

PATIENT INFORMATION SHEET

ABOUT YOUR ANAESTHETIC

A. TYPES OF ANAESTHETIC

You will be having either a General anaesthetic, a Local anaesthetic or a combination. You will be informed which type prior to surgery

General

A general anaesthetic is a mixture of drugs to keep you unconscious and pain free during an operation. During the operation different drugs will be given at particular times for a specific purpose.

Drugs are injected into the bloodstream via a vein and/or breathed in as gases or vapours into the lungs. A breathing tube may be put into your throat or windpipe to help you breathe while under the anaesthetic. The tube is removed as you wake up after surgery.

Local

You may be able to stay awake during a major operation under local anaesthetic. Sedation can be given if you wish. Local anaesthetic includes epidural and spinal anaesthetic. This is the injection of local anaesthetic drugs, sometimes a pain killer, into the back to numb a large part of the body. These techniques are used to relieve pain during the operation, and/or for pain relief afterwards.

Local anaesthetic can also be used to numb small areas such as the site of the operation, or as nerve blocks to numb a larger area for surgery such as the chest, abdomen, legs and eyes. Local anaesthetic may be also be combined with general anaesthesia.

B. RISKS FROM THE ANAESTHETIC

Modern anaesthesia is generally very safe. The risk of a healthy person dying unexpectedly during anaesthesia is less than the risk of dying in a car accident. However, risks do exist. Whilst these events are usually temporary, some of them may cause long-term problems.

Common unwanted side effects

- Nausea or vomiting.
- Headache.
- Pain and/or bruising at injection sites.
- Sore or dry throat and lips.
- Blurred or double vision.

Less common unwanted side effects

- Muscle aches and pains.
- Weakness.
- Mild allergic reaction - itching or rash.

Uncommon and unwanted effects

- Awareness under general anaesthetic.
- Damage to teeth, dental prosthetics and lips.
- Damage to the voice box and chords, which may cause temporary loss of voice.
- Allergic reactions and/or asthma.
- Blood clot in the leg.
- Damage to nerves and pressure areas.
- Epileptic seizure.

Rare risks which may cause death

- Severe allergy or shock.
- Very high temperature.
- Stroke or heart attack.
- Vomit in the lungs (pneumonia).
- Paralysis.
- Blood clot in the lungs.
- Brain injury.

Increased risks

Risks are increased in elderly patients and by:

- A bad cold or flu, asthma or other chest disease.
- Smoking.
- Being overweight.
- Diabetes.
- Heart disease.
- Kidney disease.
- High blood pressure.
- Other serious medical conditions.

Risks of a local anaesthetic

Nerve damage, due to bleeding, infection or other causes, is an additional specific risk with local anaesthesia. This may cause weakness and/ or numbness of the body part that the nerve goes to. This is usually mild and temporary.

Additional specific risks with spinal and epidural anaesthesia are:

- (a) Rarely, nerve damage, which may be severe and permanent. This may cause paralysis of the lower half of the body (paraplegia) or all of the body (quadriplegia).

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- (b) Rarely, damage to surrounding structures (eg blood vessels, lungs).
- (c) Headache. Usually temporary but may be severe and can last many days.
- (d) Backache. This is usually temporary due to bruising around the injection site. Rarely it can be long-term.

C. MY RESPONSIBILITIES BEFORE SURGERY

You are at less risk from anaesthetic if you do the following:

Increase your fitness before your surgery to improve your blood circulation and lung health.

Give up smoking at least 6 weeks before your surgery to give your lungs and heart a chance to improve. You need to let the surgeon and anaesthetist know if you smoke.

Bring all your prescribed drugs and herbal drugs and show your surgeon and anaesthetist what you are taking. Tell them about any allergies or side effects you may have.

Drink less alcohol as alcohol may affect the anaesthetic drugs from working properly. Do not drink any alcohol 24 hours before surgery.

Stop taking recreational drugs before surgery as these may affect the anaesthetic. If you have a drug addiction please tell your surgeon and anaesthetist.

If you take aspirin ask your surgeon and anaesthetist if you should stop taking it before surgery as it may affect your blood clotting.

If you are on the contraceptive pill let the surgeon and anaesthetist know.

You must tell the hospital doctor and the anaesthetist of any:

- Health problems.
- Infectious diseases.
- Past operations.
- Serious illnesses.
- False teeth, caps, loose teeth or other dental problems.
- Any medical problems needing regular treatment or a stay in hospital.

Do not eat, drink, chew gum or lollies before your procedure. You will be told when to have your last meal and drink.

This is to make sure your stomach is empty so that if you vomit under the anaesthetic, there will be nothing to go into your lungs.

D. RECOVERING FROM SURGERY

The anaesthetist will arrange pain relief, any other medications and extra fluids by a drip if needed.

After the operation, the nursing staff will watch you closely until you are fully conscious.

You will then be returned to the ward or Day Procedure Area where you will rest until you are recovered enough to go home.

Tell the nurse if you have any side effects from the anaesthetic, such as headache, nausea, or vomiting. The nurse will be able to give you some medication to help.

E. THINGS TO AVOID AFTER A GENERAL ANAESTHETIC

A general anaesthetic will affect your judgement for about 24 hours. During this time you must not:

- Drive any type of vehicle.
- Operate machinery including cooking implements.
- Make important decisions or sign a legal document.
- Drink alcohol, take other mind-altering substances, or smoke. They may react with the anaesthetic drugs.