

After your lung surgery

Guidelines for recovery





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This booklet gives information about going home after lung surgery. The booklet has an accompanying checklist to help you return home safely. The booklet cannot replace advice from your surgeon or a member of their team. Please ask us if you have any questions.

Going home after surgery – key things to remember

1. Follow-up appointment

Make sure you know if you need a follow-up appointment, and which hospital you need to go to.

2. Pain medication

Remember you have extra pain medication if your pain gets worse.

For a repeat prescription of your pain medication, make an appointment with your GP in the week after you go home.

3. Caring for the wound

Your discharging nurse will give you a leaflet called 'Hygiene and wound care for heart and lung operation patients', which gives more information about caring for your wound.

If you have stitches which need to be removed, make sure you know when they need to come out.

4. Rehabilitation

When you go home try to move around as much as you can during the day. Gradually build up the amount of time that you are physically active each day.



Going home

Planning your care

Please ask a family member or friend to take you home when you leave hospital. On some wards you can wait in a discharge lounge until your transport can pick you up. We can only arrange hospital transport for patients who are in medical need and cannot get home from hospital any other way.

It is a good idea to have someone with you for the first few days after you leave hospital. You may need help with daily activities, such as cooking, cleaning, shopping and general support. If you live alone, it may be useful to stay with a friend or relative, or see if they can stay with you.

Before you leave the ward, you will be given a discharge checklist. The checklist shows things to remember when you leave hospital. You can discuss the checklist with the team looking after you.

Your follow-up appointment

You will usually see your surgeon for a follow-up outpatient appointment two to six weeks after your surgery.

You will be given your appointment on the day you leave hospital, or by post. Your appointment will be at your local hospital, or Royal Brompton or Harefield hospitals. **Make sure you know which hospital to go to for your appointment.**

If you cannot make your appointment, please contact the outpatient department or your consultant's secretary.

Caring for your wound and stitches

Wound stitches

The stitches in your wound will usually dissolve over time, so there is no need to remove them. If your wound has stitches that do not dissolve, or you have metal clips, your discharging nurse will explain what to do.

Drain stitches

If you had a chest drain, you must contact the practice nurse at your GP surgery to have your drain stitch removed. Your discharging nurse will tell you the date to remove your stitch, and write the date in your discharge checklist.

Medication and prescriptions

When you leave hospital you will usually have two weeks' supply of all your medication, including pain relief medication. It is important to take your medication regularly, as prescribed.


Make an appointment with your GP for a repeat prescription within the first week you are at home, so you do not run out. You will need to give a copy of your discharge summary to your GP.

If you want to take any over-the-counter medicine or herbal products, first check with your pharmacist that it's safe to take with your prescribed medication.

Managing your pain at home

Managing your pain will help you return to your normal activities and exercise more easily. Everyone experiences pain differently, but you may need to take pain medication for several weeks or months after surgery. Pain medication can cause constipation, so you may need to take laxative medicines to help manage this.

If you still have pain after taking your medication, or your pain gets worse, please see your GP. If you need advice, you can contact the pain management nurse specialists. See page 12-13 for their contact numbers.



Once you can do daily tasks and exercise with minimal pain, you can slowly reduce your pain medication. Start by leaving out a dose during the day. It is best to reduce the stronger medication first. Do not suddenly stop your pain medication.

You can find more information about managing pain in the booklet 'Managing your pain at home after lung surgery', which your discharging nurse will give you before you leave the ward.

Breathing

How your breathing feels will depend on your type of surgery and whether you have any existing lung or breathing problems. Keeping your pain under control will help you take deep breaths and cough to clear the air passages. Being physically active may also help your lungs to recover quicker.

It is common to have a cough and feel short of breath after lung surgery. This usually improves in the first few weeks after your surgery. You may cough up some discoloured phlegm. The phlegm may be brownish, or contain some blood. This is part of the natural healing process.

If you are coughing up a lot of thick, discoloured phlegm, have a temperature or suddenly become more breathless, contact your GP or hospital team.

Your lifestyle and recovery

Posture

Regularly check your posture so you do not develop posture problems. Poor posture may be due to pain after lung surgery. This can increase your risk of developing joint or muscle problems. To check your posture, look in the mirror and make sure that you are standing straight. If you have pain, try gentle movement, exercise and pain medication.

Arm and shoulder exercises

Try to use your arms as normal, but avoid lifting anything heavy and putting strain on your chest wall.

