

**Todd P. W. McMullen, MD, PhD, FRCSC, FACS**

Endocrine and General Surgery

2D Walter Mackenzie Health Sciences Centre

8440 – 112 Street NW, Edmonton, AB T6G 2B7

Tel: 780.407.1108

Fax: 780.407.2729

## ***Laparoscopic Adrenalectomy/Open Adrenalectomy***

### ***What to Expect After Surgery***

#### **What should I expect after my surgery?**

- Your recovery will depend on the why you had surgery, the type of surgery, and your previous activity level.
- Most people need about 3 – 6 weeks or more before feeling like they are back to normal. Recovery will be shorter for those undergoing laparoscopic adrenalectomy (several small incisions) and longer for those undergoing open adrenalectomy (one longer incision).
- If you had a laparoscopic procedure, you **may experience shoulder pain** after surgery. This should resolve fairly quickly, but may last for 2 – 3 weeks.
- It is not unusual to experience a decrease in your appetite, tiredness, or poor sleep during this timeframe.
- Your scar will be most visible for the first 1 – 2 months after surgery, improve significantly over 2 – 3 months, and gradually fade over the next 6 – 9 months.
- You may feel a **firm healing ridge** directly under the incision. This is normal and will soften over time.
- All incisions are *sensitive to sunlight*. You should use sunscreen when the incision is exposed to sunlight.
- We recommend that you **not expose** the incision to ultraviolet lights used in tanning salons.

#### **How will I manage my pain at home?**

- NSAIDs (non-steroidal anti-inflammatory drugs) such as ibuprofen (Motrin, Advil), naproxen (Naprosyn, Aleve) or acetaminophen (Tylenol) are most helpful for pain experienced after surgery.
- To **prevent overdosing on acetaminophen**, do not take it at the same time as a combination narcotic medication that contains acetaminophen, like *Tylenol #3 with codeine* or *Tramacet*. However, you may take them 4 – 6 hours apart.
- A prescription for stronger pain medications or narcotics (such as *Tylenol #3 with codeine* or *Tramacet*) will be given to you. This medication will be tapered off over the next couple of weeks as you recover. **Do NOT drive a car or drink alcohol** while taking these medications.
- Narcotics can cause **constipation**. Stool softeners (Colace), fiber (fruits, bran, vegetables), and extra fluid intake may help. A stimulant laxative (Milk of Magnesia, Senokot) may be needed as well.

#### **How do I care for my incision?**

- Your incision site(s) may be sensitive, so wearing loose clothing may be more comfortable. Avoid wearing tight restrictive clothing.
- **If you had a laparoscopic procedure**, you may remove your plastic dressing 2 – 3 days after surgery. Under the plastic dressing, you may have strips of tape (“steri-strips”); leave them in place until they begin to fall off naturally. If they become discolored or messy, you may remove them 7 – 10 days after surgery.
- **If staples were used to close your incision**, leave them in place. They will be removed by your home care nurse or in the clinic during a follow-up visit. They are usually removed 7 – 14 days after surgery.
- Unless instructed otherwise, after 48 hours you may gently wash your incision with soap and water using a clean cloth. Use a clean towel afterward and gently pat the incision to dry.
- You may shower but do not take a bath or get in a hot tub or swimming pool until your surgeon tells you it is okay to do so.
- Do NOT apply ointments or powders to your incision(s) unless directed to do so by your doctor.
- Avoid smoking. It prevents proper wound healing.

#### **Can I resume my previous medications?**

- Yes, unless directed not to by your doctor.
- **Before discharge, be sure to review your previous medications with your doctor or inpatient medical team.**

### **Are there any diet restrictions?**

- No. Always eat a well-balanced diet, unless directed otherwise by your physician.
- You may find your appetite is decreased at first, but it will improve as you recover. You may find eating smaller frequent meals will maintain your nutrition status.
- Make sure to *stay well hydrated*.
- Nutritional supplements such as Boost or Ensure may also be used to increase caloric intake.

### **What new medications might I need at home?**

- If you have had both adrenal glands removed, or if your remaining adrenal gland is not expected to function properly, you may receive steroids (hydrocortisone and/or flornidol) to replace the hormones previously made by your adrenal gland(s). It is mandatory that you **never stop taking these** because the medication may be essential for life depending on the procedure performed. You need to **contact your doctor before changing or omitting a dose**.
- You may need to purchase a medic alert bracelet stating "I have had an adrenalectomy. In case of emergency hydrocortisone may be lifesaving". You may enroll in Medic Alert by phone: 1-800-668-1507 or you can check the Medic Alert web page for ordering information.: <http://www.medicalert.ca>
- *Inform all health care providers of your operation*, especially in case of injury or surgery.
- Carry extra doses of hydrocortisone with you for emergency use, especially when you travel.

### **When can I resume normal activities?**

- Walk as much as possible. Gradually increase the length of time and the distance that you walk.
- You may climb stairs.
- Do not drive until you are no longer taking narcotics and your activity level is back to normal.
- Do not lift, pull or push anything greater than 10 pounds (10 pounds = about a gallon of milk) for 1 - 2 weeks or as directed by your physician.
- Avoid activities that would make you tense or strain your abdominal muscles for 4 weeks or as directed by your physician. These activities may include twisting or vacuuming.
- You may resume all other normal activities as soon as you feel up to it.
- You may return to work in 2 weeks or sooner if desired. *Contact Dr. McMullen's office if you need employer or insurance forms completed*. Please note that **there will be a charge for completion of these forms**, as this service is not covered by Alberta Healthcare. The office will be able to advise you on the cost for this service.

### **When do I call for advice?**

- Most patients have no problems after surgery, but if you are concerned, please do not hesitate to call us.
- If your temperature goes above 100.5°F or 38°C.
- If you have difficulty breathing or note yellow sputum production when you cough.
- If your incision becomes red or begins to drain fluid.
- If you have difficulty urinating and feel like you aren't emptying your bladder fully.
- If you begin feeling worse several days after surgery rather than better.
- If you are discharged with a drain and suddenly have a lot more drainage.
- If you are unable to eat or drink, have ongoing nausea or vomiting, or your abdomen becomes significantly distended and you can't pass gas or have a bowel movement.
- If you experience extreme fatigue, weakness, weight loss, dizziness, muscle cramps, or faint.

### **Follow-up visit:**

- Please *call Dr. McMullen's office* once you are discharged from the hospital to book your postoperative followup appointment, which will be 4 - 6 weeks after your surgery. Be aware that our clinics book up quickly, **so please arrange this promptly**.
- If blood tests have been requested at the time of your return visit, please remember to get these done within the week before your appointment.

***If you have questions or concerns, you may email Dr. McMullen at [todd.mcmullen@ualberta.ca](mailto:todd.mcmullen@ualberta.ca) or call our office Monday - Friday, 9am to 4pm, at 780-407-1108***