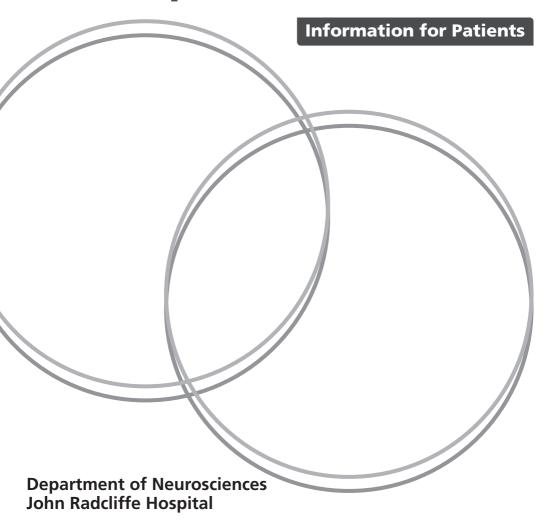


Discharge advice for patients going home after the implantation of a Deep Brain Stimulation



This leaflet contains answers to some of the questions people most often ask when they go home. It is intended as a guide. If you have any specific queries that are not answered here, please discuss these with your Movement Disorder Team nurse or doctor.

Going home

You may feel concerned about the thought of returning home after your operation. Hopefully during your stay with us your questions will have been answered. This leaflet has been designed by your nurses to give you support and guidelines about your recovery at home. We feel it is important that you do not feel alone and isolated at home, so please do not hesitate to call us if you need specific advice. Please contact the Neuromodulation Movement Disorder Nurses on Tel: 01865 231 876 between the hours of 08.30am – 16.30pm, Monday – Friday. Or contact the ward on 01865 231 526. Alternatively your GP and Practice Nurse are there to help, as are the secretaries for your consultants and doctors at the hospital.

How do I look after my wounds?

Depending on how many brain leads you have had implanted, you will have one or two wounds on the top of your head. You will also have a wound behind one of your ears, and one on either your chest or your abdomen. If you have stitches that dissolve (do not need to be removed) you will be advised how to take care of them by a member of the Movement Disorder Team. You must not use any shampoo or body wash that contains conditioner. If you have stitches that need to be removed, they will need to be taken out on the 10-14th day after the operation. You will need to make an appointment with your Practice Nurse to do this at your GP's surgery.

As your wound is already healing it does not need any special attention. It is better to have a shower rather than a bath. This prevents the wound from becoming sodden (soaking wet), which can increase the risk of infection and delay healing. You must contact the team at the hospital as a matter of urgency if you notice any of the following symptoms. They may mean that you have an infection which needs treatment with antibiotics:

- Any leakage from the wound. This may be brown, green, or clear.
- An increase in soreness or very bad itching around the wound that happens a few days after you have returned home.
- Redness or any swelling or pain at or around your wound site.
- Any fever/high temperature.

If this happens outside of normal office hours you must contact your GP who will be able to contact the Neurosurgical team at the hospital. If your GP surgery is closed they will have an 'out of hours' service that you can access by calling 111

How soon will I be getting back to normal?

As soon as the initial tiredness passes you can look forward to gradually getting back to normal. You may feel very tired for the first couple of weeks and we advise you to take plenty of rest during the day. As you begin to feel less tired, you may want to do more as each day passes. You may need some additional help in the early days if you are caring for small children, other dependants, parents, partners etc. There are no restrictions on doing things such as seeing friends, going shopping and travelling, but we advise you not to do anything too strenuous or that puts pressure on your wounds. You cannot fly until 24 hours after a general anaesthetic. We strongly advise against going abroad on holiday until all your wounds are fully healed.

About the stimulator

Depending on your type of stimulator, you may have been given a booklet written by the company who made your stimulator. If this is the case, please read it carefully. If there is anything that is not clear, do not hesitate to ask your nurse to contact a member of the Movement Disorder Team. If you need any of the following procedures in the future please contact the Movement Disorder Team for advice:

- surgery
- scans
- invasive procedures (a procedure which might cause bleeding)
- dental treatment.

