

Division of Imaging

## Information for Patients

# Transjugular Liver Biopsy (TJLBx)

This leaflet tells you about having a transjugular 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 or the department which is going to perform it.

## What is a Transjugular Liver Biopsy?

A liver biopsy is a procedure that involves taking a tiny sample of the liver for examination under a microscope. In most cases, a liver biopsy is taken through the skin by passing a fine needle through into the liver.

A transjugular liver biopsy (TJLBx) is an alternative way of obtaining the liver sample. It is done by passing the needle through the vein in the neck (jugular vein). This method is used in patients who have abnormal clotting of the blood or fluid collecting within the abdomen. This technique is to reduce the risk of bleeding after the biopsy.

## Why do you need a TJLBx?

The doctors looking after you have decided that you need a liver biopsy to obtain more information about your liver problem. The information gained from the biopsy will help the doctors in the treatment of your condition.

## Who has made the decision?

The consultant in charge of your care and the interventional radiologist performing the procedure, have discussed your case and feel that this is the best option. however, you will also have the opportunity for your opinion to be considered and if, after discussion with your doctors, you do not want the procedure carried out, you can decide against it.

## What happens during TJLBx?

A specially trained team including radiographers and nurses led by an interventional radiologist will perform your TJLBx procedure.

- You will be asked to change into a hospital gown.
- You might be asked to remove certain items of clothing and jewellery.
- The person completing the procedure will ask you to confirm some details including date of birth and pregnancy status.

The procedure is performed using local anaesthetic and sometimes sedation. It will take place in the angiography suite which is located within the radiology department. This is similar to an operating theatre into which specialised X-ray equipment has been installed.

The skin at the side of the neck will be swabbed and covered with sterile towels. The skin will be numbed with local anaesthetic. Once the skin is numb, a small tube (catheter) is inserted into the vein at the side of the neck. An X-ray machine is used to guide the catheter into the vein in the liver and then to guide the needle into the liver. Usually, two to three biopsy samples are taken.

## Will I feel any pain?

When the local anaesthetic is injected, it will sting for a short while, but this soon wears off. When the catheter is placed in the liver, you may get a dull ache in the right shoulder. This will go away once the tube has been removed. Some people feel a sharp pinch inside the abdomen as the sample is taken, but this will only last 1-2 seconds.

## Are there any risks with this examination?

Transjugular liver biopsy is a safe procedure, but as with any medical procedure there are some risks and complications that can arise. The overall risk of a problem requiring further treatment is low (1-2%). The main risk is bleeding after the biopsy. However, a TJLBx has a lower risk of bleeding than a conventional liver biopsy taken through the side of the abdomen.

### Radiation risk

Interventional procedures use ionising radiation to form images of your body and provide treatment. Ionising radiation can cause cell damage that may, after many years or decades, turn cancerous.

Radiation exposure during interventional procedures is generally regarded as low but higher radiation doses might be necessary in difficult or complex cases.

We are all at risk of developing cancer during our lifetime. The normal risk is that this will happen to about 50% of people at some point in their life. Having this procedure will increase the chances of this happening by a very small amount.

In some higher radiation dose procedures, there can be a risk of skin damage in the localised area, similar to sun burn. If we think that you are at risk of this, we will inform you before you leave the department.

The radiographer is responsible for making sure that your dose is kept as low as possible and that the benefits of having the x-ray outweigh any risk.

## Is there anything I need to inform you of before I attend for my appointment?

### **Pregnancy:**

Radiation can be harmful for an unborn baby. If you are or think you may be pregnant you must tell the radiographer before the examination.

## How do I prepare for my TJLBx?

Sometimes we will advise you not to eat or drink before your scan. Your appointment letter will tell you how long before your examination to stop or if you are an inpatient, the medical on the ward will take care of the preparations.

If you are taking any medications, please continue to take these as usual unless you have been told otherwise by your doctor. If you are taking Metformin and have poorly functioning kidneys, please contact the department to review this as you may be asked to stop taking this medication 48hours prior to your appointment.

If you are on any blood thinning medication, such as Warfarin, or if you have any questions about the procedure please telephone the department with the contact number on your appointment letter, between the hours of 9.00 am and 5.00 pm, Monday to Friday. If you have any allergies, please let the doctor or nurse know when you arrive.

### **Help and support in the department**

If you have any medical problem which you feel may affect your safety in the department, or if you feel you may need any assistance, please let us know when you arrive.

## Do I need to give my permission (consent)?

The radiologist will ask you if you are happy for the examination to go ahead and sign a consent form. This is called written informed consent.

If you do not wish to have the examination or are undecided, please ask the radiologist or a member of the team so that they can answer any questions you may have.

Remember, it is your decision. You can change your mind at any time and your wishes will be respected.

However, not having the examination may delay your diagnosis as the referring clinician may not have all the needed information.

## How long will it take?

Every patient is different, and it is not always easy to predict; however, expect to be in the radiology department for about 1 hour altogether

## What happens after the TJLBx?

You will be taken back to your ward on a trolley. Nurses on the ward will carry out routine observations, such as taking your pulse and blood pressure, to make sure that there are no problems.

You will generally stay in bed for a few hours, until you have recovered. Assuming you are feeling well, you can be discharged the same day.

## When will I get my results?

The biopsy samples will be sent for examination. Once the results are available, your doctors will discuss these with you.

You may already have an appointment with the doctor who referred you. If not, please contact them to arrange a time to talk about the results and any treatment you may need.

If you are staying in hospital, the results will be given to the doctors looking after you on the ward.

