

RPLND

(retroperitoneal lymph node dissection)



UHN

For patients with testicular cancer who are preparing for surgery

Read this brochure to learn more about:

- What to expect before, during and after surgery
- How to take care of yourself at home
- Problems to watch for
- Who to contact in case of emergency

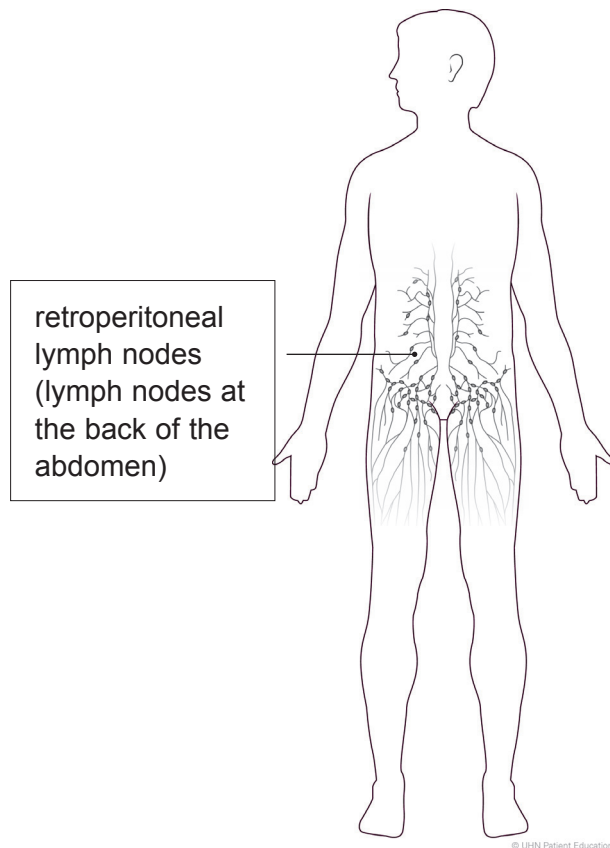
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What is retroperitoneal lymph node dissection (RPLND)?

RPLND is a surgery to remove the lymph nodes from the back of your abdomen (belly). The surgeon usually does this by making a cut from the belly button to the sternum.

The surgeon is careful to protect you from nerve damage so that you can continue to be fertile.



Why am I having this surgery?

You may have RPLND to treat testicular cancer, or another type of cancer that has spread to the lymph nodes in the back of the abdomen.

Getting ready for surgery

What happens before surgery?

You have an appointment at the Pre-admission Clinic.



We test your blood, do an ECG (electrocardiogram – a record of your heart's electrical activity), and/or a chest x-ray.



Tell the health care team know if you had Bleomycin. If you had chemotherapy with a drug like Bleomycin, you will have Pulmonary Function tests (PFTs) before your surgery to show us how well your lungs are working. (If you received Bleomycin, consider wearing a MedicAlert bracelet in case of emergency.)



You may see an anesthetist during the Pre-admission appointment. You may also see a medical doctor depending on your medical history.



We will teach you how to do deep breathing and coughing exercises and a special exercise called Incentive Spirometry. Doing these exercises after your surgery will help get air into your lungs and lower your chances of getting pneumonia.



You will meet the Urology Clinical coordinator who works with the urologists and can answer most of your questions about the surgery.

Before the surgery, you may want to consider **sperm banking**, if you have not done so already. Ask your doctor or nurse coordinator if you have questions.

Or, contact:

Mount Sinai Centre for Fertility and Reproductive Health
250 Dundas Street West – 7th floor, Toronto ON M5T 2Z5
Phone: 416 586 4748

What to do the day before my surgery

- Only drink fluids that you can see through (like apple, grape or cranberry juice, ginger ale, popsicles, Jell-o, clear broth or tea without milk).
- The evening before your surgery, give yourself a fleet enema. You can buy it at any pharmacy.
- Do not eat or drink anything after midnight the night before the surgery. **Your stomach has to be empty.** Do not chew gum or eat candy.

