

Distal Pancreatectomy and Splenectomy Surgical Oncology

Your doctor recommends that you have a distal pancreatectomy with or without a splenectomy. This is a surgery to remove part of the pancreas and possibly the spleen. The tumor in your pancreas and a portion of healthy tissue around it will be removed. The spleen is usually removed during this procedure because of the important blood vessels it shares with the pancreas. In other surgeries, the spleen is often left in place. However, in cancer surgery, the doctor usually takes the spleen out to make sure all the cancer is removed. In this operation, the surgeon often removes lymph nodes near the pancreas and spleen.

Sometimes, this procedure can be done partially or completely laparoscopically (with a camera), which may shorten the recovery time. This approach is usually not recommended in cancer surgery. Your doctor will decide whether surgery with a camera is right for you.

The Pancreas

The pancreas is a gland in your abdomen area that has two important functions:

- It releases juices (enzymes) that aid in digestion.
- It makes hormones including insulin, which help to regulate your blood sugar when you eat.

Patients sometimes worry about developing diabetes after this procedure. While this is a possibility, most patients who have this surgery and who do not already have diabetes make enough insulin so that they do not get diabetes afterwards. Your doctor and medical team will monitor your blood sugar very carefully after surgery. Patients with diabetes may require adjustments to their diabetes medicines after the surgery. Some patients who take pills for their diabetes will need insulin shots after surgery.

Most patients eat normally after this surgery. Some patients will need pancreatic enzymes to help with digestion. The dietitian will discuss this with you and your doctor at your post-op visit.

The Spleen

The spleen is an organ in the abdomen area that filters the blood and helps fight infection. Your immune function should return to normal after recovery from the surgery. If you develop a fever above 101.5°F at any point after surgery, tell your doctor that you have had your spleen removed. You should receive a prescription for antibiotics to take care of any infection. These problems are rare and are usually very easy to treat.

Preparing for Surgery

If you take any blood thinners or anti-inflammatory medicines such as aspirin, ibuprofen (Advil® or Motrin®), warfarin (Coumadin®), or clopidogrel (Plavix®), you will need to stop taking these seven days before your procedure. Discuss the schedule for your other medicines with your doctor before the surgery.

Some doctors recommend that you receive three vaccines before your surgery. Other doctors prefer to give the vaccines after surgery. These may help improve the immune response in very rare types of infection. Your doctor will discuss this with you.

Risks

The main risks of this surgery are bleeding and infection. You will receive antibiotics during surgery to reduce your risk of infection. Sometimes, the pancreas can leak fluid into the abdomen after a part of it has been removed. Your doctor may need to place a temporary drain to help collect the fluid. There is a slight risk of developing diabetes from this surgery. See “What is the pancreas?” on page 1 for more information.

Symptoms to report

Report the following symptoms to your surgeon:

- Redness, swelling or drainage at the incision site
- Increased soreness along the incision
- Fever of 101°F (38.3°C) or higher
- Nausea or vomiting
- Abdominal pain
- No passage of gas for 24 hours
- No bowel movement for three days
- Tingling or numbness around the lips or in the fingertips
- Rapid, irregular or skipped heartbeats

Emergency Center

In case of any emergency, call 911 or go to the nearest emergency center. *For non-emergencies during business hours, call our triage line at 904-202-7300 option 3*