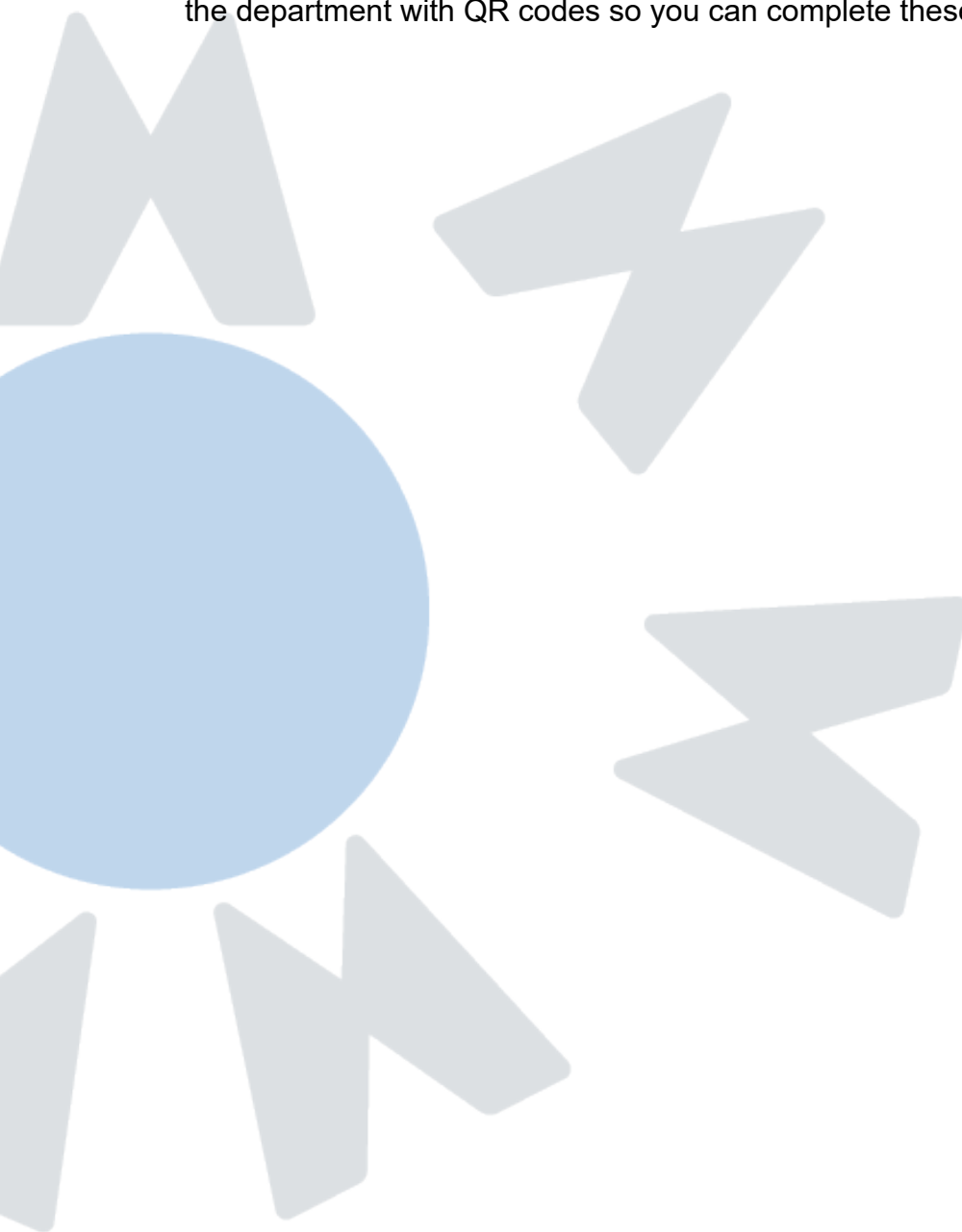
## What should I do if I have a problem?

You should not have any problems that is a result of the TJLBx.

If you feel your condition has changed, or you need further medical advice before receiving your results/after leaving the hospital, please make an appointment with the doctor that referred you, or in an emergency, go to your nearest Emergency Department (ED).

## How can I provide feedback for the appointment I have attended today?

The Division of Imaging welcomes feedback from all our patients. We actively take part in the Friends and Family Test and we complete a patient experience questionnaire every month to obtain feedback on the experiences you have had. Please speak to a member of staff regarding the feedback or there are posters within the department with QR codes so you can complete these online.



## Contact us

For contact information please refer to your appointment letter or if you are an inpatient please direct your queries to one of the medical staff on the ward

### Language and accessible support services:

If you need an interpreter or information about your care in a different language or format, please get in touch.

### Your comments and concerns

If you would like to provide feedback you can:

- Ask to speak to the department lead / manager.
- Write to us: Patient Advice and Liaison Services, 1<sup>st</sup> Floor, Cobbett House, Manchester Royal Infirmary, Oxford Road, Manchester, M13 9WL.
- Log onto the Patient Opinion website [www.patientopinion.org.uk/](http://www.patientopinion.org.uk/) click on 'Tell your Story'

### If you would like to discuss a concern or make a complaint:

Ask to speak to the department manager – they may be able to help straight away. Inpatients can speak to a senior nurse or manager by contacting the Tell Us Today service on (0161) 701 1999.

Contact our Patient Advice and Liaison Service (PALS) on (0161) 276 8686 email: [pals@mft.nhs.uk](mailto:pals@mft.nhs.uk). Ask for our information leaflet.

We welcome your feedback so we can continue to improve our services.

### NHS 111

This service offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

Telephone: 111, 24 hours a day  
Website: [www.111.nhs.uk](http://www.111.nhs.uk)

## Finally

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 the doctors looking after you. Further information can be obtained by contacting the radiology department that is performing the procedure. Do satisfy yourself that you have received enough information about the procedure, before you sign the consent form.