Splenectomy (Elective)

The spleen is an organ in the upper left part of the belly (abdomen). It filters old blood cells and bacteria. It also helps the body fight infection.

- There can be many different types of problems with the spleen. Some of these problems are cysts, tumors, cancer, immune diseases, certain anemias, and injury to the spleen (car accident, fall or trauma to the belly). Sometimes taking the spleen out can help these conditions.
- Problems with the spleen are diagnosed by physical exam, blood tests, and imaging tests.

What is done before surgery?

- Your child will need to have 3 important vaccines 2 weeks before surgery:
  - pneumovax for pneumococcal infections
  - vaccine for meningococcal infections
  - vaccine for Haemophilus influenza type B
- Your child will have an intravenous (IV) line before surgery to get fluids and possibly antibiotics.
- Your child will not be able to eat or drink for several hours before surgery.

Call the Surgery Team night or day if your child has any of the following symptoms:

- The redness around the incision gets worse.
- The incision has more cloudy or bloody drainage.
- The pain is getting worse. Or the pain medicine is not working.
- Your child has signs or symptoms of re-bleeding:
  - abdominal pain
  - shortness of breath
  - dizziness
  - fast pulse

Note: Call the General Surgery Office 314.454.6022 during office hours. If after hours (nights, weekends, and holidays) call 314.454.6000 and ask for the Surgery Resident on-call to be paged.

Call your child’s regular doctor if:

- Signs or symptoms of an infection. Your child may need to take antibiotics and have blood tests done. Signs of an infection include:
  - a fever of 100.4 °F (38°C)
  - shaking chills
  - cough
  - aching muscles
  - headache
  - vomiting
  - diarrhea
  - abdominal pain
  - increased redness around the incision site(s)

This handout is for your general information only. The lists above are guidelines and do not include all symptoms. This document is not a substitute for your child being seen by a doctor. Always call your child’s doctor if you have any questions or problems. If your child’s condition gets worse, call your child’s doctor or go to the emergency department.
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What happens during and after surgery?

- Surgery is done under general anesthesia which means your child is asleep and doesn't feel any pain.

- The surgery can be done through three or four tiny incisions in the belly button and the abdomen (laparoscopic). If the surgery is done laparoscopically, your child may have shoulder pain in addition to the pain at the surgery site. If the spleen is enlarged or if the surgery is an emergency, an open surgery will be done. Your child will have one incision in the abdomen.

- Your child will receive antibiotics and IV fluids during and after surgery. Your child will also get pain medicine after surgery.

- Your child will then go to the recovery room. After your child is stable in the recovery room, someone will come to get you and bring you to your child.

- Your child will be watched very closely for signs of bleeding or infection.

- Your child may need to take antibiotics every day to help the body fight infection.

Pain Management

- Your child may be given several medicines to help control his/her pain. Some medicines are to be taken “as needed,” while others will be scheduled to be given at specific times. It is important that your child take the medications as directed. Your child should not take ibuprofen (Motrin®, Advil®) for pain since these medicines can increase the risk of bleeding.

- Constipation is a main side effect of some pain medicines. Your child may need to take a stool softener as prescribed.

Activity

- Your child should only participate in quiet activities for the first few days after going home. Your child does not need to stay in bed but should walk and play quietly. He/she should not play rough with anyone including pets.

- Your child may return to school after going home from the hospital as directed.

- Your child should not participate in any activities or sports that involve jumping, climbing, or running for some time. Your child may return to gym, recess and other activities as instructed by your child's surgeon.
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Care for the Incision

- Dissolvable sutures are used to close the incision. They will dissolve in a few weeks.
- There may be a clear or gauze bandage over the surgery site. You will be told when the bandage can be taken off. Under the bandage the incision area may also be covered with steri-strips (small pieces of tape). After 7 to 10 days the steri-strips may be taken off if they have not already fallen off.
- Your child may take a shower 2 days after the surgery.
- Your child may not sit in water until instructed by your child's surgeon.
- An appointment will be made for your child to follow up with the surgeon in his office.

What You Can Do to Help Your Child:

- Try to keep him/her away from people with any infection. Since your child's spleen was removed, his/her body will have a harder time fighting infection. Wash your hands and your child's hands often with soap and warm water to prevent spreading infections.
- Tell your child's dentist and doctors that your child does not have a spleen before any procedures are done.
- Tell all teachers and caregivers the signs and symptoms of infection. Have them notify you immediately of any of these symptoms as listed below. An infection can become serious very fast in a child without a spleen.

For General Health Information and Resources:
Call or visit the Family Resource Center, a health information library on the 3rd floor of the hospital. Call 314.454.2350, email at frc@bjc.org, or check out the FREE St. Louis Children's Hospital Kid Care App.