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GS21 Emergency Diagnostic Laparoscopy

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Your surgeon has recommended an emergency diagnostic laparoscopy (keyhole surgery) to help find out the cause of your abdominal pain. However, it is your decision to go ahead with the operation or not.

This document will give you information about the benefits and risks to help you to make an informed decision. Ask your surgeon if there is anything you do not understand.

What are the benefits of surgery?

Your surgeon is not certain of the cause of your abdominal pain. You may have had a blood test, x-rays or scans.

A diagnostic laparoscopy will help to find out if you have one of the following problems.

- Appendicitis, where your appendix (part of your large bowel) becomes inflamed.
- Crohn's disease, where your bowel becomes inflamed.
- Diverticular disease, where bulges form on the side of your colon.
- Adhesions.
- Complications following trauma (where a physical force is applied directly to your abdomen).
- Other rare bowel conditions.
- For women, endometriosis (a condition where the lining of your womb grows outside your womb), pelvic infection or ovarian cysts.

Some problems may not need surgery and can be treated with medication. Sometimes your surgeon may not find a cause. When this happens it is called a 'normal laparoscopy'.

What does the operation involve?

Let the healthcare team know if you could be pregnant or if you have had previous surgery to your abdomen.

The operation is usually performed under a general anaesthetic.

Your surgeon will make several small cuts on your abdomen and inflate your abdominal cavity with gas (carbon dioxide). They will insert surgical instruments, along with a telescope, inside your abdomen so they can see inside your abdomen and perform any minor procedures. If you have appendicitis, your surgeon may be able to remove your appendix using this technique.

Depending on the problem your surgeon finds, they may need to make a larger cut on your abdomen (open surgery).

Rarely, for certain types of bowel surgery, your surgeon may need to make a temporary stoma (your bowel opening onto your skin).

Your surgeon will remove the instruments and close the cuts.

What complications can happen?

The healthcare team will try to make the operation as safe as possible but complications can happen. Some of these can be serious and can even cause death (risk: less than 1 in 10,000).

Using keyhole surgery means it is more difficult for your surgeon to notice some complications that may happen during the operation. When you are recovering, you need to be aware of the symptoms that may show that you have a serious complication.

Complications of anaesthesia

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

General complications of any operation

- Pain.
- Feeling or being sick. Most people feel better within one to two days.
- Bleeding during or after the operation. You may need a blood transfusion or another operation.
- Infection of the surgical site (wound), which usually settles with antibiotics.
- Unsightly scarring of your skin.
- Blood clots in your legs (deep-vein thrombosis – DVT) or, more rarely, in your lungs (pulmonary embolus). The healthcare team will take measures to reduce this risk.

Specific complications of this operation

- Damage to structures such as your bowel, bladder or blood vessels when inserting instruments into your abdomen (risk: less than 3 in 1,000). The risk is higher if you have had previous surgery to your abdomen.
- Continued bowel paralysis (ileus), where your bowel stops working for more than a few days, causing you to become bloated and to be sick. You may need a tube (nasogastric or NG tube) placed in your nostrils and down into your bowel until your bowel starts to work again.
- Developing a hernia near one of the cuts used to insert the ports (risk: 1 in 100).
- Surgical emphysema (crackling sensation in your skin caused by trapped carbon dioxide gas), which settles quickly.
- Failure to find out what the problem is, if you do have a problem.
- Failed procedure, if it is not possible to insert the instruments inside your abdominal cavity (risk: 1 in 180). The risk is higher if you have had previous surgery to your abdomen.
- Infection of the pelvic organs or bladder (cystitis). You may need antibiotics.

How soon will I recover?

The healthcare team will tell you what was found during the laparoscopy and discuss with you any treatment or follow-up you need. If your surgeon cannot find a cause for your pain, they will usually diagnose 'non-specific abdominal pain'. This is the case for 1 in 3 people who go to hospital with abdominal pain. For 4 in 5 people the pain settles on its own.

You should be able to go home the same day or the day after. If you had open surgery, you may need to stay in hospital for up to two weeks.

If you do go home the same day, a responsible adult should take you home in a car or taxi and stay with you for at least 24 hours.

Do not drive, operate machinery, do any potentially dangerous activities, sign legal documents or drink alcohol for at least 24 hours.

You need to be aware of the following symptoms as they may show that you have a serious complication.

- Pain that gets worse over time or is severe when you move, breathe or cough.
- A high temperature or fever.
- Dizziness, feeling faint or shortness of breath.
- Feeling sick or not having any appetite (and this gets worse after the first one to two days).
- Not opening your bowels and not passing wind.
- Swelling of your abdomen.
- Difficulty passing urine.

If you do not continue to improve over the first few days, or if you have any of these symptoms, let the healthcare team know straightaway. If you are at home, contact your surgeon or GP. In an emergency, call an ambulance or go immediately to your nearest Emergency department.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Acknowledgements

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This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.