What to do the morning of my surgery

Arrive **2 hours** before your scheduled surgery
Toronto General Hospital, 200 Elizabeth Street
Surgical Admission Unit (SAU)
Peter Munk Building – 2nd Floor

A nurse will prepare you for surgery. We will give you an intravenous (IV) line. This is a small needle that we put in a vein in your arm. We use it to give you fluids, antibiotics and pain medicine.

What to expect after the surgery

You will wake up in the Post-Anesthetic Care Unit (PACU).

Once you are stable, we move you back to the Nursing Unit.

When you wake up, you may be attached to some or all of the following tubes:

IV

To give you fluids and medicines.



Nasogastric tube (NG tube)

This tube goes from your nose into your stomach. It drains fluid from your stomach so that you don't get bloated or feel nauseous. The tube usually stays in for 2 to 4 days. We take it out when you can pass gas.



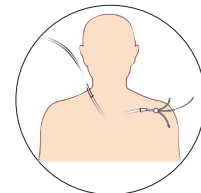
Catheter

This tube goes up your penis into your bladder to drain urine. We usually take it out 1 to 2 days after your surgery.



Central venous pressure

This tube is like an IV line but it goes into a vein in your neck. We take it out while you are still in the recovery room or on the day after your surgery, when you are in the Nursing Unit.



How will I feel?

It's normal to feel discomfort after your surgery.

You will have a large incision on your belly. To relieve the pain we will give you Patient Controlled Analgesia (PCA), which is a pump that you control yourself, or an epidural.

The pain medicine can make you feel nauseous. We will give you medicine for the nausea. You may also feel itchy. We can give you medicine to ease the itchiness.

A few days after your surgery, you will probably start to have gas pain. The best thing to do is walk to relieve the pain.

How do I take care of myself after surgery?

- Start your deep breathing and coughing exercises as soon as you wake up. Also start Incentive Spirometry, which is an exercise that we will teach you before your surgery.
- Wiggle your toes while you are in bed. This helps the blood to flow through your legs.
- Your doctor or nurse will tell you when you can start drinking and eating.
- On the day after your surgery, try to sit up and walk. Your nurse will help you.
- Take showers instead of baths. A nurse will help you shower while you are in hospital.

How long you will I stay in the hospital?

You can usually go home 5 to 7 days after your surgery.

Recovering at home

How do I take care of myself at home?

- For the first few weeks after your surgery, eat smaller amounts of food, but eat more often during the day. Eating big meals will make you feel bloated.
- You can go back to your everyday activities when you feel ready. If you are getting tired easily, listen to your body and don't push yourself.
- For the **6 weeks** after your surgery, don't lift anything heavier than 5 kilograms (10 lbs). For example, don't lift heavy grocery bags, pets or small children.

What if I am constipated?

To prevent constipation:

- Eat foods that are high in fibre such as bran, fruit and vegetables.
- Drink lots of fluids. Drink about 8 glasses of water a day (each glass should be 8 ounces).
- If you need to you can buy a mild laxative at a pharmacy without a prescription, such as Metamucil®, Prodiom or Milk of Magnesia.

Call the 6A West Nursing Unit if you have:

- A fever (temperature over 38 °C or 101 °F) and/or you feel chills
- Redness or pain at your incision site



Go to the emergency department if you have pain, redness or swelling in your calf or leg

Your follow-up visit

You will see your doctor 1 month after your surgery. Your appointment will be at the Princess Margaret Hospital Testes Clinic. Men with testicular cancer need regular follow-up visits with their doctor. Your doctor will talk to you about this.

How to contact us

Dr. Finelli	416 946 2851
Dr. Fleshner	416 946 2989
Dr. Hamilton	416 946 2909
Dr. Jewett	416 946 2909
Dr. Kulkarni	416 946 2246
6A West Nursing Unit	416 340 3521
Urology Clinical Coordinator, Leah Jamnicky	416 340 4666