

Chapter 8: Surgery for advanced kidney cancer

This chapter is part of a series of materials. For more information, and to access further materials, please visit www.KEYTRUDA.co.uk

For patients being treated with KEYTRUDA[®] (pembrolizumab) in combination with axitinib for advanced renal cell carcinoma

Your healthcare team should have provided you with materials to help you identify any side effects you may experience on your treatment. Ensure you read the Patient Safety Information Brochure and carry your Patient Alert Card with you at all times.

It is important to be aware of side effects. Telling your healthcare professional straight away as soon as you notice any symptoms may stop them from becoming more serious

DO NOT ATTEMPT TO DIAGNOSE OR TREAT SIDE EFFECTS YOURSELF.

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at: <https://yellowcard.mhra.gov.uk/> or search for MHRA Yellow Card in the Google Play or Apple App Store. Adverse events should also be reported to Merck Sharp & Dohme Limited (tel: 01992 467272). By reporting side effects you can help provide more information on the safety of this medicine.



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Surgery for advanced kidney cancer

After a diagnosis of advanced kidney cancer, your healthcare team will have reviewed the results of your tests and designed a treatment plan for you. The first step in your treatment plan may be a form of surgery.

Surgery can sound scary. It's normal to feel anxious about it and how it could affect your daily life. However, surgery for kidney cancer is a well-established procedure and most people can go home within a few weeks.

Why have I been offered surgery for advanced kidney cancer?

Surgery for advanced kidney cancer is offered if your healthcare team thinks it will help improve your chance of recovery or quality of life.

Before choosing to do surgery, surgeons will take scans, such as a CT scan, to look at:



The size of your cancer



If the cancer has grown beyond the kidney



If the cancer has spread to another part of your body

This information helps your healthcare team estimate how much time it may take for you to recover.



Surgery for advanced kidney cancer

What type of surgery is offered for kidney cancer?

Surgery may not be a suitable option for everyone. Your healthcare team will recommend it if it is right for you. There are two main forms of surgery.



One form of surgery for kidney cancer is the **removal of the whole kidney**, which is called a radical nephrectomy. Sometimes, surgeons will also remove some surrounding tissue if the cancer has spread.



Where possible, and especially if the cancer is small, surgeons may only remove a **part of the kidney** (this is known as a partial nephrectomy).



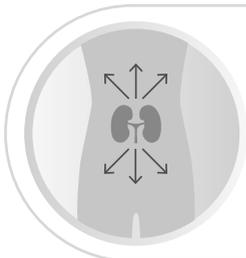
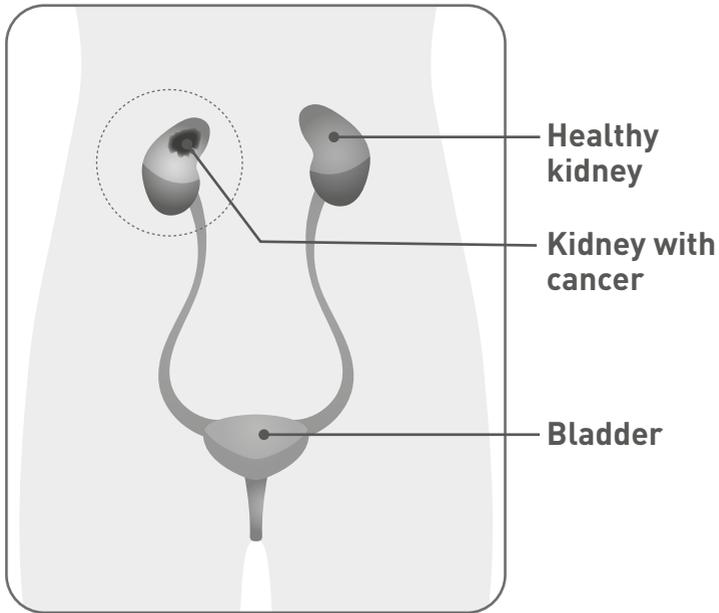
Remember you have 2 kidneys and it's possible to carry on with many of your daily activities even if doctors need to remove part, or all, of one of them as the remaining kidney 'picks up' the work of both.



