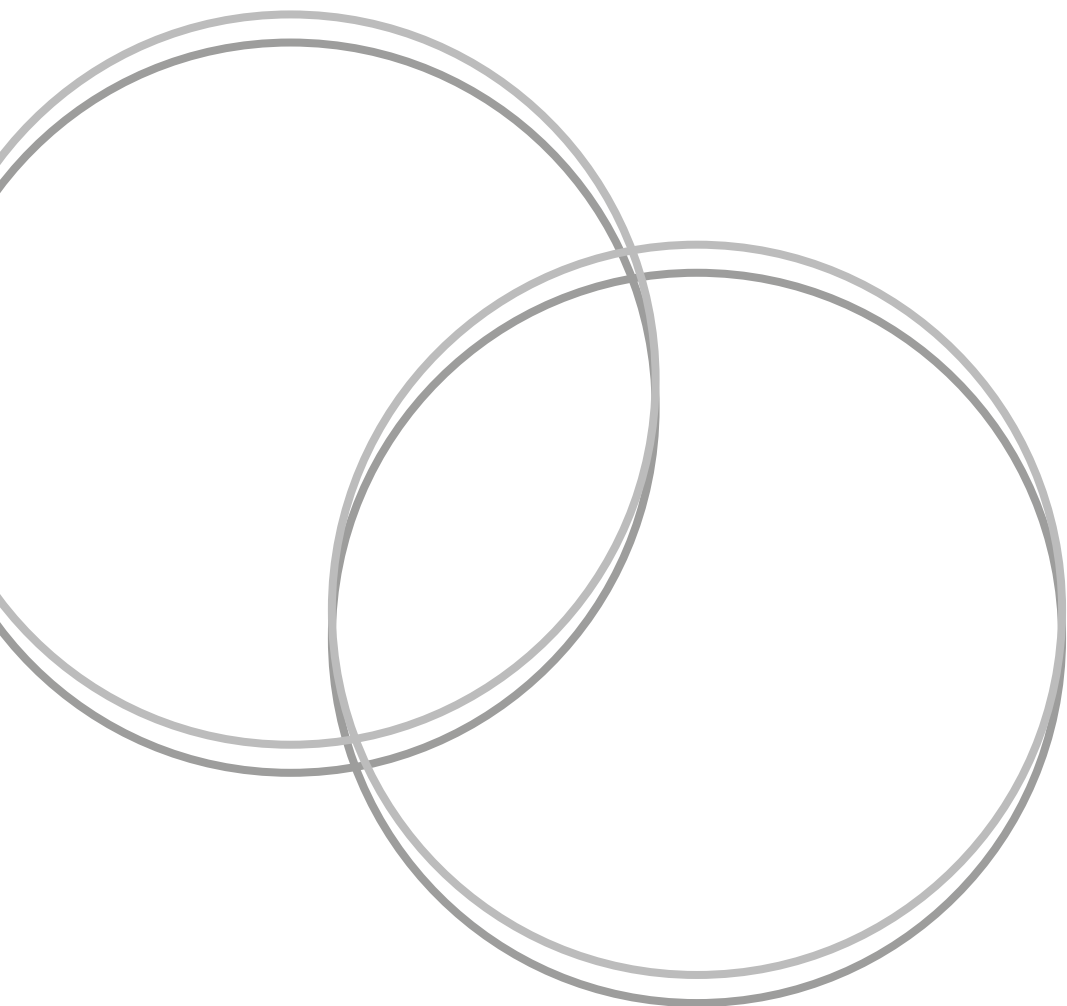




Oxford University Hospitals
NHS Foundation Trust

General advice following Hepatobiliary and Pancreatic Surgery



This information leaflet has been written to answer some of the questions you may have following discharge home from hospital and to help you know what to expect after your operation.

Follow up appointment

This appointment will normally take place around 2-3 weeks after your discharge from hospital. If you have not received an appointment date, then it is important to contact your consultant's secretary (see contact details). We will see you earlier if you have any particular concerns or problems.

Recovering after your operation

If you have a long journey home and are travelling by car you should stop every hour or so and stretch your legs to prevent you being too stiff when you reach home. You may find it more comfortable to place a folded towel between your abdomen and the seat belt.

You have just had a major operation and your body will need time to recover and adjust to its new condition. Many people are surprised at the length of time it takes to get over an operation. It is likely that you will feel more tired than normal and you may need to rest during the day. When you first get home you may feel impatient or frustrated that you are not recovering as fast as you would like. Do not worry, this is normal. Many patients do not feel they have “returned to normal” for at least 4-6 months after the operation. It may take you a few weeks to return to your normal activities particularly if there have been complications after surgery.

Remember to continue to do your deep breathing exercises and keep mobilising daily as advised by your physiotherapist when you were in hospital. As you begin to recover you should gradually increase the distance and frequency of your walks.

Pain and pain relief

You may experience some pain or discomfort for a few weeks after your operation. You do not have to put up with pain. A small supply of painkillers will be given to you to take home, and a copy of the prescription for these will be sent to your GP.

Your pain should lessen with time but if it does not seem to be improving or becomes worse, please discuss this with your specialist nurse or your GP.

Eating and nutrition

You may not feel like eating in the early weeks after surgery. However, it is important to try to eat as high calorie and protein diet (as recommended by your dietitian) as you can manage in order to build up your strength and aid recovery. Eventually, you will find a pattern of eating and drinking that suits you, although this may take some time. You may find that eating little and often is easier than trying to eat three large meals a day. You could try drinking nourishing drinks such as full fat milk which can help you get the nutrition you need.

