

Having a Trans-Jugular Liver Biopsy

This leaflet can be made available
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633

Introduction

This leaflet tells you about having a trans-jugular liver biopsy.

It explains what is involved and what the possible risks are.

It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such discussions.

If you have any questions about the procedure, please ask the doctor who has referred you or the department which is going to perform it.

What is a trans-jugular liver biopsy ?

A liver biopsy is a procedure that involves taking a tiny sample of the liver for examination under a microscope.

In most cases, a liver biopsy is taken through the skin by passing a fine needle through into the liver. A trans-jugular liver biopsy (TJLBx) is an alternative way of obtaining the liver specimen by passing the needle through the vein in the neck (jugular vein).

This method is used in patients who have abnormal clotting of the blood or fluid collecting within abdomen. This technique is to reduce the risk of bleeding after the biopsy.

Why do you need this procedure?

The doctors looking after you have decided that you need a liver biopsy to obtain more information about your liver problem.

The information gained from the biopsy will help the doctors in the treatment of your condition.

Notes

How will I get my results?

The biopsy specimens will be sent for examination.

Once the results are available, your doctors will discuss these with you.

Finally

Some of your questions should have been answered by this leaflet but remember that this is only a starting point for discussion about your treatment with the doctors looking after you.

Make sure you are satisfied that you have received enough information about the procedure.

Are there any risks?

Trans-jugular liver biopsy is a safe procedure, but as with any medical procedure there are some risks and complications that can arise. This leaflet tells you about having a trans-jugular liver biopsy. It explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such discussions. If you have any questions about the procedure, please ask the doctor who has referred you or the department which is going to perform it.

Where will the procedure take place?

In the angiography suite or theatre; this is usually located within the Radiology Department. This is similar to an operating theatre into which specialised X-ray equipment has been installed.

Who will be present during the procedure?

A team of radiographer and nurses led by a Consultant Intervention Radiologist will perform the procedure.

As the procedure happens in a theatre, all will be dressed in theatre scrubs like the one below. All members of the team will introduce themselves before the procedure.



What happens during the Procedure?

You will be asked to get undressed and put on a hospital gown.

A small cannula (thin tube) will be placed into a vein in your arm.

The procedure is performed using local anaesthetic and often sedation.

The skin at the side of the neck will be swabbed and covered with sterile towels.

The skin will be numbed with local anaesthetic.

Once the skin is numb, a small tube (catheter) is inserted into the vein at the side of the neck.

An X-ray machine is used to guide the catheter into the vein in the liver and then to guide the needle into the liver.

Usually, two to three biopsy specimens are taken.



Will it hurt?

When the local anaesthetic is injected, it will sting for a short while, but this soon wears off.

When the catheter is placed in the liver, you may get a dull ache in the right shoulder.

This will go away once the tube has been removed.

Some people feel a sharp pinch inside the abdomen as the biopsy is taken, but this will only last 1–2 seconds.

How long will it take?

Every patient is different, and it is not always easy to predict; however, expect to be in the Radiology Department for about one hour altogether.

What happens afterwards?

You will be taken back to your ward on a trolley.

Nurses on the ward will carry out routine observations, such as taking your pulse and blood pressure, to make sure that there are no problems.

You will generally stay in bed for a few hours, until you have recovered.

Assuming you are feeling well, you will probably be discharged the same day.