Leg amputation

The aim of this information sheet is to help answer some of the questions you may have about having a leg amputation. It explains why your surgeon has recommended this operation and the risks of the procedure as well as what you can expect when you come to hospital.

If you have any questions or concerns, please do not hesitate to speak to a doctor or nurse caring for you.

Why is an amputation done?

When you have a blockage or narrowing of the arteries supplying blood to your legs the circulation to your legs is reduced. You may have developed pain in your foot waking you at night, ulceration or black areas on your toes, feet or leg.

If this is left untreated, the lack of blood circulation will cause the pain to increase. Tissue in the leg will die due to lack of oxygen and nutrients, which leads to infection and gangrene. In some cases, gangrene can be very dangerous as the infection can spread through the body and become life-threatening.

Amputation is always a last resort and will only be recommended if your surgeon has decided it is not possible to improve the circulation in any other way.

What are the risks?

Because of the poor blood supply to your leg, wound healing after the operation can sometimes be slow and very occasionally it is necessary to perform another amputation higher up the leg if the wound does not heal.

The wound can become infected and if so, will require treatment with antibiotics.

Aches and twinges in the wound are common and may continue for several months. It is also very common to experience pain that seems to be in the part of the leg that has been removed. This is called phantom limb pain. The sensation you may feel with this type of pain is burning, aching or itching. This can be managed with medication.

Chest infections can occur following this type of surgery, particularly in smokers, and may require treatment with antibiotics and physiotherapy.

As with any major operation there is a risk of you having a medical complication. You may wish to read our leaflet, Having an anaesthetic for more information.

Giving my consent (permission)

We want to involve you in all decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This confirms that you agree to have the
procedure and understand what it involves. You should receive the leaflet, **Helping you decide: our consent policy**, which gives you more information. If you do not, please ask us for one.

### Where are the amputation sites?

The main sites of amputation are:

- Below the knee
- Through the knee
- Above the knee.

The site of amputation will depend on how poor the blood supply to your leg is. If possible, below knee amputations are performed as it is easier to walk with an artificial limb after the operation. However, many people also recover well and have a good level of mobility after a thigh amputation.

### How can I prepare?

We will send you information about how to prepare for your hospital stay with your admission letter. Please read this information carefully.

We will also send you information about fasting. Fasting means that you cannot eat or drink anything (except water) for six hours before surgery. We will give you clear instructions if you need to fast and when to start fasting. It is important to follow the instructions. If there is food or liquid in your stomach during the anaesthetic it could come up to the back of your throat and damage your lungs.

### What happens during the surgery?

In the anaesthetic room you will be given a general anaesthetic to put you to sleep. You may also have a tube inserted into your back through which pain killers can be given to numb the lower half of your body whilst you remain awake (spinal or epidural). If this is the case, you will be given sedation to ensure you are not aware of the operation.

The amputation stump will be closed with either stitches under the skin that dissolve by themselves or by external stitches that will need to be removed. A small tube is also inserted to drain any fluid that builds up after the operation.

### Will I feel any pain?

The nurses and doctors will try and keep you free of pain by giving you pain killers using an epidural infusion via a tube in your back, or by a machine that delivers pain killers through a drip into your vein that you are able to control yourself by pressing a button.

### What happens after the procedure?

You will return to Luke Ward once you have recovered from the anaesthetic.

You will be given fluids by a drip in one of your veins until you are well enough to sit up and take fluids and food by mouth.
It is quite common to experience pain that feels to be in part of the leg that has been removed (phantom limb pain) and this can be helped with medication.

On the first day the drain will be removed and any drips that are not required.

You will be visited by the physiotherapist before and after your operation. For more information about how you will be supported after your operation, both before and after you leave hospital, see our booklet, Re habil itation after your lower limb amputation.

What can I do to help myself?

If you are a smoker we strongly advise you to quit and remain a non-smoker in the long term. Smoking may damage the circulation in your other leg. You can contact the free NHS smoking helpline on 0800 022 4 322.

The leaflet Re habilitation after your lower limb amputation also provides information about how you can look after yourself and a range of organisations that provide support and information.

Contact us

If you have any questions or concerns before or after you have left hospital, please contact the vascular nurse specialist on 020 7188 8056, Monday – Friday 9am – 5pm or Luke Ward on 020 7188 3566 (24 hours).

Patient Advice and Liaison Service (PALS) – To make comments or raise concerns about the Trust’s services, please contact PALS. Ask a member of staff to direct you to the PALS office or: t: 020 7188 8801 at St Thomas’  t: 020 7188 8803 at Guy’s e: pals@gstt.nhs.uk

Knowledge & Information Centre (KIC) – For more information about health conditions, support groups and local services, or to search the internet and send emails, please visit the KIC on the Ground Floor, North Wing, St Thomas’ Hospital.

Language support services – If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

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