It is important to exercise your shoulder on the side you had your surgery. During the day lift your arm towards the ceiling, as high as your pain allows. Try and do this once every two hours, to help stop your shoulder getting stiff.


Physical activity

Being physically active will help your recovery after lung surgery. Regular exercise can help your breathing and general fitness, and can also have emotional benefits.

Try exercise such as walking or climbing stairs, until you feel slightly out of breath. Increase your activity levels gradually and build in regular times each day when you are physically active. Take pain medication so you can exercise comfortably, and balance exercise with sufficient rest. To see how you are improving, you could use a pedometer or phone app.

As you become more active, you may want to return to a previous sport or active hobby, or take up something new like gardening or dancing.

You can talk to your consultant, physiotherapist, specialist nurse or GP about exercise, and any modifications you might need after surgery. If you want to swim, your wound should be fully healed first.



In some areas there are supported exercise programmes for people recovering after treatment. Ask your GP or local hospital team if you can be referred to a programme near you.

Sexual relations

You can have sex again as soon as you feel comfortable after your surgery. Find a position that is comfortable, without straining your wound and arms.

Eating and appetite

Eating a well-balanced diet, high in protein and energy, will provide nutrients to help you recover well.

If your appetite is poor after surgery, try eating frequent, small meals or snacks. Eat high-protein food such as milk, cheese, eggs, yoghurts, pulses, fish and meat, and fruit and vegetables, to support wound healing and help keep your bowels regular.

If you had loss of appetite in the hospital, you may have been prescribed nutritional drinks. If these are required long-term, your dietitian will advise your GP. Some nutritional drinks are also available to buy at pharmacies and supermarkets. If you are underweight or losing weight, or your appetite does not improve, contact your GP or talk to your nurse specialist.

It is important that you do not try to lose weight directly after your surgery as this can make it more difficult for your body to heal. You should wait six to eight weeks before thinking about any weight loss.

If you are taking pain medication, alcohol may have a greater effect than usual. Drink only small amounts, and ask your pharmacist for more information about pain medication and alcohol.

Your emotions after surgery

After surgery you may sometimes feel tired, low or worried. You are coping with the physical effects of surgery, and may be concerned about your diagnosis.

Talking to family and friends can help. You can also talk to your clinical nurse specialist, who can help you find other support available. Occupational therapists can give advice on coping with stress. Our psychological medicine team includes psychologists, nurses and psychiatrists, who can support you in hospital and after you go home.

To find out more, please talk to the ward nurses or contact your specialist nurse. See page 12-13 for hospital contact numbers.

Smoking and lung health


If you smoke, stopping smoking will give you the best chance of maintaining healthy lungs, or preventing further damage. There is plenty of support available to help give up. You will be offered smoking cessation advice in hospital. You can also talk to your GP or pharmacist. See page 14 for more stop smoking advice.

Practical issues

Help at home

When you go home, you may need some extra help with personal care, housework or shopping. Family members and friends may be able to help.

If you think you are going to need help with your personal care, please tell your nurse as soon as possible when you come in to hospital. The complex discharge team can advise and help plan your discharge home. If you need care from your local authority, you will need an assessment, which can take a few days to arrange.



Occupational therapists can also help arrange community support or equipment at home, and can advise on planning your daily activities so you have more energy.

If you find that you need more help once you are at home, your GP can refer you to your social services department at your local authority. Age UK can also be a useful source of advice on finding help at home. Help at home often requires a payment.

See page 15 for more welfare advice.

Going back to work

You can talk to your surgeon, nurse specialist or GP about returning to work. When you go back to work will depend on how quickly you recover from your surgery, and the type of work you do.

Your employer may offer a phased return to work, when you work part-time or have lighter duties, and build up gradually.

Welfare rights and benefits

If you are worried about finances, or you want information about benefits, you can talk to a welfare rights advisor at the hospital. Ask your nurse to refer you for welfare rights advice.

Driving

You must not drive after your surgery until your doctor says it is safe. You must be able to do an emergency stop without any pain before you can drive. Strong pain medication (morphine, codeine, oxycodone, tramadol) can also affect your concentration.

You must wear a seatbelt when driving, or as a passenger in a car. To make the seatbelt more comfortable, put a rolled-up towel or small pillow between your chest and the seatbelt.

The DVLA (Driver and Vehicle Licensing Agency) gives advice on how surgery and medical conditions may affect your driving.

You should tell the DVLA about your surgery/treatment if you drive as part of your job.

You must tell the DVLA about your treatment if you are still unable to drive 3 months after your surgery. This is a legal requirement.

