

Preparing for your Bilateral Thoracoscopic Sympathectomy

Pre and post-operative information

Department of Thoracic Surgery



MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

Table of Contents:

What is a Bilateral Sympathectomy?.....3
 Planning for your Bilateral Sympathectomy.....3

Preparing for your Bilateral Sympathectomy.....3
 Prep.....3
 Medications.....4

Where will surgery be done?.....4

What can be expected during surgery.....4

Post-operative care.....5
 Pain management.....5
 Wound care.....6
 Activity and restrictions.....6

Contact numbers.....7

What is Bilateral Sympathectomy?

This is a surgery that is done for patients with hyperhidrosis, which is a condition characterized by abnormally increased perspiration. We generally do this surgery for perspiration of the hands, and underarms.

Planning for your Bilateral Sympathectomy:

- **Do not** take any nonsteroidal anti-inflammatory medication (i.e. Motrin, Ibuprofen, and Aleve) or Aspirin products up to 1 week prior to your surgery date.
- **Do not** smoke at least 4 weeks prior to surgery; you may be tested the day of your surgery to make sure you have not been smoking. If you are smoking your surgery will be cancelled.
- **Do** make sure on the day of your surgery you need to have a driver available to take you home.
- **Do** make sure someone is able to stay with you over night, the night of surgery.

Preparing for your Bilateral Sympathectomy

- **Prep-**

There is not a special prep, besides having nothing to eat or drink after midnight the night before surgery.

- **Medications-**

Which medications to take or hold will be discussed at your pre-operative history and physical appointment. You will need to hold any blood thinners (examples Coumadin®, Plavix®). If you need to transition over to a different type of blood thinner, like Lovenox we will let you know when your last dose of this medication will be

- **Outpatient-**

This surgery is done as an outpatient, which means you will need to have someone drive you home after this surgery, as you will not be able to drive yourself home. We do not recommend that you stay home alone this first night.

Where your Bilateral Thoracoscopic Sympathectomy will be performed:

- Your surgery will be performed at the cardiovascular center. You will need to park in Parking Lot P5, and then go to the 4th floor and check in to the surgery family waiting room. The waiting room is the location that your family will also remain while you are in surgery. Generally, the surgeon will come out and speak with your family, once the surgery is done.

What can I expect during the procedure?

- From the family waiting room, you will report to the pre-operative area. You will be here about an hour and a half to two hours prior to surgery; this is where you will meet with the anesthesiologist.
- You will be under general anesthesia for this surgery.
- The length of the operation will generally be about 2 hours.
- **When you awaken from the surgery you will have 1-2 small tubes**, that if there will be placed on each side of your chest wall. It will vary if you have 1 tube, 2 tubes, or none. These tubes are used to drain secretions and air from your chest cavity, which occur as we are entering your chest. These tubes will be removed prior to you being discharged to home.

Caring for yourself after a Bilateral Thoracic Sympathectomy:

Managing My Pain:

You will be given a prescription for pain medication-**do not take it on an empty stomach**. Make sure you are able to tolerate food or milk, before you take any pain medication. It is very common to have some problems with feeling nauseated up to 24 hours after having general anesthesia. **If nausea continues after 24 hours, call the office/nurse, to see why this is continuing, and for some relief.**

Most of the discomfort that you will feel with this surgery is related to inflammation. This pain consists of burning, sensitivity to the touch, and discomfort that is generally located in the upper part of your back or chest. The sooner you start on a nonsteroidal anti-inflammatory medication (also referred to as NSAIDS), **with food**, the sooner it can help reduce the inflammation. As soon as you can tolerate food, and if you can take nonsteroidal anti-inflammatory medications (NSAIDS), start taking them even if you have no pain. We recommend starting out with Ibuprofen at 400mg (average over the counter NSAID is 200 mg so take 2 tablets) 2-3 times a day **with food**.

- Please note that once this discomfort occurs it can take up to 2-4 weeks to go away. Unfortunately, once this discomfort starts, it will need to run its course before it gets better and goes away. If you experience this kind of discomfort you may also try a heating pad or warm shower. Once your incisions are healed (generally within 7-10 days), soaking in a bathtub or hot tub may also help.
- Please call us, if you feel you need further guidance/medication with regards to this pain.

Taking Care of My Incisions:

You will have 3 incisions on each side, generally less than 1 inch in length. In the OR your incisions are closed with a dissolvable suture and/or “glue” to close the skin edges. Please do not get your incisions wet for 2 days after your surgery. After that time, you will be able to get in the shower, clean your incisions with warm soap and water daily.

- If you notice that there is a yellowish film around your incision, this is from the “glue”. To remove the glue, you may use some Vaseline or cold cream, then wash your incision with soap and water. Do not let the Vaseline or cold cream stay on your incision for any period of time.
- Look at your incisions daily. If you notice signs of redness, drainage, or swelling you need to call the doctor’s office or nurse. If your incision is in a place that you cannot see you may want to have someone look at your surgery site for you.

Activity and Restrictions:

- You will be unable to lift anything greater than 10 lbs. for the first 4-5 days (a Gallon of Milk is 9 lbs.)
- After this time, we want you to avoid any type of contact sports, for a minimum of 6 weeks.
- Activities such as walking, biking, and running are acceptable. Remember you will not be allowed to drive if you are taking a narcotic (i.e. Vicodin®, Tylenol #3®) pain medication.

Who should I contact if I have questions?

Thoracic Surgery Nurses/Clinic Number (734) 936 - 8857

For all medical questions, it is best to call the nurse/clinic first. If there is an urgent issue, call your physician's office number and state the problem.

Our office hours are Monday thru Friday from 8am-5pm

After hours or on weekends and holidays call the paging operator at (734) 936 - 6267 and ask for the General Thoracic Surgery Resident on call.

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Authors: Erin Larowe, Rishindra Reddy, M.D.

Patient Education by [Michigan Medicine](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 3.0 Unported License](#). Last Revised 04/2017