Caring at its best

University Hospitals of Leicester

Having an abdominal tap/ drain to remove fluid from around your tummy

Last reviewed:	May 2022
Updated:	September 2024
Next review:	May 2025
Leaflet number	: 279 Version: 6.1
	Updated: Next review:

What is an abdominal tap/ drain?

An abdominal tap (also know as paracentesis) or drain, is a procedure in which a small tube is inserted into your tummy (abdominal wall) to remove fluid (ascites) from within your tummy.

Why do I need to have it done?

There are 2 reasons for having this procedure:

- To relieve pressure from within your tummy from a build up of fluid (abdominal drain).
- To remove a small amount of this fluid to send to the laboratory to be tested (abdominal tap). You can expect to have the results of this test within a week.

Where will the procedure take place?

- If you are currently staying in hospital, it can take place on the ward that you are on.
- If you are out of hospital and under the care of a cancer team (Oncology), you will go to Osborne Treatment Centre, on the 2nd floor of the Osborne Building at Leicester Royal Infirmary.
- If you are under the care of the liver team (Hepatology), you will go to either ward 43 or 42 at Leicester Royal Infirmary.
- Please let us know if you are on blood thinning medication (anticoagulant) e.g. like warfarin or antiplatelet medication like clopidogrel, at the time when your appointment is being made.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



What happens when I come to the hospital?

- We will look at your blood test results. These might need to be repeated if necessary.
- Please bring along a list of your medications for us to look at.
- Before the procedure begins you will be asked to use the toilet to empty your bladder.
- A nurse will help you onto the bed and make sure you are in a comfortable position.
- You may be given an injection to numb the skin (local anaesthetic).
- You may have an ultrasound scan during the procedure depending on the cause of the fluid.
- During the procedure, a small tube will be inserted into your tummy via a small cut in the skin. The fluid will drain through this tube into a drainage bag.
- If the fluid build up is due to liver scarring (cirrhosis), you may need to have a drip put in your arm to give you some fluid (human albumin solution 20%), while the extra fluid is draining from your tummy. Human albumin solution is a blood product and has been shown to help the kidneys after a tap.
- When all the fluid has drained (this could be over several hours), the tube is removed and a dressing is put over the place where the tube went in.
- You may experience slight discomfort during the procedure, but it should not be painful.
- Painkillers can be given if you experience any discomfort. Tell the nursing staff if this happens.
- If you have any queries please ask your nurse.

What are the benefits of this procedure?

- Having the fluid drained from your tummy will help relieve tummy pain.
- The results of the laboratory test of the fluid sample may help determine why the fluid is there.

What are the risks?

- It is a safe procedure with a very small chance of significant side effects (less than 1 in 100 people).
- There is a slight chance that during the procedure a hole is made in the gut. This may cause bleeding or infection. In patients that have cancer as the cause of the fluid, it is common for the fluid that comes out to be blood stained (pinky). This does not necessarily mean there has been a problem caused by the procedure.
- If a large quantity of fluid is removed, there is a slight risk of it making you feel dizzy and affecting the kidney function. Fluid may be given to you through a drip to avoid these problems. Your blood pressure, pulse and temperature will be monitored regularly during the procedure.
- There is a slight chance that the site where the tube is inserted may become infected.

Aftercare

- Some leakage of fluid from the drain site for a few hours after the procedure is common and nothing to worry about. Your nurse will check this before you go home.
- You should remove the dressing from the drain site after 24 hours.
- You should then check the site for redness and other signs of infection. If you are worried that you may have an infection or have other concerns, please contact us using the details below.
- It is certainly possible that the fluid will start to build up again over the following days to weeks. Please contact us if this happens using the details below.

Contact details

If you are feeling unwell immediately after being discharged from hospital:

• Liver Unit (Hepatology) patients:

Ward 43, Leicester Royal Infirmary - Tel: 0116 258 6239 or 6279

Osborne Unit (Oncology) patients:

Osborne Treatment Centre - Tel: 0116 258 5263 (Monday to Friday, 9am to 5pm) Outside hours - Oncology Wards, Tel: 0116 258 6339 or 0116 258 6309.

If your tummy is becoming more swollen and painful again and needs a further drain:

There may be a delay of 3 to 4 days before this can be arranged for you to come in.

• Liver Unit (Hepatology) patients:

Hepatology Secretary - 0116 258 6480 (Monday to Friday, 9am to 4pm)

• Osborne Unit (Oncology) patients:

Osborne Treatment Centre - Tel: 0116 258 5263 (Monday to Friday, 9am to 5pm)

اگر آپ کو یہ معلومات کسـی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخری، الرجاء الاتصال علی رقم الهاتف الذي یظهر في الأسفل જો તમને અન્ય ભાષામાં આ માફિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ `ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ। Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk