

# Pulmonary Lobectomy

## (Removal of a Lung Lobe)

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En Español (Spanish Version)

### Definition

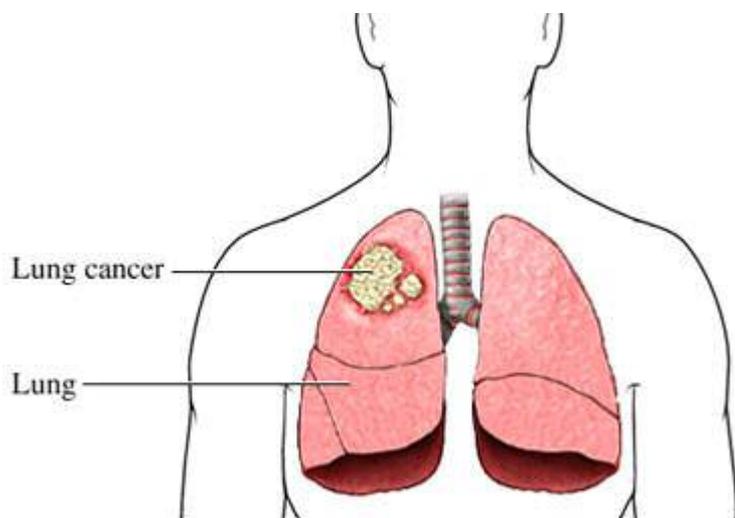
Each lung is made up of 2 or 3 sections, called lobes. A lobectomy is the surgical removal of one of these sections from the lung.

### Reasons for Procedure

A lobectomy is used to treat a variety of lung conditions, such as

- Lung cancer
- Congenital defects
- Cysts
- Tuberculosis
- Fungal infections
- Abscesses
- Emphysema

Lung Cancer



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### Possible Complications

If you are planning to have a lobectomy, your doctor will review a list of possible complications, which may include:

- Infection

- Bleeding
- Anesthesia-related problems
- Collapsed lung
- Need for prolonged artificial respiration on a ventilator
- Damage to neighboring organs or structures
- Death

Factors that may increase the risk of complications include:

- Smoking
- Advanced age
- Obesity
- Smoking
- Diabetes
- Excessive alcohol intake

## What to Expect

### Prior to Procedure

- Your doctor may do the following:
  - Physical exam
  - Blood and urine tests
  - Chest x-ray —a test that uses radiation to take pictures of structures inside the body
  - Pulmonary function test —a test to assess the capacity of your lungs
  - Ultrasound—a test that uses sound waves to examine the lungs
  - CT scan —a type of x-ray that uses a computer to take pictures of structures in the body
  - MRI scan —a test that uses magnetic waves to make pictures of structures in the body
- Talk to your doctor about your medicines. You may be asked to stop taking some medicines up to one week before the procedure, like:
  - Aspirin or other anti-inflammatory drugs
  - Blood thinners, such as clopidogrel (Plavix) or warfarin (Coumadin)
- Follow a special diet if instructed.
- Eat a light meal the night before. Do not eat or drink anything after midnight.
- Take antibiotics or other medicines as directed.
- You may be asked to shower the night before the procedure with a special soap.
- Arrange to have someone drive you to and from the procedure. Arrange for help at home as you recover.

### Anesthesia

General anesthesia will be given. You will be asleep. A tube will be placed in your windpipe to help you breathe.

### Description of Procedure

A lobectomy may be done in one of two ways:

- Traditional thoracotomy—A large incision will be made. The ribs will be spread. The doctor will locate and remove the lung lobe.
- Video-assisted thoracic procedure—Several small incisions will be made between your ribs. A tiny camera and special tools will be inserted through the incisions. Your doctor will be able to see the inside of your chest on a nearby monitor. The lung lobe will be located and removed.

If you are having a lobectomy to remove cancer, the doctor will also remove lymph glands in your chest. The glands will be tested for any sign of cancer.

After completing the procedure, your doctor will place tubes in your chest. They will help drain the chest cavity. The incision(s) will be closed with stitches or staples.

## **Immediately After Procedure**

You will be taken to a recovery room. There you will be given fluids and medicines through an IV.

## **How Long Will It Take?**

The procedure takes about 1-4 hours.

## **How Much Will It Hurt?**

You may feel some pain as the anesthesia wears off, but pain can be managed with medicines.

## **Average Hospital Stay**

- Thoracotomy—about 1-2 weeks
- Video-assisted thoracic procedure—2-5 days

## **Post-procedure Care**

### **At the Hospital**

You will be asked to cough and walk often. You may be given an incentive spirometer. This is a breathing exercise device that will encourage you to take deep breaths.

### **At Home**

Be sure to follow your doctor's instructions, which may include:

- You will likely be told to walk daily.
- Limit lifting during the first few days after your surgery.
- Follow directions given to you to take care of your incision.
- Ask your doctor about when it is safe to shower, bathe, or soak in water.
- You will be given medicine to help manage pain.

## **Call Your Doctor**

After you leave the hospital, call your doctor if any of the following occurs:

- Signs of infection, including fever and chills
- Redness, swelling, increasing pain, excessive bleeding, or any discharge from the incision site
- Nausea and/or vomiting that you cannot control with the medicines you were given after surgery, or which persist for more than two days after discharge from the hospital
- Pain that you cannot control with the medicines you have been given
- Pain, burning, urgency or frequency of urination, or persistent bleeding in the urine
- Cough, shortness of breath, or chest pain
- Coughing up yellow, green, or bloody mucus
- Pain and/or swelling in your feet, calves, or legs

Call for medical help or go to the emergency room right away if any of the following occurs:

- Sudden chest pain
- Sudden shortness of breath

If you think you have an emergency, call for medical help right away.

**RESOURCES:**

American Cancer Society  
<http://www.cancer.org/>

National Cancer Institute  
<http://www.cancer.gov/>

**CANADIAN RESOURCES:**

Canadian Cancer Society  
<http://www.cancer.ca/>

National Cancer Institute of Canada  
<http://www.ncic.cancer.ca/>

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