It is not uncommon to lose some weight after discharge from hospital. Weight can be regained slowly (if appropriate) by following the advice given by the dietitian. You might not return to the weight you were before the operation.

If you are continuing to lose weight or have any worries about your nutrition, it is important to contact the specialist nurse or dietitian for assessment and advice (see contact numbers page 9).

Bowel function

Your surgery, a change in diet, a change in activity, and the use of some drugs can all lead to irregular bowel habits. This usually corrects itself with time as your body adapts following surgery. If diarrhoea is happening often or if you have any concern over your bowel function, such as pale coloured or floating bowel motions then please speak to the specialist nurse, dietitian or GP for advice.

Wound healing

All wounds go through several stages of healing and you will be able to see changes in your wound. You are likely to experience:

- Unusual sensations, such as numbness, tingling, or itching
- Slight pulling around the stitches or staples as the wound heals
- A slight hard lumpy feeling as new tissue forms

Remember, please do not pull off any scabs as they protect the new tissue underneath and act as nature's dressing. They will fall off without any help when ready.

Occasionally, wound infections develop in the wound. Signs of an infection include:

- An increased reddening of the skin (mild infection)
- Oozing of a pus-like fluid from the wound.
- Opening of the wound. This would need dressing by a district nurse/practice nurse. Wound healing is delayed in these cases.

Antibiotics may be necessary to treat any infection.

Eating a high protein diet as suggested by the dietitian should promote wound healing.

Bathing and showering

It is safe to get your wound wet after you have gone home, as long as the wound is healing well (or unless you have been

advised not to). Try to avoid soaking in the bath for too long, and pat the wound dry. . If your wound requires a dressing, please speak to the district nurse or practice nurse for advice about bathing or showering.

Exercise and activity

Please do follow the advice about breathing and exercises given to you by the physiotherapist in hospital.

It is useful to make a plan for yourself of gradually increasing your normal activities over the next few weeks and months. Progress may feel slow and frustrating, but pushing it too hard at an early stage may do more harm than good. Gentle exercise will help to stimulate your appetite and your energy levels. A gradual increase in the amount of exercise you take is helpful, perhaps starting with short walks and increasing the distance over the next few weeks. Climbing stairs can be surprisingly tiring, but is a useful way of getting exercise and judging your progress.

Remember to avoid any heavy lifting of weights (including small children and shopping) or pushing or pulling (including mowing the lawn) for the first 8 weeks after surgery or after the wound has completely healed. Make use of any help available to you

in these first weeks. Trying to resume usual household jobs is important, but you should balance your increased activity with suitable rest.

Take care not to overdo it on one day, as you may feel it the next day:

- You may feel more tired
- You may feel stiff and ache more.

Sex

It is common after major surgery to experience a temporary drop in libido (sex drive). This is often due to lack of energy and physical strength. Try to talk openly with your partner about your feelings. Remember, closeness and sexual pleasure can be shown in a number of ways and not just by the act of sexual intercourse.

You should be able to resume sexual activity as soon as you feel ready for it.

Rest

At first, you may feel exhausted and may want to sleep a lot. Your body needs all its energy to mend and heal itself. It is helpful to plan a 'rest time' during the day, when you cannot be disturbed. This is a time to have a sleep or to simply rest without interruption. On the whole, resting on the bed rather than the chair is more relaxing. An afternoon nap before 4pm should not affect your sleep at night.

It is a matter of balancing periods of rest with periods of activity to encourage recovery from surgery and to build up stamina again.

Visitors

When you first get home, friends and family may want to visit or telephone and wish you well. Too many visitors could prevent you from getting proper rest so be honest with them and tell them if you are getting tired.

Depression, anxiety or irritability

Some patients go through short periods of low mood, depression, anxiety or irritability, usually when they feel they are not making any progress, when they are in pain, or when they suffer a setback of some sort.

It can be difficult to talk to loved ones and to explain how you feel, or to assume that they understand how you feel. By sharing how you feel, you and your family/friends are more likely to be able to support each other during this time in your recovery.

Work

The time at which you return to work depends on the type of job you have. You can expect to be off work at least 3-6 months, and it could be 6-12 months before you feel back at your best.

Some people start to go back to work part-time and then increase to full-time work.

Driving

We recommend that people can return to driving 6-8 weeks after the operation, provided that they are feeling well and are not taking any medication which can cause drowsiness. Remember, for your own safety and that of others, you must have the strength and movement to do an emergency stop.

It is advisable to contact your insurance company for any set guidelines.

Other symptoms

People experience a wide variety of different symptoms and responses following surgery. If you are worried about any symptoms or have other concerns, please contact the specialist nurse, your consultant or your GP.

How to contact the hospital team

If you have any concerns about your operation when you get home, it is important that you know who to contact for further advice. If you have concerns within office hours (9am-5pm) then please contact your Nurse Specialist (see contact details below) or your GP surgery.

Nurse Specialists:

Telephone: **01865 235 130**

01865 741 841 please ask to bleep 1386 or 1891

Dietitian:

Telephone: **01865 235 421**

Surgeons:

Telephone: **01865 235 668**

Out of hours contacts (including bank holidays):

- If you are discharged just before or during the weekend and you need urgent advice then please contact the Oxford Upper GI Ward on **01865 235 061** or **235 062**
- If you need to speak to someone "out of hours", please contact your emergency GP service or NHS 111 by dialling 111 from your mobile or landline (freephone).

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

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