If you are due to have surgery there may be certain equipment that cannot be used by your surgeon during the operation because of your deep brain stimulator system. This most commonly concerns equipment used to stop bleeding, using a technique known as diathermy. It may also be necessary to turn your stimulator off before the operation and back on afterwards. It is important that

your surgeon is aware of what the safety restrictions are. Please ask your surgeon to contact us for advice before the operation.

Until recent years it was not safe to have an MRI scan at all if you had a deep brain stimulator system implanted. Many of the stimulator systems that we are implanting these days will allow you to have an MRI scan, but only using very special MRI restrictions. These restrictions are complicated and are different depending on which company made the DBS system. You must contact the Movement Disorder team before having an MRI scan. You must never agree to having an MRI until you have confirmed with us and the person performing the scan that it is safe for you to do so. You must tell the person requesting the MRI scan that you have a deep brain stimulator implant.

When you are out, you must remember to watch out for signs asking people with cardiac pacemakers to see a member of staff. This is because your neuro-stimulator works in a similar way to cardiac pacemakers and there may be special precautions you need to take. We will tell you about these before you leave hospital and you will be given an identity card with details of your stimulator. Remember to carry this with you, especially if you are travelling. At airport security, you should request a hand-search instead of a wand –search, as this could interfere with your device

Will my medication be changed?

Every person responds differently to his or her medication and to this type of surgery. Your medication may be changed before you leave hospital. If so, a member of the Movement Disorder Team will discuss this with you. If you have stopped any blood thinning medications in preparation for surgery please ask a member of the team when it should be re-started. If you are unsure about the medication you should be taking please discuss this with us before you leave the ward. Once you get home, if you experience any symptoms that are unusual for you, please consult your GP or contact one of the Movement Disorder Nurses.

What about work?

How quickly you return to work depends on what you do for a job. You should discuss this with your doctor before you leave hospital. A period of 4-6 weeks off work is not unusual. If you need a Sickness Certificate please ask for this before you go home, or contact your GP.

When can I resume sexual activity?

The simple answer to this is whenever you are ready. If you are unsure about how your medications affect any contraception you may be taking, please ask your GP or pharmacist for advice. The stimulator itself should have no effects on any method of contraception used

Will I be able to drive?

We advise you not to drive for six weeks after your Deep Brain Stimulator operation. By law, you must inform the DVLA and your insurance company of your operation. They will tell you if there are any specific regulations, or changes to your policy after Deep Brain Stimulation. When you are travelling in a car, if the seat belt is pressing on the stitches in your chest you will need to take extra care. If possible have the shoulder strap on the opposite side to you stitches. This may mean sitting in a different seat.

What about complications?

You have already started on the road to a good recovery and we are confident that this should continue at home. Sometimes, for whatever reason, people may develop postoperative complications or side effects from stimulation. Please see your GP or phone the ward if you experience:

- any different, worsening or sudden headache
- any neck stiffness, high temperature or pain when you look at light
- a rash
- lethargy or tiredness that doesn't improve
- any chest pain or calf pain
- fits/seizures or "funny turns"
- blurred vision or worsening vision
- drowsiness, confusion, or any weakness in your arms or legs
- any vivid dreams or hallucinations
- vomiting or feeling sick

G	oing home checklist
	Tablets and a discharge advice sheet
	Any of your own tablets which you brought with you
	Transport arranged – your own or hospital transport if necessary
	All your belongings, including any valuables we have locked away and any cards, etc.
	Letter for your GP and Practice Nurse

Follow-up/how to contact us

You will be given an Outpatient appointment either before you leave the ward or sent in the post. If you have not received anything by four weeks after discharge from hospital, please contact the team on team administrator on 01865 234 838. Alternatively you can e-mail on neuromodulation@ouh.nhs.uk

Consultant's secretaries: 01865 234 838

Consultant Neuropsychologist: 01865 234 264

Movement Disorder Team Nurses: 01865 231 876

Functional Neurosurgery

Service Administrator: 01865 234 838

Neuroscience inpatients ward reception: 01865 231 526

Email: neuromodulation@ouh.nhs.uk

A member of the team is usually available between the hours of 8.30am and 4.30pm Monday - Friday. As we are working with patients we may not be able to answer your call, but please leave an answer phone message we will return your call at the earliest opportunity.

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.

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Oxford University Hospitals NHS Foundation Trust

www.ouh.nhs.uk/information



Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk

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