

Patient information

Endoscopic Ultrasound Examination (EUS) Guided Pelvic Abscess Drainage

Digestive Diseases Care Group

Your consultant or doctor has advised you to have Endoscopic Ultrasound Examination (EUS) guided pelvic abscess drainage.

Endoscopy is the insertion of a long, thin tube directly into the body to observe an internal organ or tissue in detail.

What is EUS guided pelvic abscess drainage?

You are possibly familiar with an ultrasound scan, one use of which is to look at babies in the womb of pregnant women by rolling a probe over the abdomen. EUS combines an ultrasound scan with endoscopy (flexible camera) so that fine detail of the lining of the gut or of certain internal organs such as the pancreas, liver, gallbladder and bile ducts can be examined.

Certain conditions and post-surgical complications can result in the formation of an abscess (collection of pus that has built up within the tissue of the body) within the pelvic region. When this occurs it is possible to drain the abscess by inserting a stent (tiny plastic or metal tube used to keep open a blocked passageway) from the rectum (concluding part of the large bowel) or left side large bowel into the abscess cavity, under the guidance of EUS.

What are the benefits of EUS guided pelvic abscess drainage?

Left untreated, pelvic abscess's can cause serious health problems such as, sepsis and lower abdominal pain. It can even be life threatening. The purpose of EUS guided pelvic abscess is to drain the abscess to help prevent further complications and reduce the need for surgical intervention.

Are there alternative procedures available?

Alternative procedures include surgical transrectal or transgluteal drainage, ultrasound-guided transrectal or transvaginal intervention or (CT)-guided percutaneous drainage. The percutaneous drainage involves the tube being placed through the skin and can be painful. If you want to discuss this further, you must speak to the doctor who referred you for the procedure.

What will happen if I decide not to have this procedure?

If you decide not to have this procedure, then you have the option of choosing one of the alternative procedures.

A decision not to proceed with pelvic abscess drainage will cause your symptoms to get worse and risk serious health problems. This could in turn lead to hospital admission, surgical intervention and may be life threatening.

What are the risks of EUS guided pelvic abscess drainage?

EUS is a very safe procedure. However with any invasive procedure there is a risk of complication, but the chance of this is minimal.

- There is a small chance of an allergic reaction to the drugs used for sedation.
- There is a small risk of bleeding [less than 1%] or sepsis but these can usually be treated if they arise.
- There is a minimal risk of anastomotic (surgical connection between two structures) leakage.
- There are no known risks associated with the ultrasound part of the procedure.
- The flexible camera can very rarely cause a tear (perforation) [less than 1%] in the lining of the bowel.
- There is a small risk of failure to place the stent or of stent migration [5%].

Any of the risks can usually be easily treated and can be discussed with you during the consent process on the day of procedure.

What anaesthetic or sedation will I be given?

You will be given intravenous sedation which involves the injection of two medications given into the vein via a cannula (plastic tube that aids insertion of fluids). Of the two medications one is a sedative and the other a pain relief.

Please be aware that you will be slightly drowsy and relaxed, but you will not be unconscious.

The drugs used in sedation may affect your memory or concentration for up to 24 hours. Many patients remember nothing about the procedure or even what the doctor has said to them afterwards.

You must not drive or operate machinery, climb ladders or sign important documents for 24 hours following the sedation. It is also essential to bring an escort to take you home and stay with you for 24 hours, without which the procedure may be cancelled.

A side effect of these drugs can be to slow your breathing; it is not normal for this to happen, but sometimes patients can be oversensitive to the drug and is the main reason why we do not give high doses of these drugs. You will also be supported with additional oxygen during the test.

If you are worried about any of these risks, please speak to your consultant or a member of their team.

Getting ready for your procedure

- Administer the enema or oral bowel preparation prior to the procedure as advised.
- If you are taking iron tablets, please stop taking them one week before your appointment.
- You will be asked to remove any tight clothing, ties, dentures, spectacles and contact lenses.
- Please bring a dressing gown and slippers.
- Please **do not** bring large amounts of cash or valuables with you as the Trust cannot be held responsible for them.

