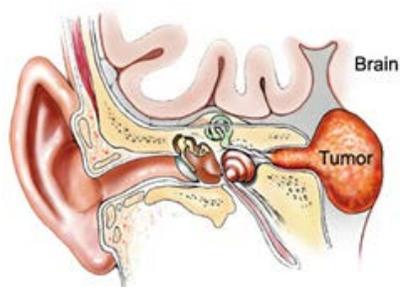


Information for patients

Acoustic neuroma

What is an acoustic neuroma?

An acoustic neuroma is a benign (non-cancerous), slow growing tumour that originates in the canal connecting the brain to the inner ear. Treatment involves surgery to remove the tumour.



What happens before my surgery?

Before surgery, some patients attend a pre-admission clinic where the doctor will explain the surgery and you will sign a consent form.

At the clinic, the health care team will ask you about your health, medication and lifestyle. They may test your blood, take x-rays and an electrocardiogram (ECG).

Your doctor will talk to you about what medications to take before you come to hospital.

It is important to tell your doctor if you are taking any blood thinning medications, such as aspirin, warfarin or clopidogrel (Plavix).

Please bring your medications into hospital with you.

If you use a dosette box or pill organiser to take your tablets, please ask your pharmacist to print out a list of your current medications so you can bring this to hospital.

If you do not need to attend the pre-admission clinic, we will telephone you to tell you when your surgery is scheduled and what to bring to hospital. You may also receive a letter informing you of your time and date of surgery. Please make sure you confirm your date for surgery.

The day before your surgery, the hospital will call you between 2.30pm and 7pm to inform you of the time you need to stop eating and drinking and what time to come to hospital.

What will happen on the day of my surgery?

We ask that you shower before you come to hospital and remove jewellery, make up, nail polish and fake nails. It is advisable to leave valuables such as jewellery and large sums of money at home to decrease the possibility of items being misplaced or stolen.

On the day of your surgery, please make your way to the St Vincent's Day of Surgery Admission (DOSA) area, which is located on the first floor of the In-patient Services Building, Princes Street, Fitzroy.

When you arrive the nursing staff will check your pulse and blood pressure.

You will need an anaesthetic for the surgery. The anaesthetist (the doctor who will give you the anaesthetic) will meet with you before your surgery to talk to you about your health and the best type of anaesthetic for you.

A general anaesthetic (anaesthetic to put you to sleep) is normally used for this procedure.

St Vincent's is a busy hospital so please be aware that you may need to wait up to three hours for your operation.

What happens during the surgery?

A cut is made behind your ear, through the skin, then the bone. The surgeon will remove the tumour from deep inside your inner ear and repair the cuts made in the bone and skin.

This type of surgery usually takes four to eight hours.

What happens after the surgery?

You will wake up from the anaesthetic in the recovery room and be transferred to your ward shortly after.

You may have an oxygen mask to help you breathe and an intravenous (IV) drip in your arm to give you fluid. This will be removed once you are able to eat and drink. You will not be permitted to eat and drink until four hours after surgery. This is because you may feel sick, vomit or have pain after your surgery.

You will have a dressing over the wound behind your ear and you may also have a catheter in your bladder to monitor how much urine you are making.

Your response time (neurological status) will be constantly observed, along with your blood pressure, temperature and heart rate.

You may experience nausea that will be treated with tablets. Severe headaches are also common and your pain may be treated in a number of ways. This will be decided by you, your doctors and nurses depending on the type of pain you have. You may be given tablets or an injection to help you feel better.

You may experience some facial weakness, a slight mouth droop, and the eye on the same side may not close as tightly as the other. These facial weaknesses will improve over a period of time. You may also experience sensitivity to bright lights. This will slowly improve.

The hearing on the affected side does not usually improve. You will attend a hearing test arranged by the ward on day seven of your stay.

The day after your surgery you may get out of bed, however you will need assistance to do so as you may be dizzy and unsteady on your feet. A physiotherapist will assist you with improving your balance and will provide a walking stick or frame if required.

The stitches behind your ear will be removed on day 10 of your stay.

When can I go home?

Most people stay in hospital for 10 days for this type of surgery. Patients are usually discharged at 10am so the room can be prepared for another patient.

Before you leave the ward someone will:

- make a follow-up appointment at St Vincent's Specialist Clinics for you
- send a letter from the hospital to your local doctor (GP)
- give you medication, if the doctor prescribes it
- give you a medical certificate if required (you will need to ask).

Please remember to take all your belongings including x-rays home with you.

What should I do once I get home?

You are encouraged to take gentle walks two to three times a week, however please take care, as you may still be unsteady on your feet.

For your safety, refrain from driving for six weeks.

You should avoid doing any strenuous activity, especially lifting anything heavy. Do not lift anything more than 2-3kg for two weeks after surgery (this equals the weight of a bag of oranges). Avoid participating in sport for four to six weeks.

If you experience:

- increased pain, swelling, or redness behind your ear
- any continuous dripping from your nose, or
- prolonged headaches

go to your nearest emergency department or GP as soon as possible.

Coordinator, Head and Neck Cancer Multidisciplinary Clinic and Liaison Nurse

Tel: 9288 2755

Waiting List Officer

Tel: 9288 2271

This information sheet is intended as a guideline only. If you have further questions or concerns, please speak to your doctor.