Nephrectomies are performed by a surgeon who will either make one large cut (open surgery) or a few smaller cuts (keyhole surgery) to remove part of or a whole kidney. At some hospitals the surgeon will use a robotic machine during surgery. This is called robotic surgery.

There are risks and benefits to both open and keyhole surgery and your healthcare team will decide what type of surgery will give you the best outcomes.

Surgery for advanced kidney cancer



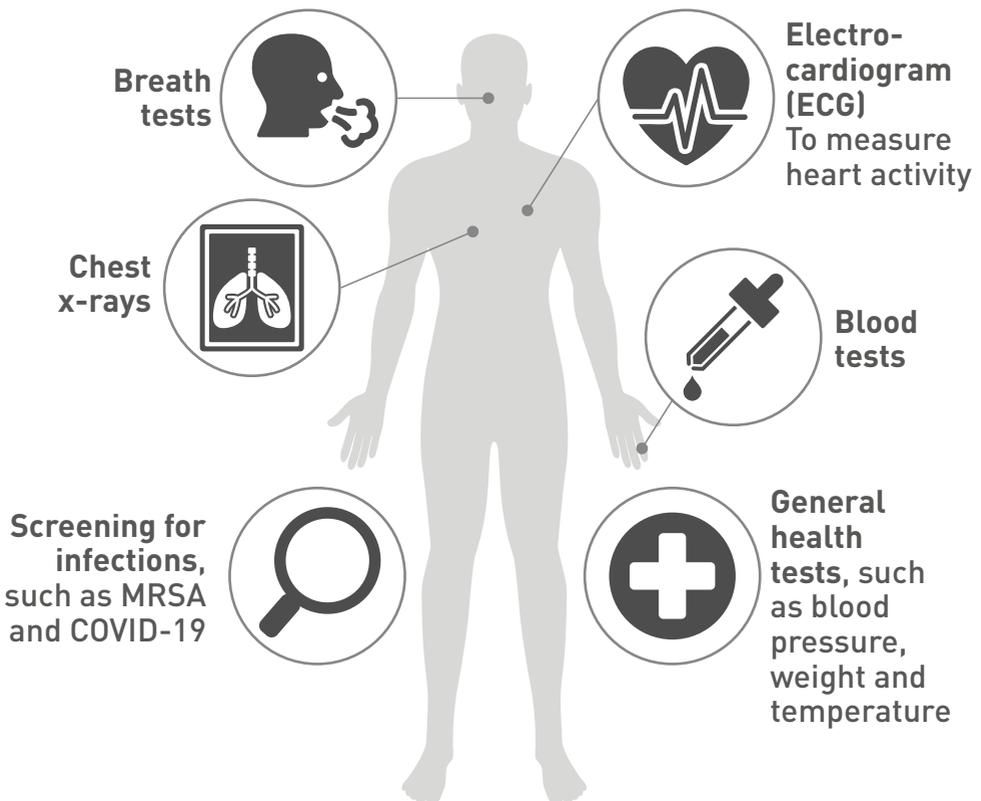
If the cancer has spread to another part of the body, surgeons may also decide to remove the cancer from that part. This usually requires a separate surgery.

Surgery for advanced kidney cancer

How will I prepare for surgery?

Before surgery, you will have an appointment at the **pre-assessment clinic**. At this meeting, the surgeon will talk to you about the possible benefits and risks of surgery, as well as the next steps after the surgery.

The surgeon will also organise tests to help them measure your chances of recovery. These tests are carried out by different healthcare professionals, including nurses and/or a radiographer. Some of these tests include:



Surgery for advanced kidney cancer

The pre-assessment clinic may also include meetings and talks with several specialists. This is likely to be different at each hospital, you can ask your healthcare team to explain what happens in your area.

Some of the specialists you may see are detailed below:



An anaesthetist, who checks for your fitness for getting general anaesthetic (being put to sleep) during surgery



A dietitian, who can provide advice about what to eat and drink, both before and after surgery



A physiotherapist, who can teach you exercises to help with recovery from surgery, including breathing exercises, and preventing blood clots

You may also be offered **prehabilitation classes** to attend before your surgery. You attend these classes within a group setting and are encouraged to bring a family member or friend if you would like. Prehabilitation prepares you for your surgery and includes classes on diet, exercise and your mental health. Prehabilitation aims to improve long-term health and can enhance recovery and quality of life following surgery.