Important: If you have:

❖ **Diabetes**

❖ **Are taking: (Warfarin tablets, Clopidogrel (plavix) tablets)**

❖ **Anticoagulants:**

- Warfarin
- Heparin/Low molecular weight heparin (including enoxaparin/dalteparin)
- Dabigatran
- Rivaroxiban
- Sinthrome
- Apixaban
- Fondaparinux
- Edoxaban

❖ **Antiplatelet therapy:**

- Clopidogrel (Plavix)
- Prasugrel (Efient)
- Ticagrelor (Brilique)
- Dipyridamole (Persantin) and aspirin

❖ **Are on dialysis**

❖ **Have suffered a heart attack within the last three months.**

You must contact the Endoscopy Unit as soon as you receive this information leaflet.

Tel: 0151 706 2656

Text phone number: 18001 0151 706 2656

When you come to the department, please tell the doctor or nurse about any drugs you are taking and in particular, about any possible allergies or bad reactions you may have had in the past.

Your EUS guided pelvic abscess drainage.

- In the endoscopy room you will be made comfortable lying on your left side; you will be given some oxygen through your nose.
- A rectal examination will be performed with a gloved finger, which will help to relax the muscle. After this, the flexible telescope will be lubricated and inserted into your bottom.
- This entire procedure lasts between 30 and 40 minutes.

After your EUS guided pelvic abscess drainage

You will be transferred to the recovery area after the procedure is completed and the nursing staff will monitor your blood pressure and pulse for the next two hours. When you are fully recovered you can be discharged home.

Results

Sometimes the doctor or nurse may let you know the result after the procedure is complete. However if a biopsy, photograph or other information is taken which need to be assessed further, the result may not be available for a week or two. In this case the result will be sent to your family doctor (GP) or be available to discuss with you during your next clinic appointment.

What should I expect when I go home?

It is normal to sometimes experience some mild abdominal discomfort / bloating for a couple of days after your procedure.

For the 24 hours following procedure you must not

- Travel alone.
- Drive any vehicle e.g. car, scooter or ride a motorcycle or bicycle.
- Operate machinery (including domestic appliances such as a kettle).
- Make any important decisions, sign any legal documents.
- Climb ladders.
- Drink alcohol.
- Return to work within 12 hours of treatment. Your general health and any medicines you are taking may increase the time you need off work.

You should

- Take it easy for the rest of the day, avoid strenuous activity.
- Take your medications as usual.
- Let someone else care for anyone you usually look after, such as children or elderly or sick relatives.
- Ensure that you have an adult escort to look after you for 24 hours.

Cancellations

If you are unable to keep this appointment, please let us know as soon as possible on
Tel: 0151 706 2656
Text phone number: 18001 0151 706 2656

We will be able to give your appointment slot to another patient and re-arrange your procedure date if you do not contact the department to inform of cancellation.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

* Please be aware that we are a large teaching Trust and so we are involved in teaching students and in research work. Qualified doctors and nurse practitioners may perform your test under supervision by a skilled endoscopist.

You may also be asked to take part in research. If you do not feel happy about this, please tell a member of staff. You have the right to refuse and your decision will not affect your treatment in anyway.

Further information

If you have any questions or queries, please contact the Endoscopy Unit during the following hours

Monday – Thursday	0800 – 2100 hrs
Friday	0800 – 1700 hrs
Saturday/Sunday/BH	0800 – 1600 hrs

Tel: 0151 706 2656

Text phone number: 18001 0151 706 2656

Clinic appointment enquiries

Tel: 0151 706 5555

Text phone number: 18001 0151 706 5555

The Emergency Department (A&E) is open 24 hours
Telephone number: 0151 706 2051/2050.

Text phone number: 18001 0151 706 2051/2050

Hospital Royal Hospital
Tel: 0151 706 2656
Text phone number:

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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