

## PleurX Drain

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Royal Hospital for Women

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### What is ascites?

Ascites is the collection of fluid in the space around the organs in the abdomen (tummy). There is normally a small amount of fluid present that is continuously being produced and reabsorbed by the body. However, certain illnesses such as ovarian cancers lead to too much of this fluid that the body is unable to fully reabsorb. In some circumstances, the fluid may also move into the chest and surround the lungs.

### What are the symptoms of ascites?

People with ascites may experience some of the following symptoms:

- Swollen abdomen
- Weight gain
- Sense of fullness or bloating
- Abdominal pain
- Shortness of breath
- Nausea and/or vomiting
- Indigestion
- Poor appetite
- Tiredness
- Reduced mobility

People with fluid surrounding the lungs may also experience:

- Chest pain
- Dry, non-productive cough
- Inability to breathe easily unless sitting/standing up straight

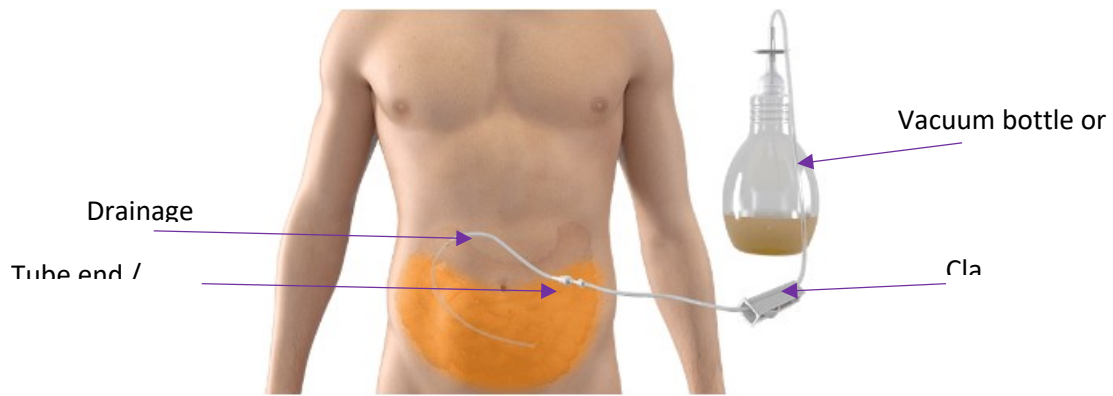
A doctor may examine you and ask about your recent symptoms. Some tests may be performed such as an ultrasound scan or a CT scan to help see if, or how much fluid has collected in the abdomen.

### **PleurX Drain.**

In situations where the fluid in the abdomen or chest continues to re-accumulate despite drainage, or does not improve with other medical treatments, a doctor may recommend a *PleurX* drain. This procedure is usually done as an outpatient in medical imaging.

A *PleurX* drain involves the insertion of a thin tube into the body at the site of fluid build-up. The end of the tube stays outside of the body, but hidden underneath an adhesive dressing. The end of the tube is able to be connected to a vacuum bottle or bag as needed, allowing for repeated quick drainage.

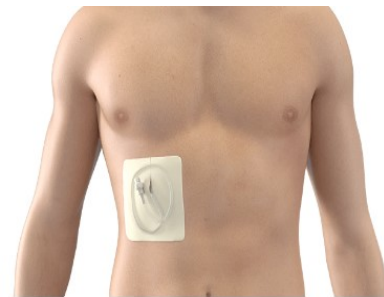
Having the *PleurX* tube in means that you may be able to manage the fluid at home or in the outpatient setting and not need admission to hospital.



Prior to insertion of the *PleurX* drain, blood tests are required. It is very important to inform your nurse or doctor if you take any blood thinning medications.

On the day of insertion, an ultrasound will be performed to decide the best placement for the drainage tube. The area will then be injected with local anaesthetic. Once the area is numb, the doctor will insert the tube underneath the skin and connect it via a valve to a vacuum bottle or bag for drainage. Once the fluid has drained, the bottle will be disconnected and external part of the tubing and valve fixed to the outside of your body with an adhesive dressing. This valve on the end of the tubing is 1-way, so it lets fluid out but does not let air in.

During the procedure and for a short time after a nurse will be on you. Your blood pressure and other observations will be checked regularly. When finished, you will be discharged home with further education on how to care for the drain. In some cases you may be able to manage this independently, or with family or support.



check  
with  
your  
carer

Drain the fluid as and change the dressing as directed by your doctor or nurse. Always change your dressing as soon as possible if it is loose, wet or dirty.

It is important you are aware of which hospital will be managing the *PleurX* drain and providing supplies such as vacuum bottles or bags once you leave. This may or may not be your regular healthcare team who organised the insertion. Often it is a community, or palliative nursing care team.

[Useful link: BD PleurX Patient Education – Draining Fluids and Changing a Dressing](https://www.youtube.com/watch?v=VMr11BXbip4)  
<https://www.youtube.com/watch?v=VMr11BXbip4>

Check on your PleurX drain and the surrounding skin every day.  
If you have any concerns call your hospital or clinic nurse for advice.

Some problems to look out for include:

- Monitor your drain site for excess fluid leakage,
- Redness, heat or pain at the drain site
- Monitor for fevers (38c or higher)
- Shaking or chills
- Trouble breathing
- Increased pain in your abdomen
- Feeling dizzy, lightheaded or fainting.

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