Surgery for advanced kidney cancer

What happens on the day of surgery?



What happens on the day of surgery will vary slightly between hospitals. This chapter talks about some of the steps that will happen in most hospitals. Ask your healthcare team to give you more information about what you need to do before your surgery.

Before your surgery begins, a healthcare professional will tell you what time to arrive at the hospital. You may be asked to arrive the day before and stay overnight.

When you arrive, you will be asked to sign a consent form. It is important to read this form carefully and ask questions if you are concerned, or unclear, about the language used.



Eating or drinking is not allowed before surgery. Your healthcare team will give you more advice about not eating on the day itself and ask your nurse if you have any questions about this. Your doctor may connect you to an intravenous (IV) drip (directly into your blood) to help you stay hydrated. During this time, your anaesthetist may ask you some questions about how you feel.

Before your surgery, you will be asked to shower.

If you smoke, you may be asked to stop smoking.

If you take blood thinners, you should tell your healthcare professional (e.g. the anaesthetist or surgeon).

If you take any regular medicines, tell your doctor, nurse or pharmacist at the hospital.

Surgery for advanced kidney cancer



A radical nephrectomy surgery generally lasts about 2 to 3 hours.

After your surgery, you will be taken to the recovery room and stay there until you wake up from the anaesthetic. This usually takes 1 or 2 hours.

What is recovering from surgery like?

After your nephrectomy surgery, you might be offered **painkillers** to help lower any pain. Whilst in hospital, these are either given through a vein (IV drip) or through a small tube taped to your back.

You may not be able to eat or drink right after surgery so your healthcare team will make sure you get the right nutrition for the first few days.

While you are recovering in hospital, because you are not moving around as much as you would have, it is important to look out for the symptoms of blood clots and an infection. Your healthcare team will give you tips about preventing these problems. To prevent these problems you should try and get up and out of bed as soon as you feel comfortable moving. Your healthcare team will also be able to give you tips to reduce the risk of blood clots and infection, and while in hospital, you will be given blood thinners, if suitable for you.

Treating advanced kidney cancer

Blood clots

Blood clots can develop after surgery because you are not moving around.

If you notice any of the symptoms below, talk to a healthcare professional right away:



Pain in your leg (especially in your calf)



Swelling in your arms or your legs



Breathing seems more difficult than normal, or sudden chest pain

To help lower the chance of blood clots, physiotherapists can give you **exercises** to improve blood flow. They may also recommend **compression stockings** to wear. In some cases, you might be offered an **anti-clotting injection**.

Treating advanced kidney cancer

Infections

Wound infections can happen in places where skin is cut, but can usually be treated with antibiotics.



If you notice any of these signs, tell a healthcare professional immediately:

- Pain at the wound site
- Redness
- Swelling
- Discharge, or oozing, from the wound

Chest infections can also develop after surgery because you are moving less and lying down.

Breathing exercises can help lower the risk of developing chest infections after surgery.

You and your healthcare team can discuss these at your pre-assessment meeting.



Treating advanced kidney cancer

When will I go home after surgery?

The timing of going home after surgery will vary for different people. If you do not have side effects and you feel well, you will probably be able to go home about **a week** after your surgery. This may be more or less depending on the type of surgery you have had. Your healthcare team will be able to let you know when you can go home.

Before leaving hospital, your healthcare team will help you book your first outpatient appointment. The timing will depend on the hospital but this is usually about **6 weeks** after your surgery.

What happens next?

At your follow-up appointments, your doctor will check how you are recovering from your surgery. While surgery can remove your kidney cancer, they will also check to see if the cancer has returned, or spread to another part of the body. If this happens, your doctor will discuss other treatment options with you.



References

1. Cancer Research UK. Available at <https://www.cancerresearchuk.org/> (Accessed September 2020)
2. Guys & St Thomas NHS Trust. Having an open radical nephrectomy. Available at <https://www.guysandstthomas.nhs.uk/resources/patient-information/kidney/having-an-open-radical-nephrectomy.pdf> (Accessed September 2020)

