

Having axillary block dissection

Department of Plastic and
Reconstructive Surgery
Information for patients

Produced: Oct 2022

Review: Oct 2025

Leaflet number: 631 Version: 3

What is an axillary block dissection?

An axillary block dissection is an operation to remove lymph nodes in the armpit. Other names for this operation include axillary lymphadenectomy and axillary clearance. The operation will be performed under a general anaesthetic (whilst you are asleep) and takes about two hours.

What are lymph nodes?

Lymph nodes (also called glands), are part of the lymphatic system. They carry filtered fluid back to the main circulation and also have an important role in the immune system.

Why do I need an axillary block dissection?

The tests that you have had show that there may be cancer cells in the lymph nodes in your armpit. Once a lymph node has been shown to contain cancer cells, there is a chance other nearby lymph nodes may also contain the cancer. The purpose of the operation is to remove lymph nodes that are either involved or have a high chance of being involved with the cancer.

What are the possible complications?

As with any operation, complications can occasionally occur. These include:

Anaesthetic risk - the anaesthetist will discuss any potential complications before the operation.

Deep vein thrombosis (DVT) - this is a clot in the leg veins. We give patients compression stockings to wear and sometimes a blood-thinning injection to prevent this. If not treated a clot can break off and become lodged in the circulation to the lungs (pulmonary embolism) which can be serious.

Bleeding and infection - the drain that is left in the armpit will usually prevent the build up of

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any blood removed. You will usually have a course of antibiotics while the drain is in place to reduce the risk of infection.

Nerve damage - the inside of the upper arm will be permanently numb as the nerve for this area travels through the group of lymph nodes we are removing. Some of the nerves affecting shoulder movement or arm sensation may not function properly after the operation - usually (but not always) this gets better over time.

Wound breakdown - if the skin breaks down it can usually be treated with dressings, but occasionally another operation may be required.

Seroma - this is a collection of fluid in the armpit, and is a very common problem after this operation. This will get better over time, but we may need to remove the fluid in the dressing clinic using a needle and syringe. This may need to be repeated several times.

Lymphoedema - this is a permanent swelling of the arm which can happen once the lymph nodes have been removed. If this happens we will refer you to the lymphoedema nurse.

What happens before the operation?

You will usually attend a pre-assessment appointment before your operation. At this appointment you will see a nurse and sometimes an anaesthetist. Any necessary tests (including blood tests) will be done so that everything runs smoothly on the day of the operation.

What happens before my operation?

You will be asked to come into hospital on the day of your operation. Please bring all your regular medications and clothes for their stay. You will be asked to remove any jewellery, especially any rings on fingers. You will be seen by both your surgeon and anaesthetist. Once you have had a chance to ask any questions you have, your surgeon will ask you to sign a consent form.

What happens during my operation?

A cut is made in the skin under your armpit, through which the lymph nodes are removed. These lymph nodes are sent to the laboratory to be examined.

You will have a wound drain to drain extra fluid from around the wound.

The stitches used to close the wound are usually dissolvable. A dressing is placed over the wound.

What happens after my operation?

When you wake up after the operation, you may have some pain: please let your nurse know so that they can give you some painkillers.

The drain stays in place for a number of days, until the amount of fluid coming out is small enough that it is safe to be removed. You may be able to go home with the drain still in place: in this case Your nurse will tell you when you need to come back to the Burns and Plastic Dressing Clinic at Leicester Royal Infirmary to have the drain removed.

Following your operation, you will be encouraged to move around to reduce the chances of developing a deep vein thrombosis (DVT). You can also start to exercise your arm with gentle stretches. Try to touch the back of your head and your lower back with the hand on the side of your operation. This may be uncomfortable with the drain in, but should be possible to do.

Going home

It is important to keep moving at home but you should avoid strenuous activities. You may find you are tired after the operation and you should return to your usual activities slowly. When resting you should elevate the arm that has been operated on.

Wound care

Please contact us if you have any signs of infection, including increasing pain, redness, swelling and oozing from the wound or a temperature higher than 38°C.

You can shower unless your consultant has told you not to. Take care not to spray deodorants directly onto the wound and to gently pat (not rub) the dressings dry with a towel afterwards.

Driving

You can start driving once you feel well, alert and able to perform an emergency stop. This is usually after about four weeks. It is advisable to check with your insurance company before returning to driving, as this may affect your cover.

Follow-up

When you go home you will be given an appointment to be seen in the Burns and Plastic Dressing Clinic at Leicester Royal Infirmary for wound care.

If there are any problems between visits, patients can always phone up and bring their appointment forward.

All patients who have had an axillary lymph node clearance will be discussed at the skin cancer multidisciplinary (MDT) team meeting. This is a meeting of specialists, including a plastic surgeon, dermatologist, oncologist, radiologist, histopathologist and specialist skin cancer nurse. At this meeting, the team will look at the tissue and decide if any further treatment is needed.

You will then receive a clinic appointment so that your team can discuss the results and whether any further treatment is needed.

How long will I need off work?

Most patients recover well and return to work and recreational activities about four to six weeks after the surgery. This, however, will depend on the nature of your job and the activities you participate in.

The scar in your armpit will improve over time and may take 18 months to settle completely. Once the wound has healed you will be given information on scar massage. You should massage and moisturise the scar for three months following the operation.

Further information

If you require any further information regarding the operation, please telephone

Skin cancer nurse specialists (key workers)

Karen Elton and Lucy England 0116 258 6170

Skin cancer support worker

Donna Kirby 0116 258 6170

or one of our secretaries who can direct you further:

Consultants' secretaries:

0116 258 5851

0116 258 5286

0116 258 5786

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