

Respiratory medicine - Charing Cross Hospital

Pleural biopsy Information for patients, relatives and carers

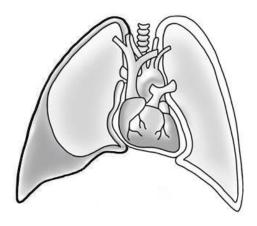
Introduction

This leaflet explains what a pleural biopsy is and how to prepare for the procedure. Please ask us if you have any questions about the information below.

Please note: a pleural biopsy is often carried out with a pleural aspiration – we have a separate information sheet about pleural aspiration, but the procedures are very similar.

What is pleural biopsy?

A pleural biopsy is a simple procedure, which involves passing a small needle through the chest wall into the lining of the lung (the pleural) to take some small biopsies.



Why do I need a pleural biopsy?

We have recommended this because imaging studies have revealed that the lining of your lung is thicker than usual. The cause of this is unclear, so a pleural biopsy will allow the doctors to carry out more tests to understand why this has happened.

How do I prepare for my pleural biopsy?

Please ensure we have your correct telephone numbers (**including your mobile phone number**), and ideally an email address for you. We will contact you by telephone a few days before your procedure to confirm your attendance. If we are unable to reach you, your appointment will be given to someone else who is waiting.

Please let us know at least 48hrs in advance if you will need an interpreter.

Bring any glasses needed for reading, as you will need to read and sign a consent form (even if you have already given digital consent prior to the procedure on another day).

We need details of **all** your medications (please bring them with you), allergies and any medical conditions.

It is important to let us know in advance if you take blood-thinning medications as we usually temporarily stop these before your procedure. The details below summarise what to do with any blood-thinning medications. Please contact us if you are not sure what to do.

Blood-thinning medication instructions

Warfarin Usually stopped 5 full days before the procedure. You will need an

'INR' blood test 1-2 days before the procedure to ensure your 'INR'

is below 1.5.

Please let us know if you are on warfarin and why, as in some situations, we may give you an alternative shorter-acting agent to

take instead, in the lead-up to your procedure.

Aspirin Do not take on the morning of the procedure

Clopidogrel Usually stopped 7 full days before the procedure

Dipyridamole Usually stopped 7 full days before the procedure

Ticagrelor Usually stopped 7 full days before the procedure

Rivaroxaban Usually stopped 2 full days before the procedure

Apixaban Usually stopped 2 full days before the procedure

Dabigatran Usually stopped 2 full days before the procedure

Dalteparin (injections) Usually stopped 1 full day before the procedure

Enoxaparin (injections) Usually stopped 1 full day before the procedure

You should take all your other medications as usual on the morning of the procedure.

What will happen on the day?

If you are not already an in-patient, and are having the procedure at St Mary's Hospital, please come to the reception desk in endoscopy, second floor of the Queen Elizabeth the Queen Mother (QEQM) building at the time you have been given (Imperial College Healthcare NHS Trust | Hospital map).

If you are not already an inpatient, please come to **5 North at Charing Cross Hospital, in the main Tower Block** (Imperial College Healthcare NHS Trust | Charing Cross Hospital site map).

When you arrive, please check-in with our receptionist who will arrange for a nurse to greet you and take your blood pressure, heart rate and temperature, and ask you a few questions about your medical history, medications and any allergies. Please let us know if you may be pregnant.

The procedure will be explained to you again and you will have the opportunity to ask any questions before completing the consent form.

Pleural biopsy is carried out in a procedure room. You will be asked to lie in a comfortable position by the doctor. The doctor will usually do an ultrasound scan to find where best to perform the biopsy. This involves some jelly on the chest and is not painful, but the jelly can be cold. The procedure is usually done at the side of your chest, below the armpit.

Once you are resting comfortably, the skin will be cleaned with an alcohol-containing cleaning solution to kill any bacteria. This fluid often feels cold. A local anaesthetic is injected into the skin, to numb the area. This can feel mildly painful, but the pain disappears quickly.

Your doctor will then pass a biopsy needle into the lining of the lung. This should not be painful, although you may feel some pressure or pulling. The needle makes a loud clicking noise. The doctor will take several biopsies, using the ultrasound machine as a guide.

The procedure usually takes between 20 and 40 minutes.

Are there any risks involved in having this procedure?

Pleural biopsy is generally a very safe procedure, with serious complications being rare. The details below apply to all pleural procedures:

Pain

Some patients may experience a degree of pain, but this is rarely severe. The local anaesthetic stings briefly but the aspiration procedure should not be sore. If needed, we can give further local anaesthetic. After discharge from hospital, the chest may be sore for a little while and you may need some mild painkillers.

Infection

Rarely, patients who have a pleural biopsy may suffer an infection at the site of the procedure. If this occurs it can usually be treated with antibiotics, but you may need to stay in hospital. Very rarely such infections can be serious and require an operation.

Bleeding

Rarely, patients may develop bleeding. This often settles without any further intervention but might (very rarely) require a further procedure to control it, this may include an operation.

Lung damage

There is a small risk of damage to the lung, which could cause air to leak into the space around the lung. This usually requires no specific treatment but could require admission to hospital and may need a small tube to be inserted through the skin into this collection of air in order to drain it. There is also a small risk that the needle used to access the pleural, punctures (creates a hole in) another organ, such as the spleen or liver. This is exceptionally rare and does not usually cause any harm.

What happens after the pleural biopsy?

You will be monitored by a nurse for up to 30 minutes. We often perform a chest x-ray after the procedure. After 15-30 minutes, provided you feel well, you will be ready to be collected and taken home. We suggest that someone either drives you home or travels with you in a taxi.

Getting the results

The results of your pleural biopsy will not be immediately available. It takes at least 7 days for the specimens to be analysed properly. You will be given an appointment in the chest clinic (or with the doctor who referred you for the biopsy) to discuss your results approximately 7-14 days after the procedure. Please contact your chest doctor's secretary 1 week after the procedure if you have not received an appointment. Occasionally, a further procedure may be needed to provide a diagnosis.

How to contact us

If you have any questions or concerns leading up to the appointment, please contact the Pleural Team on **07876138418** or imperial.pleural@nhs.net (Monday-Friday, 09.00-17.00).

If you have had a pleural biopsy and experience marked breathlessness, pain, dizziness or light-headedness outside of these hours, please attend your local A&E, taking this leaflet with you.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777** (10.00 – 16.00, Monday to Friday). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: 020 3312 1337 / 1349

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

Department name: Respiratory Medicine Published: May 2022 Review date: May 2025 Reference no: 5103 © Imperial College Healthcare NHS Trust