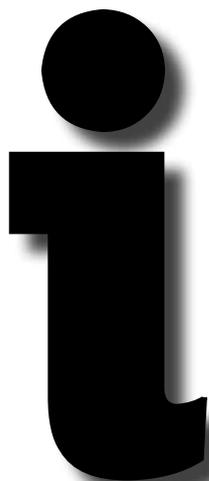


# Percutaneous Liver Biopsy (1 of 3)



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: [customercare@salisbury.nhs.uk](mailto:customercare@salisbury.nhs.uk)

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: [www.salisbury.nhs.uk/FriendsFamily](http://www.salisbury.nhs.uk/FriendsFamily) or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

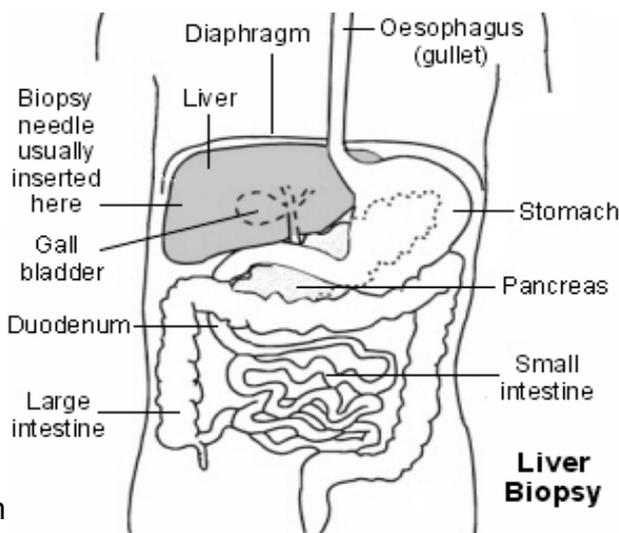
This information tells you about the procedure 'Percutaneous Liver Biopsy'. It explains what happens and the possible risks. We hope you find this leaflet helpful but you should still discuss the procedure with your doctor. Liver biopsy is usually planned well in advance and you should have the opportunity to discuss the reason for doing it and any worries you have, either with one of your own doctors or the doctor performing the biopsy. Do make sure you understand what is involved before you sign the consent form and remember that you can change your mind about having the biopsy at any time.

It is important that you inform us in advance if you are taking any medicines that affect blood clotting, such as warfarin, aspirin, apixaban, dabigatran, rivaroxaban, fondaparinux, acenocoumarol or clopidogral. If you do please contact the radiology nurses on 01722 336262 ext 4825 or 4844.

## What is a percutaneous liver biopsy?

'Percutaneous' means 'through the skin'. A 'biopsy' is the method of taking a small piece of tissue out of the body through a small puncture site. A special needle is used to do this.

The needle is put in through the skin lying over the liver on the right side of your upper abdomen and on into the liver itself.



## Why do I need a liver biopsy?

Investigations have shown an abnormality in your liver or an abnormality of its function, but it is not always possible to determine the cause or degree of these abnormalities on scans alone. The most accurate way to make the full diagnosis is to examine a sample of liver tissue under the microscope.

## Who has made the decision?

The consultant in charge of your care and the radiologist performing the biopsy will have considered your case and believe that biopsy is the best way to make the diagnosis and to plan your treatment. Your opinion will of course be taken into account and if, after talking to your doctors, you do not wish to have the procedure, then you can decide against it.

## Who will be performing the biopsy?

The biopsy will be carried out by a specially trained doctor, called a radiologist, who uses ultrasound scanning equipment to place the biopsy needle accurately into the liver.

## Where will the biopsy take place?

The procedure will take place in the Radiology Department in one of the procedure rooms. The radiology staff will try to make you as comfortable as possible.

## What do I need to do beforehand?

Before your biopsy you will have blood tests done to make sure your blood clots normally. Be sure to contact the radiology nurses in advance if you take any medicines that affect blood clotting like aspirin, warfarin, apixaban, dabigatran, rivaroxaban, fondaparinux, acenocoumarol or clopidogrel. The contact number is below.

You will be asked not to eat anything for four hours before the biopsy and not to drink anything for two hours.

Your doctor will tell you whether to take your regular medications during the fasting period and may give you other special instructions.

## What happens during a liver biopsy?

In the scan room you will be asked to lie on your back on a hospital bed with your right hand above your head. After scanning your liver to determine the best site for the biopsy, the Radiologist will clean the skin with antiseptic to avoid infection. The skin and deeper tissues will be injected with local anaesthetic which will sting briefly before the tissues go numb. The Radiologist will make a small cut, then insert the biopsy needle to take a sample of liver tissue. Ultrasound may be used to guide the needle into the exact position for biopsy.

## How long will it take?

The whole procedure takes between 15 and 20 minutes as positioning for the biopsy can take a little time. The biopsy itself however takes only a matter of seconds.

## Will it hurt?

You will feel stinging as the local anaesthetic is given and then pressure on the skin as the biopsy needle is placed. Some people also feel some momentary discomfort as the needle enters the liver. You may feel discomfort after the biopsy has been taken, either in your right shoulder or in your stomach. This is quite common and you will be offered pain killers to relieve this discomfort. Do let the nursing staff know if it does not go away.

## What happens afterwards?

After the biopsy has been taken you will be asked to lie on your right side for an hour and then on your back, but sitting up a little, for a further five hours. The nursing staff will take your pulse and blood pressure regularly. All being well, you will be allowed home after six hours. It is important that you have an adult with you on the first night after the biopsy and that you are able to return to hospital if necessary. Do not expect to get the result of the biopsy before you leave, as it always takes a few days to do all the necessary tests on the biopsy specimen.

## What are the risks and complications?

Percutaneous liver biopsy is in general a very safe procedure but some risks and complications can still arise. The most common complication is pain after the procedure, as described above, which may take several hours to settle.

Bleeding is usually minimal and of short duration, but instances of more serious bleeding can occur and this may lead to development of a large 'bruise', either in or around the liver or by leakage of blood into the abdominal cavity. If the bleeding is serious then a further radiological procedure or an operation may be needed, but this is very rare.

## Is there any alternative treatment?

There is no radiological alternative.

## Finally...

Hopefully some of your questions will have been answered by this leaflet, but remember that this is only a starting point for discussion about your treatment with the doctors looking after you. Make sure you are satisfied that you have received enough information about the procedure, before you sign the consent form.

Percutaneous biopsy is a very safe procedure, designed to save you having a larger operation. There are some slight risks and possible complications involved, but these are generally minor and do not happen very often.

## Where can I get more information?

Useful websites

[www.goingfora.org](http://www.goingfora.org)

[www.patient.co.uk](http://www.patient.co.uk)

You can also contact the Radiology Nurses on: 01722 336262 extension 2857.