

Information about having a

Percutaneous Ablation of a Kidney Tumour



What is a Percutaneous Ablation of a Kidney Tumour?

This procedure involves passing very fine needles called ablation probes through the skin into the tumour in your kidney under image guidance. (The probe tip heats up or freezes and kills the cells in the tumour. This can be sometimes be used instead of having an operation.

Who will do it?

A specially trained doctor called a Consultant Radiologist.

Where will it be done?

We carry out the procedure in the CT scanner room in the Radiology Department.

When can I discuss the procedure?

You can discuss the procedure and its risks and benefits with the Consultant Radiologist at the ablation clinic and on the ward before your procedure.

Consent

We will ask you to sign a consent form before the procedure

Please make sure that you ask any questions you may have. When signing the form you should know what we plan to do, alternative treatments, and any risks or complications of the procedure.

Do I need an anaesthetic?

Yes, you will have a general anaesthetic which means you will be asleep. A Consultant Anaesthetist will be responsible for this part of your procedure.

What preparation is required before the procedure?

We may ask you to attend a pre assessment clinic to assess your general fitness. We will take routine blood tests and may check your heart and lungs.

Usually we will admit you to hospital on the morning of your procedure.

You cannot eat or drink on the morning of your procedure. If you are on medication to thin your blood you will need to stop this several days before your procedure but only after discussion with your doctor. We will discuss this with you at your pre-operative assessment appointment.

You will need to undress and wear a hospital gown.

What happens during the procedure?

This is a sterile procedure under general anaesthetic. We will give you the anaesthetic in the CT scanner suite.

The Radiologist will use the CT scanner equipment to identify the tumour and carefully place the probes in the best position to treat the tumour and minimise any complications.

During the procedure you will be asleep and pain free.

How long will it take?

This can vary for a number of reasons; however you can expect to be in the Radiology Department for 2-3 hours.

What happens afterwards?

We will transfer you from the CT scanner suite to the theatre recovery suite where you will wake up. We will monitor you for 1-2 hours. You will then return to your ward and remain on bed rest for a few hours. The nursing staff will monitor you and carry out routine observations (blood pressure, pulse etc).

You may have some discomfort in your side or lower back. We can give you pain killers if necessary.

Most patients stay in hospital for 24-48 hours after their procedure. The Radiologist will visit you each day until you go home.

Although you can experience some discomfort afterwards most people can expect to return to their normal activities within 1-2 weeks.

You will usually need follow up CT or MR scans over the next few months.

Are there any risks?

There are potential complications, as with any invasive procedure. The most common complications are bleeding which usually settles without treatment and a reduction in kidney function (i.e. passing urine) which usually recovers in 24-48 hours. Infection is also possible but is very rare indeed.

If you have any questions please telephone the number on your appointment card or letter.