Neurosciences

Going home following removal of a pituitary tumour

Document history
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General advice
Following the operation, most patients experience headaches or discomfort after surgery for a few days. You will be prescribed pain reliever so take it as you are directed.

Your nose may feel blocked and you may experience some discharge of mucous, blood clots and crusting for several days. This can last for several weeks after endoscopic pituitary surgery, and longer where a nasoseptal flap becomes necessary during surgery in order to close a leak of cerebrospinal fluid (CSF). Nasal crusting can be minimised by the regular use of nasal douches to wash out the nose two or three times daily. Start douching one week after surgery and continue for six weeks. Nasal douches are effectively delivered using the NeilMed Sinus Rinse system, which can be purchased from your local chemist prior to surgery.

- Avoid blowing your nose for two weeks after surgery.

- Avoid heavy lifting, bending or straining on the toilet; these activities will increase the likelihood of nasal bleeding or leakage of cerebrospinal fluid (CSF) from your nose.

- Sit in a recliner or use two or three pillows when sleeping. Take it easy; listen to your body, eat and drink normally.

- Avoid swimming with the head below the water for three months due to risk of infection.

- We recommend you space out your activities at first and give yourself plenty of rest periods. You may increase your activities as you are able to tolerate them and as your endurance increases.
Appointments

The general trend for appointments is as below:

- One week from surgery have a blood test and urine test locally (at your GP or local hospital)
- ENT – four weeks (after endoscopic approach)
- Endocrine blood testing – six weeks
- Endocrine clinic – eight weeks
- MRI - three months (when you have received your appointment for MRI please contact the secretary so that she can confirm the neurosurgical clinic appointment)
- Neurosurgery – four months
- Ophthalmology (if required) eight weeks

Seek advice if you notice:

- Leakage of clear fluid from your nose, or are frequently swallowing liquid from the back of your throat, which may have a salty taste.
- Excessive bleeding from your nose as this symptom could indicate an impending emergency.
- Onset of a headache with a temperature and neck stiffness.
- Difficulty with vision or deterioration in your vision.
- You are passing large amounts of urine with excessive thirst and/or you start to feel generally unwell and excessively tired a week or two after your surgery. This may be due to a disturbance of the body’s salt levels.

- We recommend that you do not work for eight weeks after surgery and avoid any heavy household work.
- Altered taste and smell can occur after the surgery; it is expected to come back with time, gradually within a few weeks.
- It is advisable that you do not arrange a holiday until after you have discussed this with your doctors.
- You are advised (by endocrine) to go to your GP to have a blood test within five to seven days of discharge. This is to check salt and other electrolyte levels in the blood.

Driving

If your pituitary tumour has been surgically treated with a craniotomy (opening of the skull), you are not allowed to drive for six months. You will need to contact DVLA facilities or DVLA online which is much quicker, otherwise you can write to them.

If your operation has been dealt with by a transphenoidal (nasal) or an endonasal approach or treated with radiotherapy for instance, you are allowed to drive once deemed medically fit by your doctor and there are no lasting problems such as visual field disturbances.

Flying

You may fly after two months, provided that you travel in a pressurised aircraft and you do not have either a CSF leak or pneumocephalus.