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Thoracoscopic Sympathectomy

Information Sheet

What is Thoracoscopic Sympathectomy?

Thoracoscopic sympathectomy is an operation to divide a nerve inside the chest. This nerve is responsible for causing sweating in the arms, head and neck.

What does the surgery involve?

Two small incisions are made in the armpit, through which two small tubes are placed to gain access to the inside of the chest cavity. Some gas is pumped in to enable the nerve to be seen inside the chest. The nerve is treated by either clipping it or dividing it. The tubes are then removed and the skin wounds closed. The operation takes approximately fifteen minutes.

What are the benefits?

The operation is extremely successful at stopping sweating of the palms of the hands, face, neck and scalp (approximately 98% of patients will obtain complete relief of sweating in these areas). It is also used to treat excessive sweating in the armpits, for which over 70% of people will obtain relief of symptoms. It can also be effective for facial blushing. Approximately 80% of patients gain relief of blushing.

What are the risks?

This is an extremely safe operation. A very small number of patients (less than 1%) will develop a small pupil and slightly lower eyelid on the side of the operation. If this occurs, the problem will sometimes correct itself over time, but if not, there is a simple operation to raise the eyebrow once again. The size of the pupil has no effect on the function of the eye.

Very occasionally, (less than 1% of operations) a small tube will need to be inserted into the chest cavity to drain some residual gas. This will usually stay for a few hours only.

Are there any side effects of the operation?

The principle side effect is of increased sweating over the rest of the body. This is rare and never troublesome in patients who have had only one side treated. In patients who undergo treatment on both sides, excessive sweating of the rest of the body is seen in a significant number of patients, although it is rare for it to be troublesome.

Are there any alternatives?

Alternative treatments for excessive sweating of the palms of the hands and armpit can be treated using Aluminium Oxide Hexahydrate (Driclor). Iontophoresis (passing an electric current through the affected area using a special machine) is another treatment which can be tried and is sometimes effective, although the long term results are less satisfactory.

How long will I be in hospital?

The operation is usually carried out as a day case, but occasionally an overnight stay will be necessary.

What happens before the operation?

Prior to admission you may need to have a pre-operative assessment to make sure you are fully prepared for your admission, treatment and discharge. The pre-operative assessment nurses will help you with any worries or concerns that you have and will give you advice on any preparation needed for your surgery.

You must **stop** eating food and milk products at least **six hours** before your operation, and stop drinking fluids **four hours** before. If your stomach is not empty, there is a risk that you could vomit during the anaesthetic and inhale (breathe in to your lungs) the contents of your stomach. Small quantities of **water** can be drunk until **two hours** before your surgery. You should bath or shower before coming to hospital. If you have been prescribed any medicine to reduce acid in your stomach, it is important that you still take it on the morning of your surgery.

On admission a member of the nursing staff will welcome you. The nurses will look after you and answer any questions you may have. You will be asked to change into a theatre gown. To reduce the risk of blood clots you may be given a blood thinning injection (called Heparin) and some special socks to wear.

A nurse will go with you to the anaesthetic room and stay with you until you are asleep. A needle will be put into the back of your hand to give you the drugs to send you to sleep.

What happens after the operation?

When you wake up a drip (a tube attached to a bag of fluid) will be connected to your arm. This will be removed when you are drinking well. Your blood pressure, pulse and wounds will be monitored closely over the first few hours.

You will experience some pain from your wounds; the nurses will give you painkillers to ease your discomfort. You may also notice some pain around the shoulder blade, because this is where the operation is carried out on the inside.

Before your discharge you will be given a supply of painkillers and spare dressings. Your GP will be notified of your discharge. A follow-up appointment (usually for about six weeks) will be arranged for you, or you can arrange one yourself with Bridge Clinic if you prefer.

How much pain can I expect?

It is normal to have pain from the incisions after operation, which should subside over a few days.

How do I care for my wounds?

After the operation you may have some small plaster-like dressings over each incision. If so, these are usually removed the next day and you can then shower or bathe as normal. The incisions will probably be red and uncomfortable for 1-2 weeks and some bruising and swelling is common. The nurses will give you more detailed information about caring for your wounds before your discharge.

What activities will I be able to do after my operation?

You can return to normal physical and sexual activities when you feel comfortable and at an individual pace. Avoid heavy or strenuous activities for at least 2 weeks. You can return to work as soon as you feel well enough. This will depend on how you are feeling and the type of work that you do. Typically you will need seven to ten days off work.

You should not drive for a few days after the operation. Before driving, you should ensure that you can perform a full emergency stop, have the strength and capability to control the car and be able to respond quickly to any situation that may occur. Please be aware that driving whilst unfit may invalidate your insurance.

When should I seek help?

- Increasing pain, redness or swelling around your wounds.
- If you develop a fever above 101°F (38.5°C) or chills.
- If you experience increasing breathlessness.

Where should I seek advice or help?

The hospital, Bridge Clinic or your GP.