

Splenectomy

Why do I need to have a splenectomy?

The spleen resides in the left upper quadrant of the abdomen. It has many functions, one of which is to help fight certain types of bacterial infections. Your spleen has been removed as part of your surgical procedure. You should inform your primary care physician and family members of this fact. Infection:

The overwhelming majority of patients experience no problems related to the absence of their spleen. A very small percentage of patients (<1%) may experience difficulty fighting certain types of infections, especially those caused by "encapsulated" organisms such as Streptococcus pneumoniae, Haemophilus influenzae, and Neisseria meningitidis. Extremely severe infections can lead to overwhelming post-splenectomy sepsis (OPSS). OPSS can be life threatening, and it is absolutely essential to seek immediate treatment.

What are the possible side effects of a splenectomy?

- Most serious infections related to the post-splenectomy state occur in the first two years after surgery; however, they may occur at any point in time. Symptoms of these infections include: fevers or chills, severe sore throat, unexplained cough, severe abdominal pain, or severe headache.
- You should contact your primary care physician immediately or go to an emergency room for any illness that causes you to have a temperature of 101.5 degrees Fahrenheit (as measured by a thermometer).

How should I take care of myself after my splenectomy?

Antibiotics:

Most adults are given a prescription for an antibiotic (e.g. Augmentin) capable of fighting these infections to keep at home and begin taking in the event they begin to exhibit symptoms of one of these infections. It is important to keep these prescriptions up to date. Taking this prescription is not a substitute for contacting a medical professional and seeking immediate care. Please ask your primary care physician about providing you with "standby" antibiotics in case of an emergency. If you are traveling, it is important to take antibiotics with you in case you develop an infection.

Blood work:

Your primary care physician should also periodically check your platelet count. It may increase significantly after your spleen is removed. If the platelet count increases beyond 1 million, you should be started on an aspirin a day.

Vaccinations:

Vaccinations against Pneumococcus, Haemophilus, and Meningococcus are given routinely to patients undergoing splenectomy. If you did not receive these vaccinations prior to surgery, you should be vaccinated as soon as you have recovered from your surgery. You should get a booster shot for Pneumococcus every 3-5 years. You should also get a flu shot every year.

Patients age 2-55 should receive 2 doses of meningococcal conjugate MCV4 (initial dose followed by 2nd dose 8 weeks later) and every 5 years thereafter. Patients 56 years and older should receive 1 dose of meningococcal polysaccharide (Menomune) initially and every 5 years thereafter.

Travel:

If you travel to tropical countries, take precautions to prevent malaria. Vaccinations are available for malaria. You are also more likely to get infections from dog bites, and to get babesios, an infection transmitted by deer ticks. Seek care immediately if you are bitten by a dog or if you notice a rash that forms after you are bitten by a tick.

Medical alert identification:

You are encouraged to wear a MedicAlert bracelet or necklace (available from MedicAlert Foundation International, 2323 Colorado Ave., Turlock, CA 95382; telephone: 1-800-432-5378; Web address: http://www.medicalert.org). You should also carry a card in your wallet explaining that you have had your spleen removed and any other pertinent clinical details. If you have any questions or concerns about the information in this handout, please contact us or your primary care physician.

You may call the Endocrine Surgery Clinic and ask for the endocrine surgery nurse coordinator who may be reached at 734-936-5818 Monday – Friday, 8am - 4pm. On weekends, holidays, or evenings call 734-936-6267 (hospital paging) or 734-936-4000 (main hospital number) and ask for the GSE resident on call.

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