Seroma Aspiration

This leaflet explains seroma aspiration, including the benefits, risks and any alternatives and what you can expect when you come to hospital.

If you have any further questions, please speak to a doctor or nurse caring for you.

What is a seroma?

A seroma is a collection of straw-coloured fluid under the skin that can occur after an operation. It can occur when tissue is removed from the body during an operation, leaving a space which sometimes fills with fluid. This space eventually gets filled with scar tissue but until this occurs the seroma can collect. The body will often re-absorb the fluid itself without any intervention but this may take weeks to months to resolve.

In some cases, if there is an excessive amount of fluid, the seroma is very painful or it is putting a strain on the stitch line from surgery, it may have to be drained. This is called a seroma aspiration. This involves inserting a needle under the skin and attaching it to a syringe to aspirate the fluid.

Why should I have a seroma aspiration?

In many cases the seroma will re-absorb. However, if the seroma is painful an aspiration can relieve the pain. If the swelling is putting strain on the stitch it may result in the wound opening and leaking if it is not aspirated.

What are the risks?

- Infection. Although every precaution is taken to avoid infection, inserting a needle into skin provides an entry point for bacteria which can lead to an infection. If you notice signs of redness, increased pain and swelling you need to seek medical intervention immediately. You can contact the Plastic Dressing Clinic (020 8725 0007 for an appointment or 020 8725 0473 for voicemail), attend your GP or visit the Urgent Care Centre at St. George's – whichever means you get seen on the day you notice these signs.
- Re-occurrence of the seroma. It is common for the seroma to re-occur as the space underneath the skin where fluid collects can take several weeks to fill with scar tissue. If this happens and you do not have another appointment to be seen in the Plastic Dressing Clinic, please contact the appointment line on 020 8725 0007 to arrange another review.
- Bleeding. There is a risk of causing bleeding when carrying out the aspiration. This will be dealt with at the time.

- Pneumothorax. There is a very small risk of pneumothorax if the aspiration is in the chest or back area. This means air enters the pleural cavity and results in shortness of breath. This would occur at the time of the aspiration and would be dealt with by the team.

Are there any alternatives?

If there is no pain or strain on the stitch line most seromas will be left to re-absorb. If it is causing too much pressure on the skin that pain or wound leakage results, then it will be recommended. However, if you choose not to have an aspiration it will not be done.
This may result in fluid leaking through the stitch line. In very few cases the seroma forms a capsule and becomes permanent. This can only be treated with surgery to remove the capsule but is rare.

How can I prepare for a seroma aspiration?

The procedure can be done in clinic. You may be asked to get a support garment to put on after the aspiration. This will depend on the part of the body affected. The nurse in the clinic will discuss this with you.

Asking for your consent

It is important that you feel involved in decisions about your care. You can withdraw your consent at any time, even if you have said ‘yes’ previously. If you would like more details about our consent process, please ask for a copy of our policy.

What happens during a seroma aspiration?

- A nurse or doctor trained in seroma aspiration will carry out the procedure.
- Your skin will be cleansed around the area of the seroma.
- A needle will be inserted (often through the existing stitch line) and attached to a syringe or drainage bottle. This is usually painless as the area is often still numb from surgery but should be no more than a “pin prick” sensation.
- The fluid will then be drawn out (aspirated) until the area is relatively flat or no more can be aspirated.
- A small dressing will be placed over the area.
- Depending on the part of the body, you may be advised to wear a compression garment if tolerated to apply pressure over the affected area to help prevent the seroma from re-occurring, e.g. if in the groin or chest.
- If the seroma is not resolving despite aspiration the team may arrange an ultrasound scan that estimates the size of the collection and in some cases uses this to guide a full aspiration. If there is a need for this it will be discussed with you by one of the team.

Will I feel any pain?

You may feel a “pin prick” sensation when the needle is inserted but it should not be painful.

What happens after a seroma aspiration?

You will be asked to monitor the area for any signs of redness that may indicate there is an infection. Movement and activity may need to be reduced in areas that that might cause the seroma to recollect. This advice will depend upon from where the seroma is being aspirated. In all cases you are advised not to drive. Support garments can help reduce seroma collection in certain areas of the body such as the groin. Depending on the part of the body you may be advised to purchase a support garment to reduce the chance of the seroma collecting again.

What do I need to do after I go home?

[Include information on how long to rest, removal of dressings, pain relief. When can the patient resume normal activities, such as sport, going back to work etc? What care does the patient need at home? Do they need someone to stay with them or any special equipment? Also mention things to avoid, such as lifting. Are there warning signs/symptoms of which they need to be aware or to which they must alert a clinician?]

Will I have a follow-up appointment?

Depending on the amount of fluid aspirated you may be given an appointment or advised to make a further appointment if the fluid re-collects.

Contact us

If you have any questions or concerns after having a seroma aspiration, please contact the plastic dressing clinic nurses on 020 8725 0473 (Monday to Friday, 9am to 4pm – this is voicemail only) or email the team on plas plasticdressing.clinic@stgeroges.nhs.uk (Monday to Friday 9am to 4pm).

Out of hours please call 111.

For appointments, please call 020 8725 0007.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Useful sources of information

Postoperative Seroma Management - StatPearls - NCBI Bookshelf
https://www.ncbi.nlm.nih.gov/books/NBK585101/

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:
Monday, Tuesday and Thursday between 10am and 4pm
Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays.
Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.
Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.
Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

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