

Pleurodesis

A pleurodesis is a procedure that uses medicines to glue your lung to your chest wall. This is done to stop fluid or air from building up around your lungs causing the lungs to collapse. Medicines (doxycycline or talc powder) are put into the space between your lung and chest wall. This causes irritation between the two layers which helps the lung stick to the wall of the chest.

When it is done in your hospital room, the doctors will put doxycycline or talc in your chest tube, which was placed to help your lung expand. The chest tube is then clamped or hung from a pole to make sure that the medicine stays in your chest. You will be asked to change your position every 30 minutes for about two hours. This helps move the medicine around inside your chest cavity.

You will have pain with this procedure. The pain is the irritation that will help stick your lung to your chest wall you will be given a PCA (Patient Controlled Analgesia) it allows you to give your own medicine to help relieve pain. Your nurse will check your breathing and heart rate often.

If done in the operating room, the medicines can be put right on your lung while you are in surgery. You will be asleep during this procedure and will not need to change positions.

In either case (done in the room or in the operating room) a chest tube will remain in place and on suction at all times for at least 48 hours. The nurses will order a small portable suction machine to use when walking in the hall. Suction on the chest tube will make sure your lung sticks to your chest wall. You will have a daily chest x-ray to check your progress.

In the Hospital

It is very important to exercise the lungs to keep them open and allow them to stick to the chest wall. Things you can do in the hospital to help exercise the lungs:

- Use your incentive spirometer 10x every hour you are awake. Take a **slow** deep breath in, until you can't breathe in anymore. Try to hold for 2-3 seconds.
- **Coughing** will clear out the little air sacs in your lungs and allow them to fill with air.
- **Walking** will also help open the little air sacs in the lungs and allow the lungs to stick to the chest wall.

Incision Care

- You may have more than one small incision depending on whether you had lung surgery or just a chest tube placed for this procedure.
- After the chest tube is removed, leave the chest tube dressing in place for 48 hours. Remove the dressing on _____.
- After the chest tube dressing is removed, you may shower or wash the wound(s) daily with a mild soap. Pat them dry. **Do not** rub.
- **Do not** put lotions, powders, or ointments on the incision(s).
- **Do not** soak in a bathtub, hot tub, or go swimming until they are healed.
- Check wounds daily for:
 - Increased redness
 - Pus-like drainage
 - Excess swelling or bleeding
 - Temperature (by mouth) greater than 100.4 ° F. for two readings taken 4 hours apart

There may be a small amount of drainage from the chest tube site for a day or two. Wear a small dressing over it until the drainage stops. Change the dressing daily as needed.

Pain Relief

It is common to have pain. When you are in pain, take your pain pills as ordered. If the pain is sharp and constant or gets worse, call your doctor.

Avoid anti-inflammatory pain medicines (NSAIDs) such as ibuprofen and Motrin® for at least 14 days. You will be told if you can start taking them again after your follow up visit.

Activity

- **Do not** strain, bear down, or hold your breath during activities, such as during a bowel movement.
- **Do not** lift more than 10 pounds until your doctor says it is okay.
- **Do not** drive for 2 weeks or if you are taking narcotic pain pills.
- Check with your doctor before going back to work.

When to Call

- Signs of infection
 - Increased redness or warmth of the incision
 - Pus-like drainage
 - Excess swelling or bleeding
 - Temperature over 100.4°F (by mouth), for two readings, 4 hours apart.
- Pain not controlled with pain pills
- Fatigue or tiredness
- Body aches

If you have sudden start of sharp chest pain with shortness of breath or trouble with breathing – Call 911.

Who to Call

Surgery Clinic
Monday -Friday 8:00am – 4:30pm
(608) 263-7502

If you live out of the area, please call:
Toll Free: 1-800-323-8942.

After hours, weekends, holidays the paging operator will take your call **(608) 262-2122**. Ask for the thoracic surgery resident on call. Leave your name, and phone number with area code. The doctor will call you back.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 6/2022 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5847