You should also tell your car insurance company about your surgery and treatment.

Going on holiday

Going on holiday after your surgery is usually OK as long as you feel fit enough. Avoid flying until your first outpatient follow-up appointment, when your consultant can advise whether flying is safe for you.

Flying after surgery may increase your risk of developing a blood clot in your leg, called deep vein thrombosis (DVT). To help prevent DVT, drink plenty of fluids, avoid alcohol and move around in the plane as much as you can. You could also wear compression stockings to help reduce the risk of a DVT.

You must tell your travel insurance company about your surgery and treatment, so your insurance is valid.



Useful contacts

Royal Brompton Hospital

Switchboard

020 7352 8121

Princess Alexandra ward

020 7351 8596

Sir Reginald Wilson ward

020 7351 8483

Macmillan lung nurse specialist

020 7352 8121 extension **84134/84133** or mobile **07971 301161**
(available Mon-Fri, 9am-4pm)

Macmillan welfare rights advisor

020 7352 8121 extension **84736** or ask for **bleep 7550**

Advanced practitioner in perioperative surgery

020 7352 8121 and ask for **bleep 1353**

Pain management nurse specialist

020 7352 8121 extension **82408** or ask for **bleep 7037** or **7064**

Medicines helpline

020 7351 8901

Physiotherapists

020 7352 8121 and ask for **bleep 7301**

Harefield Hospital

Switchboard

01895 823 737

Maple ward

01895 828 552

Cedar 1 ward

01895 828 618

Cedar 2 ward

01895 828 581

Juniper ward

01895 828 123

Cherry Tree ward (day-case unit)

01895 828 658

Macmillan lung nurse specialist

01895 828 989 and lung CNS mobile **07971 074940**

Macmillan welfare rights advisor

020 7352 8121 extension **84736** or ask for **bleep 7550**

Advanced practitioner (thoracic nurse practitioner)

01895 823 737 and ask for **6253** or **6182**

Pain management nurse specialist

01895 823 737 and ask for **bleep 6144** or **6165**

Medicines helpline

020 7351 8901

Physiotherapists

01895 823 737 and ask for **bleep 6306**



Other support organisations

Cancer support groups

Macmillan Cancer Support

0808 808 0000

www.macmillan.org.uk

Roy Castle Lung Cancer Foundation

0333 323 7200

www.roycastle.org

Cancer Research UK

0808 800 4040

www.cancerresearchuk.org

Mesothelioma UK

0800 169 2409

www.mesothelioma.uk.com

Lung conditions

British Lung Foundation (BLF)

0300 0030 5550

www.blf.org.uk

Stopping smoking

SMOKEFREE

0300 123 1044

www.smokefree.nhs.uk

Quitline

0800 00 22 00

www.quit.org.uk

Activity

Walking for Health (Supporting you to get active and stay active)

www.walkingforhealth.org.uk

Welfare

Disability Benefits Helpline

0800 121 4600

www.gov.uk/disability-benefits-helpline

Carers UK (Support and advice for people who are caring for others)

0808 808 7777

www.carersuk.org

Age UK (Advice and support for older people and their carers)

0800 055 6112

www.ageuk.org.uk

Driving

DVLA

0300 790 6806

www.dvla.gov.uk

If you have any concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call the Patient Advice and Liaison Service (PALS) on:

- Royal Brompton Hospital – 020 7349 7715
- Harefield Hospital – 01895 826 572

You can also email pals@rbht.nhs.uk. This is a confidential service.

Royal Brompton Hospital
Sydney Street
London
SW3 6NP
Tel: 0330 12 88121

Harefield Hospital
Hill End Road
Harefield
Middlesex
UB9 6JH
Tel: 0330 12 88121

Website: www.rbht.nhs.uk

Royal Brompton and Harefield hospitals are part of Guy's and St Thomas' NHS Foundation Trust

إذا كنت ترغب في الحصول على ترجمة فورية لمضمون هذه الوثيقة إلى اللغة العربية، يرجى منك الاتصال بأحد مستخدمينا بجناح المصلحة التي يتم فيها استشفائك. أحد موظفينا سيسعى لترتيب إجراءات الترجمة وإتمامها في الوقت المناسب لك.

Brosurteki bilginin Türkçe tercumesi için tedavi görüyor olduğunuz bölüme bas vurunuz. Bölüm personeli tercümenin gerçekleşmesini en kısa zamanda ayarlayacaktır.

