

Having a renal biopsy

Department of Renal Medicine/Day Surgery Unit Patient Information Leaflet

Introduction

This leaflet tells you about the procedure known as a renal biopsy. It tells you what the procedure involves, what the benefits and risks are and what you need to do when you get home.

It is not meant to replace discussion between you and your doctor, but as a guide to be used along with what is discussed. If you are unsure of anything, please ask the doctors and nurses caring for you.

What is a renal biopsy?

A renal or kidney biopsy is a procedure which takes a very small sample tissue from one of your kidneys with a special needle. The sample is smaller and thinner than half a matchstick in size. This can then be examined using a microscope for signs of damage or disease.

Why do I need a renal biopsy?

Usually, it is needed to investigate a particular problem or to confirm a diagnosis. For example, if blood or urine tests suggest your kidneys are not working properly, or if you have unexplained blood or protein in your urine. This will give your doctor the information they need to diagnose your condition.

What are the benefits?

A biopsy is the best way for us to get a tissue sample from your kidneys. Looking at the sample using a microscope will give us a lot more information about what is causing your symptoms and the best way to treat them.

What are the risks?

The doctor will discuss these with you before the biopsy. Risks of the procedure are rare but it is important that you are aware of them. The risks are:

Bleeding

Bleeding from the kidney is the most serious risk and is why such care is taken before and afterwards. If any visible blood is noticed in your urine after the biopsy, we will let your consultant know. You may need to stay overnight for monitoring. Less than one in every 10 people gets this.

Very occasionally if you get this, you may need a blood transfusion (this happens to less than one person in every 50 biopsies).

Sometimes, if there is a lot of bleeding or it does not stop, you may need surgery or X-ray treatment to help stop the bleeding. Less than one person in every 1,500 biopsies needs this.

Although deaths have occurred after having a renal biopsy, this is extremely rare.

Pain

You may get slight discomfort around the biopsy site for a few days after the procedure. This is normal and we usually recommend paracetamol if you can take it (always read the label; do not exceed the recommended dose).

If pain lasts more than a few days, contact the Renal Unit or your consultant for advice. If the pain is severe, get advice urgently.

What are the alternatives?

If a renal biopsy is not possible, not appropriate or you do not feel you want to have the procedure, you can discuss this with your consultant.

Investigations such as an ultrasound scan and an MRI scan may give some information but will not give the detailed information provided by a biopsy.

However, it may be possible for your consultant to give you treatment based on your blood tests and the results of other tests.

Where is it carried out?

If you are under the care of the Renal Medical Team, the biopsy will usually be carried out in the procedure room in the Renal Unit. You will receive your care before and after the procedure in the Renal Day Case unit. If you are staying on one of our wards, you will return to the ward after the biopsy.

If you are under the care of another department, you may have your biopsy in the X-ray department.

How do I prepare for my biopsy?

We advise you to have someone with you for the first 24 hours after the biopsy. If this will not be possible, please contact your consultant's secretary, or CAPD on 01384 244388. We may arrange an overnight bed for after the procedure.

What about my medications?

Certain medications, in particular **warfarin, clopidogrel and aspirin**, slow down the ability of your blood to clot. Therefore, you will usually be advised by your consultant to stop them a few days before the procedure. Your consultant will advise you when to restart them.

Other medicines can normally be taken as usual. If you have any queries about your medications, please ask the renal team.

Tests and investigations

MRSA screening

Normally before the biopsy, you will need to have swabs taken for MRSA screening. This is routine for all surgical procedures in hospital, and part of standard infection control precautions.

Blood tests

All patients will need to have a blood test 24 to 48 hours before the procedure to check that their blood clotting is normal, and that they are fit to have the procedure. This may be repeated on the day of the biopsy, if you have been taking warfarin or any other anticoagulant (blood-thinning) medication.

Urine tests

You will usually have a urine test before the biopsy. **It would be helpful if you brought a urine specimen with you on the day of your biopsy.** You can get a urine specimen container from your GP surgery.

Please note that a pregnancy test will be carried out for all women who have not been through the menopause. If the test is positive, the biopsy may be cancelled.

What happens on the day of the biopsy?

In the renal or X-ray department, the doctor will explain the biopsy procedure to you. This will include an explanation of any possible risks of the procedure. They will answer any questions you may have.

If you are happy to go ahead, you will need to sign a consent form, giving your permission for the biopsy to be taken. You should tell the doctor if you have any allergies and confirm that you are not taking warfarin.

If you have any questions about the procedure, you can ask the doctor at this time.

What happens during the procedure?

- In order to make the kidney more accessible, you will usually have to lie flat, face down with a pillow under your stomach. However, if you have a transplanted kidney, you will need to lie on your back.
- The exact kidney position is located using an ultrasound machine.
- The doctor will clean your skin in the area with antiseptic.
- To numb the area, we will inject a local anaesthetic into the skin. This will sting at first but will then the area will go numb.
- When the area is numb, the doctor will inject more anaesthetic around the kidney itself.
- The biopsy needle can then be passed through the numb area to take the biopsy. You will normally be asked to take a deep breath and hold your breath for one to two seconds when the biopsy is taken.
- Normally the needle makes a loud clicking noise.
- It is usual for the doctor to take up to three samples.

Will it hurt?

Once the local anaesthetic has taken effect, it should not be painful. However, if you feel any pain, tell the nurse or doctor immediately. Some people do find the position uncomfortable if they have neck or back problems. Please let us know if that is the case and we will do what we can to help you.

What happens afterwards?

After the biopsy, you will need to lie flat on your back with one or two pillows for up to six hours to reduce the risk of bleeding. During this time, we will monitor your blood pressure frequently and check your urine for any signs of bleeding. This is important to make sure you do not have any problems after the biopsy.

Normally if everything is satisfactory, you will be able to go home about seven hours after the biopsy.

What should I do at home?

We will give you aftercare instructions and information before you leave hospital.

You will need to avoid intense activity and driving for a least one week. You will have to stay off work for a week although if you have a manual job, you may have to stay off for longer.

We advise you to have access to a telephone and have someone with you for the first 24 hours after your renal biopsy.

When will I get the results?

Results are usually available within two weeks. Your consultant will discuss these with you at your next clinic appointment or, if necessary, will ring you to discuss.

Can I find out more?

The following website has more information on having a biopsy:

NHS Choices

<http://www.nhs.uk/conditions/biopsy/pages/introduction.aspx>

Contact information

The Continuous Ambulatory Peritoneal Dialysis (CAPD) Unit on 01384 244384

7.30am to 9pm, Monday to Friday

9am to 7pm, Saturday and Sunday

Out of these hours, ring the hospital switchboard number and tell them you are a renal patient. Ask to speak to the CAPD nurse on call.

Remember: the CAPD team is always willing to give help and advice. Please contact us, however small your query.

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dgft.nhs.uk/services-and-wards/renal/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm sunați la 0800 073 0510.

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