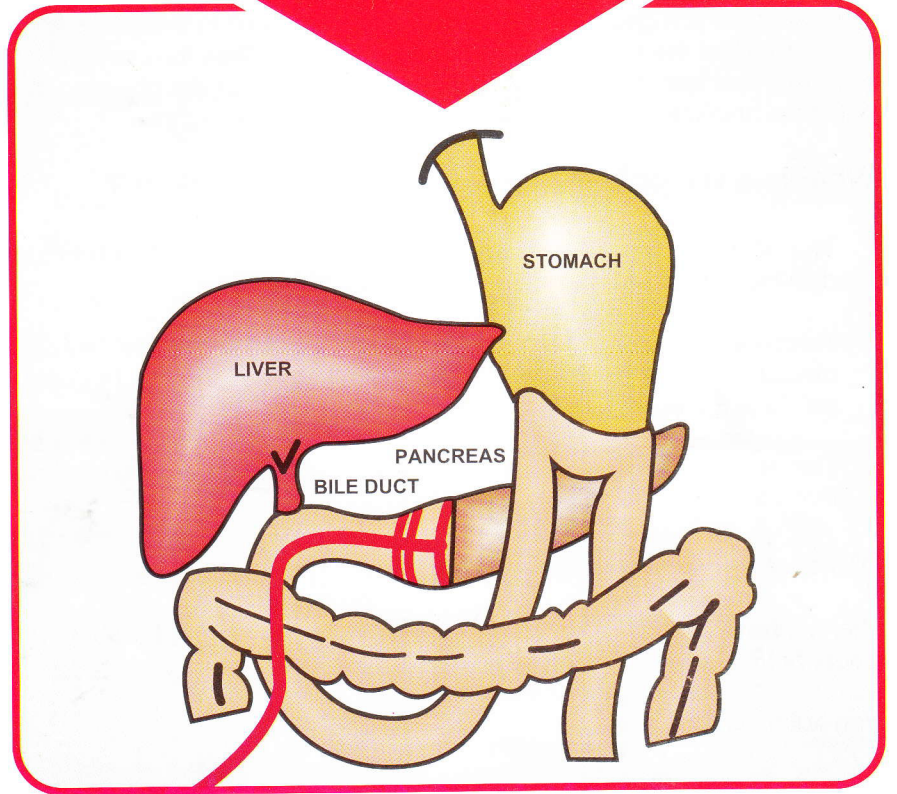


Pancreaticoduodenectomy Whipple's Procedure A Guide for Patients/Families



This brochure provides information about Pancreaticoduodenectomy also known as Whipple's procedure. It is designed to respond to the questions most frequently asked by patients .



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PANCREATICODUODENECTOMY WHIPPLES PROCEDURE

The Pancreas:

The pancreas is a gland behind your stomach and next to the duodenum, the first part of the small intestine. The pancreas makes fluid containing enzymes that help to digest food as it passes through the bowels. The pancreas also makes insulin that helps the body to use sugar

What is a Whipple's procedure and why is it done?

- The Whipple's procedure is done for a variety of malignant and benign diseases of the pancreas, bile duct and duodenum.
- Tumours in the head of the pancreas, and distal common bile duct can block the flow of pancreatic fluid and bile causing jaundice (a yellow colour of the skin).
- The diseased area is removed and the healthy parts are rejoined so that you can eat, drink and digest food normally.


What will happen after surgery?

You will be taken to a special care unit for close monitoring for about 24 hours before returning to the ward.

You will have a number of tubes in your body:

- A nasogastric (NG) tube in your nose will keep your stomach empty and prevent nausea and vomiting
- An intravenous (IV) tube in at least one vein to give you fluids
- You may have a tube in your right side to drain bile into a bag. This tube helps to keep your bile flowing to prevent jaundice and allows you to heal inside.
- Other wound drains that help to check the conditions adjacent to the many suture lines
- You will have a dressing over the incision on your abdomen. It will be removed after 24 hours



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- Another tube may be present for freely purpose.
 - All these tubes are temporay removed after next few days.

Pain:

- Pain medication will be ordered by your doctor to help you with any discomfort.
- There may a catheter in your back for continous pain relief
- Make sure you let your nurse know if you are having any pain or if the pain medicine is not working.
- It is important to your recovery to use the pain medicine to assist you in getting out of bed and doing the breathing exercises.

Activity:

- Usually on the next day after surgery, you will be helped out of bed by the nursing staff.
- You may sit in a chair for a short time and take a little walk.
- Your nurse will ask you to breathe deeply and cough and use a breathing machine (incentive spirometer) to help you clear your lungs to prevent any breathing problems.
- Your activity will progress each day until you are walking by yourself.
- Walking is strongly encouraged to increase your strength, prevent breathing problems, and help the return of normal bowel activity.



Wound and tube care:

- If present, the bile tube on your right side will be capped so that the bile will flow inside again to help with the digestion of your food. This bile tube is left in place for about 4 weeks after surgery.
- The wound drains will be removed before you go home.

What I need to do after I get discharged?

Diet:

- Start with a soft diet and gradually go back to eating the same as before your surgery.
- If diet needs to be changed, a dietician will visit and advise you.

Medications:

- Take medication as advised by your doctor.
- If any medicines such as insulin is needed, your nurse will teach you how to take them

Activity:

- You may resume normal activity as soon as you are able.
- You may climb stairs and ride in a car.
- Your surgeon will tell you when you can drive again.



Personal hygiene:

- You may bathe and shower without fear of hurting yourself or the operative wounds in any way

Incision drains and bile tube care:

- Sutures are usually removed in the clinic 2-3 weeks from the day of surgery.
- Your nurse will tell you how to look after your bile tube and give you any other special instructions.
- Do not permit tubes to be kicked out or accidentally pulled out

Call your doctor or go to the Emergency Department:

- If bile is not draining
- If your skin turns yellow
- If you have pain that is not controlled by your pain medicines
- If you have any of the following signs of infection:
 1. Temperature greater than 100F, for more than 24 hours

[REDACTED]

2. Swelling, tenderness, redness or opening of the suture line, or any unusual drainage from your suture line or wound drain sites

3. Nausea, vomiting or shaking / shivering (chills).

Follow-up care:

It is important that you keep your clinic appointment in order that the doctor can monitor your progress by questioning /examining or ordering tests.

For more details please contact:

B1 ward	Emergency Room
Aga Khan University Hospital	Aga Khan University Hospital
Karachi.	Karachi.
Phone : 4930051, Ext : 2190-91	Phone : 4930051, Ext : 1090-91

