



Having a Liver Biopsy

Information for Patients

This leaflet tells you about having a liver biopsy. It explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your doctor but can act as a starting point for such discussions. If you have any questions about the procedure please ask the doctor who has referred you for the test or contact a member of the radiology team who will do the biopsy on the number below.

What is a liver biopsy?

A biopsy is a way of taking a small sample of tissue out of your liver using a special needle. Liver cells can then be looked at in detail under a microscope. This may help in your diagnosis, monitoring certain conditions and treatment planning.

Why do I need a biopsy?

Other tests that you have already had performed, such as an ultrasound scan or a CT scan, may have shown that there is an area of abnormal tissue in your liver. In order to find out what this is we need to take a tiny sample to look at under a microscope.

What are the alternatives?

There is no alternative procedure that will provide the required information but there are alternatives to having the biopsy which will vary depending on your circumstances. Please contact us if you want more information about this.

What are the risks of a liver biopsy?

The most common complication is pain. 1 in 10 people complain of pain or discomfort in the area where the biopsy was taken. Bleeding risk is another significant complication. In a small number of cases there may be some bleeding from the biopsy site. This is usually minor and will stop spontaneously. 1 in 500 people have more severe bleeding which requires a blood transfusion and/or an operation to deal with it. We will keep you in the hospital for several hours after your biopsy to check for any bleeding. Overall there is a 1 in 1000 people risk of a life threatening complication including puncturing other surrounding organs.

In 1 in 50 procedures not enough tissue is obtained at the time of biopsy to make a diagnosis. This may mean the biopsy has to be repeated.

How do I prepare for the biopsy?

Your hospital doctor should have checked whether you are taking any medication which might increase your tendency to bleed after the biopsy. These include; warfarin, rivaroxiban, apixiban, clopidogrel (Plavix), or heparin injections. If you are concerned you may be on one of these medications and have not been given instructions about stopping them, please contact us now. You should take all your other medications as normal.

Your hospital doctor should also have arranged for some blood tests before your biopsy. If not, please contact us.

There is no other preparation you need.

What does the procedure involve?

You will attend hospital as instructed on your appointment letter. In the radiology department or in the ward a radiologist (specialist in performing biopsies) will explain the procedure, alternatives and risks and answer any questions that you may have. You will then sign a consent form. You will be awake throughout the procedure. Your radiologist will use an ultrasound or CT scan for guidance to locate the exact site for biopsy. The appropriate site to take the biopsy will be cleaned with antiseptic. Some local anaesthetic will be injected into the skin. The biopsy needle will be placed through the anaesthetised skin into the liver and the sample taken. Up to 3 biopsies may be taken. Your radiologist will explain what is happening during the procedure.

Will it hurt?

When the local anaesthetic is injected, it will sting for a short while, but this soon wears off. After this you should not feel any pain. If you do, please tell the radiologist

What will happen afterwards?

You will be transferred to a ward where your pulse and blood pressure will be closely monitored for around 6 hours. During some of this time you will have to lie flat in bed. You will then be discharged home with advice about what to do if you have any worries once you have gone home.

How do I get the results?

Within 2 weeks the result will be with the consultant that sent you for the biopsy. They will be in touch with you. If you have not heard after 3 weeks, please contact the doctor who sent you for the test.

Some of your questions should have been answered by this leaflet, but remember that this is only a starting point for discussion about your treatment with us in the radiology department. Make sure you are satisfied that you have received enough information about the procedure. If you wish to discuss anything further, please contact us.

Cancellation

While we make every effort to avoid this where possible, there is always a risk that your procedure may be cancelled at short notice. This is due to either emergency patients who require urgent surgery or other reasons which are beyond our control. We realise that this can cause distress and inconvenience but in the event that your procedure is postponed, you will be offered a new date as soon as possible.

Keeping your Appointment

If you cannot keep your appointment or have been given one that is unsuitable, please change it by phoning the number on your appointment letter. Your call will give someone else the chance to be seen and will help us keep waiting times to a minimum.

Public Transport and Travel Information

Bus details available from: Lothian Buses on 0131 555 6363
www.lothianbuses.co.uk

Traveline Scotland on 08712002233 or www.travelinescotland.com

Train details available from: National Rail Enquiries on 03457 484 950 or
www.nationalrail.co.uk

Patient Transport

Patient Transport will only be made available if you have a medical/clinical need. Telephone **0300 123 1236** *calls charged at local rate up to 28 days in advance to book, making sure you have your CHI Number available. Hard of hearing or speech impaired? Use text relay: **18001-0300 123 1236*** (calls charged at local rate). To cancel patient transport, telephone 0800 389 1333 (Freephone 24 hour answer service).

Interpretation and Translation

Your GP will inform us of any interpreting requirements you have before you come to hospital and we will provide an appropriate interpreter. If you are having this procedure as an existing in patient, staff will arrange interpreting support for you in advance of this procedure. This leaflet may be made available in a larger print, Braille or your community language.

Contact Information

Radiology Department, Western General Hospital, Edinburgh.

Telephone: 0131 5372052 Mon-Friday, 9am-4pm