Calderdale and Huddersfield NHS Foundation Trust

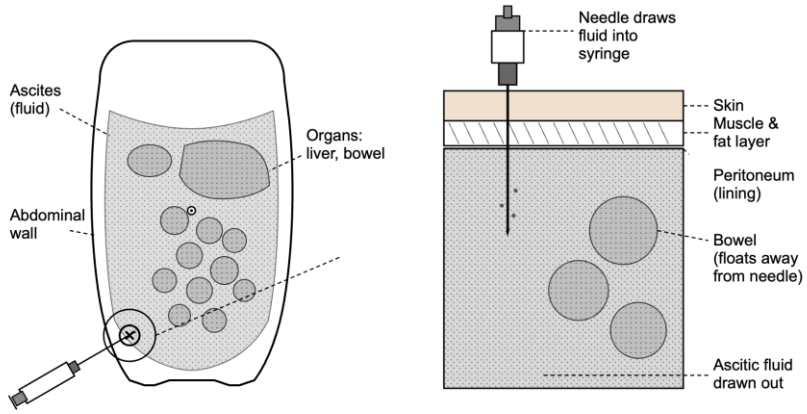
Patient Information Leaflet

Ascitic Drain - Patient Information Leaflet – Same Day Emergency Care (SDEC)

Following your visit to the Same Day Emergency Centre, you are going to have an **ascitic drain** (a procedure to remove fluid from the abdomen).

What is an ascitic drain?

An ascitic drain (also called paracentesis) is a procedure where a small tube is placed into the abdomen to remove fluid that has built up inside. This fluid is called ascites, and it collects in the space between the lining of the abdomen and the organs inside. The procedure is done using local anaesthetic to numb the skin. A small sample of fluid may be taken on its own (ascitic tap), or a larger amount may be drained over a few hours.



Ascitic tap (paracentesis)

Why do you need an ascitic drain?

An ascitic drain can be performed to help us make a diagnosis - to find out what is causing the fluid - or as a treatment - to relieve symptoms by removing the fluid. Often, it serves both purposes at the same time.

Diagnostic reasons include:

- Checking for infection of the fluid, known as spontaneous bacterial peritonitis (SBP).
- Finding out the cause of new fluid build-up, such as liver disease, heart failure or cancer.
- Looking for cancer cells if cancer is suspected.
- Measuring the protein and other markers in the fluid, which helps us understand where the fluid is coming from.

Therapeutic reasons include:

- Relieving discomfort, bloating and pressure caused by a large amount of fluid.
- Improving breathing, which can become difficult when the fluid pushes up on the diaphragm.

- Managing ongoing fluid build-up in conditions such as advanced liver disease or cancer, sometimes as a regular planned procedure.

What happens during the procedure?

- You will usually lie on your back, slightly tilted to one side. An ultrasound scan is used to find the best and safest place to insert the drain.
- The skin is cleaned and local anaesthetic is injected to numb the area. This may sting briefly.
- A small tube is carefully placed through the skin into the fluid space. You may feel pushing but it should not be painful.
- Fluid is allowed to drain into a bag. For a diagnostic tap, only a small sample is taken. For a therapeutic drain, larger volumes may be removed over a few hours.
- If a large amount of fluid is removed, you may be given a medicine called human albumin solution through a drip to help keep your blood pressure stable.
- Once the drain is finished, the tube is removed and a small dressing is placed over the site.

What are the risks and complications to be aware of?

Bleeding or bruising - A small amount of bruising at the site is common. Significant bleeding is rare, and the risk is higher if your blood does not clot well (for example in liver disease).

Infection - There is a small risk of introducing infection into the abdomen. Strict sterile technique is used to minimise this risk.

Fluid leak from the drain site - After the drain is removed, fluid can sometimes leak from the puncture site. This usually settles on its own; if it continues, a stitch or stoma bag may be used.

Low blood pressure and kidney strain - Removing large volumes of fluid can sometimes lower your blood pressure or put a strain on your kidneys. This is why we may give albumin through a drip during the procedure.

Damage to nearby organs - Very rarely, the tube can damage nearby structures such as the bowel or a blood vessel. Using ultrasound to guide the procedure makes this very uncommon.

After the procedure

- You may need to rest for a few hours while the drain is in place. Once the drain is removed, you can usually go home the same day.
- Keep the dressing clean and dry for 24 hours.
- You may notice the dressing becomes damp if a small amount of fluid leaks - this is usually not a cause for concern but let us know if it is significant.
- Results of any fluid samples may take between a few hours and a few days. Your team will explain how and when you will get your results.

What should I do if I have any concerns after the procedure?

Please seek immediate medical attention by attending A&E or calling 999 if you experience:

- Severe abdominal pain
- A high fever or shivering
- Ongoing heavy leaking of fluid or blood from the drain site
- Dizziness, fainting or feeling very unwell
- Vomiting blood or passing black stools.

Please contact our SDEC department if you:

- are unsure about your results or follow-up plan
- have a mild ongoing fluid leak from the site
- are confused about your diagnosis.

Please contact your GP if you:

- have any other symptoms that are concerning or seem unusual
- have any issues with your prescription.

Contact information

If you have concerns after leaving SDEC, please contact:

SDEC / Hospital Advice Line: _____

GP: _____

Out of hours: NHS 111

In an emergency, call 999.