Lymph node biopsy

Patient Information Sheet

What are lymph nodes?

Lymph nodes are part of the immune system. They are found in the neck, behind the ears, in the armpits, and in the chest, belly and groin.

Lymph nodes in healthy people are usually difficult to feel. But lymph nodes in the neck, armpit, or groin can get bigger and become tender. Swollen lymph nodes usually mean an infection, but the swelling can also be caused by a cut, scratch, insect bite, tattoo, a drug reaction, or cancer.

Your consultant will have advised you the reasons why we need to do this for your personal circumstances. S/he is referring you to a surgeon for the procedure as this is their specialist area.

Why do I need to have a biopsy?

Generally lymph node biopsy is done to:

- Check the cause of enlarged lymph nodes that do not return to normal size on their own.
- Check the cause of symptoms, such as an ongoing fever, night sweats, or weight loss.

Are there any alternatives?

For some diseases lymph node biopsy is the only way to make an accurate diagnosis, so we can plan appropriate treatment with you.

For others it may be possible to perform the following:

- **Fine-needle aspiration biopsy**. Your doctor inserts a thin needle into a lymph node and removes a sample of cells.
- **Core needle biopsy**. Your doctor inserts a needle with a special tip and removes a sample of tissue about the size of a grain of rice.

The decision which procedure you require will be made between your consultant and yourself.
What does the surgery involve?

The procedure is generally done whilst you are asleep using a general anaesthetic. In some instances a local anaesthetic can be used, this will be discussed with you.

The surgeon will make a small cut in the skin and remove the lymph node.

What are the risks?

Lymph node biopsy is considered a safe procedure. However, as with any surgery, complications do occasionally occur.

The risks of surgery are assessed on an individual basis, as they can vary depending if you have any underlying health issues. Please discuss this with your consultant.

General risks:

There is a chance of an infection at the biopsy site. An infection can be treated with antibiotics.

How long will I be in hospital?

It is usually possible to have the procedure as a day case. If you do require an overnight stay you will normally be ready for discharge the next day.

What happens before the operation?

Before admission you will need to have a pre-operative assessment. This is an assessment of your health to make sure you are fully prepared for your admission, treatment and discharge. If you prefer we may be able to do this over the telephone, but you may need to come to the hospital if we need further tests.

The pre-operative assessment nurses will help you with any worries or concerns that you have and will give you advice on any preparation needed for your surgery. Please read the instructions given to you very carefully before the date of your admission.

If you are undergoing a general anaesthetic you will be given specific instructions about when to stop eating and drinking and if you are on medications we will advise you which medications you should take and which you should not take.

Please follow these instructions carefully as otherwise this may pose a risk and we may have to cancel your surgery.

You should bath or shower before coming to hospital. You will be asked to change into a theatre gown when you arrive.

On admission a member of the nursing staff will welcome you. The nurses will look after you and answer any questions you may have. The surgeon and anaesthetist will visit you and answer any questions that you have. You will be asked to sign a consent form.
A nurse will go with you to the anaesthetic room and stay with you until you are asleep. A cuff will be put on your arm, some leads placed on your chest, and a clip attached to your finger. This will allow the anaesthetist to check your heart rate, blood pressure and oxygen levels during the operation. A needle will be put into the back of your hand to give you the drugs to send you to sleep.

**What happens immediately after the operation?**

Your blood pressure, pulse and wound will be monitored closely over the first few hours. You will normally be able to start drinking shortly after the procedure, and can start eating as soon as you are hungry. You will normally be able to get out of bed a few hours after surgery, although the nurses will assist you the first time.

Some pain is to be expected. The nurses will monitor how you are feeling and give you painkillers if required. The nurses will monitor the wound site and advise on wound care on discharge from hospital.

If your operation is planned as a day case you can go home as soon as the effect of the anaesthetic has worn off. A general anaesthetic can temporarily affect your coordination and reasoning skills so you will need a responsible adult to take you home and stay with you for the first 24 hours. During this time it is also important that you do not operate machinery, drive or make important decisions.

Before your discharge the nurse will advise you about your post-operative care and will give you a supply of painkillers and dressings as required.

Your GP will be notified of your treatment. If a hospital follow-up appointment is required you will be notified of this prior to discharge and the appointment card will be posted to you.

**How will I recover and how much pain can I expect?**

If you have general anesthesia for a lymph node biopsy, you will not be awake during the biopsy. After you wake up, the area may be numb from a local anesthetic that was put into the biopsy site. You will also feel sleepy for several hours.

For one to two days after a lymph node biopsy, you may feel tired. You may also have a mild sore throat if a tube was used to help you breathe during the biopsy. Using throat lozenges and gargling with warm salt water may help with the sore throat.

After an open biopsy, the area may feel tender, firm, swollen, and bruised. Fluid may collect near the biopsy site. Fluid may also leak from the biopsy site. You can use an ice pack or take an over-the-counter pain medicine (not aspirin) to help relieve swelling and mild pain. The tenderness should go away in about a week, and the bruising usually fades within two weeks. But the firmness and swelling may last for six to eight weeks. Do not do any heavy lifting or other activities that stretch or pull the muscles around the area.

**When will I be able to drive?**

You must not drive for at least 24 hours after surgery. Before driving you should ensure that you are able to perform an emergency stop, have the strength and capability to control the car and be able to respond quickly to any situation that may occur. Please be aware that driving whilst unfit may invalidate your insurance.
When can I return to work?

You can return to work as soon as you feel well enough. This could depend on the type of work that you do. Typically you will may one to two weeks off work.

When should I seek help?

You should seek help if:

- Your pain lasts longer than a week.
- You have redness, a lot of swelling, bleeding, or pus from the biopsy site.
- You have a fever.
- There is fluid build -up in the area where the lymph node was taken out. This occurs most often when removing the lymph nodes that run in a line from under the arm to the collarbone (axillary lymph nodes). This can happen immediately after surgery or even months or years later. Most people who have a lymph node biopsy do not have a problem with fluid build -up.
- Numbness in the skin near the biopsy site. This may be caused by nerve damage

Where should I seek advice or help?

During the hours of 8am - 8pm contact the Day Surgery Unit, North East NHS Surgery Centre, Queen Elizabeth Hospital 0191 445 3009

During the hours of 8pm -8am contact Level 2, North East NHS Surgery Centre, Queen Elizabeth Hospital 0191 445 3005

Data Protection

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us improve the services available your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews. Further information is available in the leaflet Disclosure of Confidential Information IL137, via Gateshead Health NHS Foundation Trust website or the PALS Service.

This leaflet can be made available in other languages and formats upon request