

DEPARTMENT OF DIAGNOSTIC RADIOLOGY AND NUCLEAR MEDICINE

Patient Information Sheet

Biliary drainage procedure

General Indications for the Procedure: This procedure is performed for a condition known as biliary obstruction (blockage of the bile ducts). Biliary obstruction may be caused by disease conditions or surgical complications. In this condition, the bile cannot travel through the usual pathway from the liver to the intestine.

Description of the Procedure: At the beginning of the procedure, the patient will receive medication to help keep them comfortable. This medication may include sedatives given into a vein, and/or local numbing medicine injected in the skin at the site of the procedure. An Interventional Radiology (IR) doctor decides the best way to insert the biliary drainage tube (catheter), using ultrasound or CT scan pictures of the liver to identify the most suitable place for the catheter. Once the best place is identified, the area of the skin through which the procedure will be performed is cleaned with sterilizing solution. Next, using X-rays, an IR doctor places a small needle into the liver and into a bile duct. Once the needle is in the proper bile duct, a small wire is advanced into the bile duct system. The tissue along the wire is dilated, and then the catheter is placed, providing a way for the bile to drain out of the liver. The procedure lasts about 25-40 minutes. After the procedure, the patient is taken to a recovery area and observed for 1-2 hours. At the end of the procedure, the patient will have a tube coming out of either the side or the front of the abdomen.

Risks of the Procedure: The most common complications are bleeding, infection and abdominal pain. The risk of having a large amount of bleeding is low; however, if patients develop major bleeding, they may require another procedure to treat the complication.

Alternatives to the Procedure: The alternative to this procedure is to undergo endoscopic biliary drainage (through an endoscope passed through the mouth), or go to surgery to have the pressure in the biliary system relieved.

Probable Consequences of Refusing the Procedure: If the patient decides not to have the procedure performed, their condition may worsen, and the patient may need urgent care at a later time. Placement of a biliary drainage catheter may be more complicated in an emergency situation and thus more dangerous, making the patient more prone to complications.

Persons Performing the Procedure: The key portions of the procedure will be performed by an attending physician who is a member of the medical staff of Rush University Medical Center, or a Licensed Physician's Assistant, resident or fellow in Interventional Radiology who will be observed and supervised by a member of the medical staff. Residents are licensed physicians in an approved residency program. Fellows are licensed physicians who have completed a residency in radiology and are in an approved post-residency training program. Physician's Assistants are specially trained practitioners who are licensed by the State of Illinois and who are qualified to perform parts of these procedures under supervision. The parts of the procedures residents or fellows will perform will be based on their level of training and competence.