS Foundation Trust Oxford OX3 9DU www.ouh.nhs.uk/information

