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Patient information

Branchial Cyst

Ear Nose and Throat Directorate

Your consultant / doctor have advised that you have removal of branchial cyst. For this procedure you will need to be in hospital for one night.

### **What is branchial cyst?**

It is a collection of fluid causing a swelling in your neck.

### **What are the benefits of having removal of branchial cyst?**

The consultant will be able to remove the swelling and prevent recurring infections.

### **Are there any alternative available?**

The alternative would be to watch and wait.

### **What will happen if I decide not to have treatment?**

The doctors may monitor the swelling from time to time if they are happy the swelling is non-cancerous.

Branchial cysts may get bigger over time and can become infected.

The doctor may discharge you with advice. If the swelling increases you will need to be re-referred by your family doctor (GP).

### **What are the risks of having removal of branchial cyst?**

- **Infection**

This is a problem that can occur to all wounds and can increase the time it takes to heal. You will need antibiotics if this happens.

- **Bleeding / bruising**

A drain from your wound will help to reduce this but some bruising around the face and neck region is unavoidable. You will be sat up in bed on return to the ward to reduce the risk of this.

- **Recurrence**

The cyst may re-occur requiring further surgery

- **Scar**

You will have a scar, this will look red but will fade over the next few months, and when the stiches are removed you should massage a small amount of moisturising cream into it two to three times a day, which will assist healing. Some people produce a Keloid scar (raised highly coloured) this is due to their skin type; it is unpredictable before surgery but may be treatable at a later date. You will need to protect your scar from direct sunlight; it is advisable to use a total sun block for six months after surgery.

- **Nerve damage**

There is a very small risk of temporary or permanent damage to some nerves in the area where the cyst is situated. Damage may result in a drop to the shoulder on the affected side, weakness of the tongue on the affected side, weakness of the lip on the affected side and weakness of your voice. Every care is taken for these nerves to be kept intact. Numbness of the skin around the scar is common with any operation and usually resolves over time.

- **Neck stiffness**

You should move your head within your limits to prevent neck stiffness.

There may also be risks or complications relevant to your particular case, the surgeon will discuss these implications with you before surgery.

**If you are worried about any of these risks, please speak to your Consultant or a member of their team.**

### **What sort of anaesthetic will be given to me?**

You will be given a general anaesthetic. General anaesthesia is drug-induced unconsciousness: it is always provided by an anaesthetist, who is a doctor with specialist training.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain.

Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

For more information, please ask for a copy of the leaflet **“You and Your Anaesthetic”** (PIF 344).

You will be given an opportunity to discuss anaesthetic options and risks with your anaesthetist before your surgery.

**If you are worried about any of these risks, please speak to your Consultant or a member of their team.**

## **Getting ready for your operation**

- You will be seen in the pre-assessment clinic before you are admitted to hospital. Here you may have blood tests and a heart trace (ECG) if required. You will be assessed to see if you are fit for an anaesthetic.
- The nurse practitioner will ask routine questions about your health, the medicine you take at the moment and any allergies you may have.
- You should not eat or drink for at least six hours before your operation as per admission letter.
- You will be asked to sign a consent form to say that you understand the procedure, and what the operation involves. You will be able to discuss the operation with the nurse practitioner.

## **The day of your operation**

- You will come into hospital on the day of your operation.
- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safekeeping. General Office is open between 8.30 and 4.30 Monday to Friday. Therefore, if you are discharged outside these times we will not be able to return your property until General Office is open. The Trust does not accept responsibility for items not handed in for safekeeping.
- You will be asked to remove jewellery, wedding rings will be taped.
- Please leave body piercing at home and acrylic nails will need to be removed.

- If you are on regular medication you will be advised as to whether you should take it.
- You will be asked to put on a gown and disposable underwear.
- A bracelet with your personal details will be attached to your wrist.
- You may be prescribed some medication to take before your operation by the anaesthetist; a member of the nursing staff will give this to you.
- A porter will take you to the operating theatre.
- Your dentures, glasses and hearing aid can stay with you on your journey to the operating theatre.
- When you arrive in the waiting area, a theatre nurse will check your details with you: you will then be asked to put on a disposable hat.
- You will then be taken to the anaesthetic room.

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

- After your operation you will be kept in the recovery room before being transferred to the ward.
- A nurse will check your pulse, blood pressure, breathing and wound regularly.
- You may have a drip in your hand or arm with some fluids running through.
- If you feel any pain it is important that you tell the nursing staff, they will give you painkillers to help.

- You may have a drain in your neck: this is to take away excess fluid/blood from your wound. To assist with drainage you will be asked to lie in an upright position. The drain will be removed at the direction of the doctor before you are discharged.
- You may experience some neck stiffness, this will resolve as the swelling in your neck reduces. Try to move your neck gently rather than keeping it still, this will reduce stiffness.
- The nursing staff will advise you when to start taking sips of water. Anaesthetic drugs can sometimes make you feel sick, it is best to wait until this feeling has passed before you start to drink. The nursing staff may offer you an injection to take the sick feeling away.

**The first time you get out of bed please ask a nurse to accompany you, as you may feel dizzy.**

## **Going Home**

Your doctor will discharge you when your drain is removed. If you have a venflon (plastic tube) in your arm/hand, this will be taken out before you go home.

- Do not smoke for at least two weeks after your operation, as this will affect the healing process.
- Different surgeons have differing preferences to wound closure materials. You will be advised to go to your practice nurse or walk-in centre for removal of your stitches five to seven days post operation if this is necessary. If this is not possible a district nurse will be organised.
- Avoid strenuous activity and heavy lifting for a few weeks.

## **Pain relief and medication**

The nursing staff will organise any necessary medication that has been prescribed for you to take home. It is important that you take these as directed: any repeat prescriptions can be obtained from your family doctor (GP).

## **Getting back to normal**

It is normal to feel more tired than usual for up to a week after your operation, if you are a parent or a carer you will need some support during this time.

It is important that you eat and drink normally.

## **Your wound**

Ensure your wound site is kept clean and dry. Avoid the use of makeup and perfumed creams.

After the stitches have been removed gently massage your scar with a non-perfumed moisturising cream two or three times a day until the scar settles.

## **Returning to work**

You can self certify for the first seven days of sickness, after this a medical certificate (fit note) may be issued by the hospital doctor to cover the expected time you will need after discharge. This is normally two weeks but will depend on your occupation.

## **Further Appointments**

An outpatient appointment will be arranged and sent out to you.



## **Further Information**

**If you have any further questions, or require further information, please contact:**

**ENT Nurse Practitioners:**

**Helene Bryant/ Sue Bragan**

**Tel: 0151 706 2290**

**Text phone number: 18001 0151 706 2290**

**NHS 111 Service**

**Tel: 111**

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**Patient Notes**

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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