

Radical nephrectomy is a safe and effective operation to remove a kidney cancer or diseased kidney. Though most times removal of the kidney can be performed with laparoscopic surgery (“keyhole” surgery), occasionally the kidney must be removed through an open incision. Open radical nephrectomy is most appropriate for patients with very large kidney tumours or in patients who have had previous abdominal surgery or large hernia repairs with mesh.

PREPARATION FOR SURGERY >

Medications to avoid prior to surgery

Any medications that affect bleeding should be stopped prior to surgery. The following medications should be stopped 7 days prior to surgery: ASA (Aspirin/Entrophen), warfarin (Coumadin), clopidogrel (Plavix), dipyridamole (Aggrenox), ticagrelor (Brilinta), ibuprofen (Advil/Motrin) and other non-steroidal anti-inflammatories (NSAIDs). The following medications should be stopped 72 hours prior to surgery: dabigatran (Pradaxa), rivaroxaban (Xarelto) and apixaban (Eliquis). If you have any questions about your medications prior to surgery, please contact your surgeon.

Diet prior to surgery

You may eat your normal diet up until midnight the night before your surgery. Do not eat any solid food, milk or cream after midnight the night before your surgery. You may drink up to 400 mL (1.5 cups) of water up to 3 hours before surgery. You may not drink any other fluids. You may have sips of water with your morning medications.

You may also be asked to perform a bowel preparation the day before your surgery, which may include a laxative (Citro-Mag) and an enema (Fleet).

THE SURGERY >

In the operating room

Radical nephrectomy is performed under a general anesthetic, meaning you will be asleep for the operation. You may also be given an epidural (a small tube that delivers pain medication to your lower spine) to help with pain control after the operation. The operation is performed through an incision under your ribcage. The operation typically takes 2-4 hours.

Potential risks and complications

Although the operation is safe, a number of potential risks exist. These include the following:

- Bleeding, including a small risk of blood transfusion
- Infection
- Injury to other organs including bowel, major blood vessels, liver, spleen, pancreas, gallbladder and lung
- Decreased kidney function
- Hernia or bulging at your incision
- Recurrence of cancer
- General risks associated with all types of surgery including heart attack, stroke and blood clots in the legs or lungs

WHAT TO EXPECT AFTER SURGERY >

During your stay in hospital

- **Length of hospitalization:** The hospital stay for most patients is 3-5 days.
- **Pain:** You may experience discomfort after surgery around your incision. This can be treated with intravenous medications and medications by mouth.
- **Urinary catheter:** A catheter (a tube to drain the bladder) will be in place when you awake from your surgery. It will be removed 1-2 days after your surgery.
- **Diet:** You will be able to drink fluids beginning in the evening after your surgery. You will be able to resume solid food 1-2 days after your surgery.
- **Ambulation:** You will be encouraged to walk around beginning in the evening after your surgery.

After leaving the hospital

- **Pain:** You may experience some mild discomfort after your discharge around your incisions. This can usually be controlled with acetaminophen (Tylenol). You will be given a prescription for a stronger pain medication in case it is needed.
- **Showering:** You may shower once you have returned home from hospital. Do not soak your incisions. Carefully dry your incisions following a shower. You may not take a bath for 2 weeks after your surgery.

- **Activity:** Walking is strongly encouraged after your surgery. Prolonged lying in bed should be avoided to prevent the development of blood clots in your legs. Heavy lifting (more than 10-20 pounds), running, and vigorous exercise must be avoided for 6 weeks after your surgery.
- **Incisions:** Your incisions will have been closed with staples or stitches. If you have staples, these must be removed 7-14 days after your surgery by either your family doctor or your surgeon. If you have stitches, these will dissolve on their own and do not need to be removed.
- **Diet:** You may resume your normal diet once you have returned home from hospital. Limiting your salt intake and eating a healthy diet will help preserve the function of your kidneys.
- **Work:** Most people can return to work 2-4 weeks after surgery if they perform desk work or jobs with minimal physical activity. If your work requires heavy lifting or strenuous activity, you cannot return for 4-6 weeks.
- **Follow-up appointment:** You will need an appointment to visit your surgeon 2-4 weeks after your surgery to see how you are healing and to review the results of your pathology (your complete diagnosis). Please call your surgeon to schedule this appointment if it has not been done for you before your discharge from hospital.

WHEN TO SEEK MEDICAL CARE >

Contact your surgeon if you experience any of the following after surgery:

- Increased bleeding from your incisions
- Your pain gets significantly worse
- Increasing redness or swelling around your incisions
- Unexplained fever over 38.5 degrees Celsius/101 degrees Fahrenheit
- Very bad smell coming from your incisions

Proceed immediately to the emergency room if you experience any of the following after surgery:

- Bright red blood or blood clots in your urine
- Difficulty breathing or shortness of breath
- Severe lightheadedness or feeling faint
- You have a serious concern and are unable to contact your surgeon