**Splenectomy**

**Why is surgery performed?**

The spleen is an organ located on the left upper quadrant of the abdomen. The spleen plays an important role in filtering old red blood cells out of the circulation, removing bacteria from the blood, and producing antibodies that help fight infection. A splenectomy is a surgical procedure that removes the spleen. There are several reasons to perform a splenectomy including hematological (blood cell) disorders and trauma.

**What are the surgical options?**

The spleen can be removed using minimally invasive techniques (laparoscopy) or open surgery. Indications for laparoscopic splenectomy are limited to surgeries that are elective (i.e. not urgent) and in cases where the spleen is small (i.e. less than 25 cm in length). Open surgery is the method of choice in cases of a large spleen or if there is trauma.

**Preoperative management**

Two weeks prior to having your surgery, you will be vaccinated against encapsulated bacteria (Haemophilus influenzae B, polyvalent Pneumococcus, and Meningococcus vaccines) in order for your body to build-up its immunity to these organisms. Normally your spleen removed these bacteria. Therefore once your spleen is removed, if you are not immunized, you will be susceptible to infection, which can become very serious.

Aside from getting vaccinated, you will also have a CT scan of your abdomen which will demonstrate the size of your spleen and help your surgeon plan the operation.

**How is surgery on the spleen performed?**

Minimally invasive or laparoscopic splenectomy involves specialized video equipment and instruments that allow a surgeon to remove the spleen through 4 – 5 tiny incisions, most of which are less than a half-centimeter in size. Traditional open surgery involves making a larger incision below your ribs on the left side. On the day of surgery, IV lines will be placed in your arm(s) for fluids/medications and you will be brought into the operation room. The anesthesiologist and nurses will use monitors to check your heart rate, blood pressure and breathing during the procedure. Once you are asleep, under general anesthesia, tubes will be placed in your bladder (foley catheter) and stomach (orogastric tube), and you will be positioned on your right side. The operating room team will then work together to perform your operation.

**What happens after surgery?**

When your operation is complete, you will be awakened from anesthesia in the operating room but you may not remember this. After a few hours in the recovery room, you will be transferred to your room in the hospital where your heart rate, blood pressure, temperature, urine output and bloodwork will be checked. The evening of surgery, or next day, you will be given fluids to drink, and eventually solid food. If your surgery is performed laparoscopically, you will be able to go home between day 2 –
3 after surgery. After discharge, you will require very little pain medication, and can return to work and normal activity within 1 – 2 weeks. If you have open surgery, then you will require more time in hospital to recover (i.e. 5 – 7 days) and may need more time before being able to return to normal activity / work.

**What are the potential complications of splenectomy?**

The complications of splenectomy include, (1) pneumonia, (2) fluid in the left lung space (left pleural effusions), (3) injury to other organs (e.g., stomach, pancreas), (4) bleeding or abscess formation, and (5) clotting of large veins that connect to the liver (portal vein thrombosis).

This information is not intended to replace a visit with your physician. To make an appointment with one of our surgeons, please call 614-293-3230.