

What happens after pituitary surgery

Department of Endocrinology

Who is my key worker?

Your key worker is a qualified endocrine nurse specialist who works closely with the ward staff and all the consultants to offer support, information and advice to you and your carers during your stay in the ward and when you are discharged.

Sara Canagon is based at Princess Royal Hospital, 01444 441881 Ext. 65660.

Sam Voss is based at the Royal Sussex County Hospital **01273** 696955 Ext. 64379.

Email address for all the above nurses is uhsussex.ens@nhs.net.

Why am I on hydrocortisone tablets?

Hydrocortisone tablets are prescribed for all patients after pituitary surgery.

- Hydrocortisone is similar to cortisol, one of the body's natural steroid hormones (chemical messengers).
- Without enough cortisol, you would become ill.
- Cortisol is produced by the adrenal glands in response to 'messenger hormone' instructions from the pituitary gland.
- After surgery, we will check whether or not your pituitary is still making these 'messenger hormones'.

How should I take my hydrocortisone tablets?

Usually after pituitary surgery we prescribe 15mg hydrocortisone to be taken first thing in the morning, and 5mg to be taken midafternoon, no later than 5pm. These doses of hydrocortisone can be taken on an empty stomach or with food.

For more information about hydrocortisone treatment and 'sick day rules' (what to do if you are ill) please read the patient information leaflet Long-term steroid hormone replacement therapy.

Your endocrine nurse specialist can also give you a copy.

How long do I need to take hydrocortisone for?

To assess whether or not you will need to continue hydrocortisone treatment long-term you have been given or sent a form to have your blood taken.

- This needs to be done at your local hospital approximately one week before your follow-up clinic appointment at the Royal Sussex County Hospital.
- You do not need to make an appointment but attend at 9 am.
 Please do not take your Hydrocortisone on the morning of the test but take it with you to have afterwards.
- You do continue to take your hydrocortisone as usual until the results are available.

If you need further information about hydrocortisone treatment, contact your key worker.

When can I blow my nose or sneeze?

The surgeons recommend that you wait for four weeks after pituitary surgery before you blow your nose or sneeze. If you have to sneeze, do so through an open mouth. Though this sounds odd, most patients manage it! This is to reduce the risk of infections going up through the surgical site.

What should I do if I have a headache?

You may get a headache after this type of operation. If your headache is severe or persistent or you are worried, please ring 01273 696955 and ask to be put through to the Neurosurgical Ward for advice.

If you have a headache associated with a fever (high temperature), a stiff neck, or a feeling that bright light bothers you, you should seek immediate medical advice from your nearest Accident and Emergency department, as this could be meningitis (an infection of the membrane lining the brain).

What should I do if I experience other problems? Feeling thirsty and passing lots of urine

If you start to pass a lot of urine (for example, if you pass the equivalent of a large cupful every hour for three hours) and/or if you feel very thirsty, contact your key worker. You should drink water if you are feeling thirsty.

Sometimes pituitary surgery affects your ability to retain water (diabetes insipidus). If this occurs, it usually settles down after a few days. However it may last longer and need hormone treatment.

Leaking clear fluid from your nose or throat

If you experience a clear fluid, like salt-water, dripping down the back of your throat or through your nose, seek immediate medical advice from your nearest Accident and Emergency department. This could be a leak of cerebrospinal fluid (the fluid that bathes the brain and spinal cord) which would need treatment.

Loss of vision

If your vision deteriorates, seek immediate medical advice from your nearest Accident and Emergency department, telling them that you recently had pituitary surgery.

Taste or smell

You may notice that your sense of taste or smell has been affected by the surgery. Although this is quite common immediately after the operation, it is usually a temporary problem which recovers with time.

When can I start driving?

- This will depend on the type of operation you had, your eye-sight (field of vision) and how you feel.
- If your vision is normal and you have had standard pituitary surgery through the nose (trans-sphenoidal surgery) there is no legal driving restriction.
- It is sensible to wait a few weeks after you return home and then only to drive short distances at first.
- If you have had surgery through any other route (a craniotomy), if you have had any fits or seizures, or if your vision is impaired, you should consult your neurosurgeon for further advice and inform the DVLA.
- Always inform your insurance company about any changes in your health.
- If you are not sure, seek further advice from the DVLA, particularly if you hold a Group 2 licence (for larger lorries, buses etc).

When can I start work?

We usually recommend 4-6 weeks off work after pituitary surgery, but this will depend on your type of work and your recovery from the operation. You may need to discuss this with your employer, who could arrange for an occupational health specialist to help with this decision. If you need a Certificate of Sickness for your employer these can be obtained from the ward before your discharge or your GP when you get home.

When can I plan to fly?

Again this will depend on the type of operation you had and your rate of recovery. You can ask when you attend your follow-up appointment at the Combined Pituitary Clinic at Hurstwood Park.

Always inform your insurance company about any change in your health as your travel insurance will not be valid if you have not declared all of your medical history.

When can I resume sexual relations?

There is no particular time restriction to sexual activity; this will depend on how you and your partner feel after your operation. Sometimes the regulation of sex hormone production (oestrogen in women and testosterone in men) is affected by pituitary surgery and levels may be low. This will be checked and hormone replacement therapy advised if necessary.

What about alcohol?

You can drink alcohol after your operation, but we recommend no more than one or two units per day (one unit is a small glass of wine, a single measure of spirits or half a pint of beer).

Nasal douching

After surgery, your surgeon may recommend nasal douching to help clear any nasal crusting and debris if appropriate. Patients have reported they feel their nasal passages open up quicker and sometimes a more rapid recovery in the sense of smell. Your key worker will inform you of your surgeon's plan. If recommended, this would initially be four times a day and as your nose clears up you may reduce the frequency to twice a day. We recommend at least 6 to 8 weeks of douching. There are many propriety products in the market such as NeilMed Rinse® (you would need to make up the solution) or Sterimar® (a ready to use spray). Alternatively you can make up a solution at home (please ask your key worker for a leaflet).

Stitches

One of the benefits of endoscopic surgery is that stitches are usually not required in or around the nose. In some cases, a repair is required and performed with fat and or facia from the thigh or stomach, you will have stitches or skin clips placed in these areas and these can be removed after 7 to 10 days by a nurse at your local GP practice.

What will the follow-up arrangements be after I go home?

You will be reviewed in the Combined Pituitary Clinic at the Royal Sussex County Hospital 6 to 8 weeks after your operation, where you will see the neurosurgeon, an endocrinologist and an endocrine nurse specialist.

You will have a repeat pituitary MRI scan 3 months after your operation, and you may also have assessments of your vision (visual field tests).

Most pituitary patients require life-long follow-up to continue to check on their hormone status, scan appearances and vision. With time, these appointments and tests become much less frequent.

Further information and support Endocrine specialist nurses

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Princess Royal Hospital, Haywards Heath

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If you have any urgent or emergency questions then your GP can advise you or they will contact the hospital on your behalf.

Patient self-help groups and further information:

The Pituitary Foundation

Website: www.pituitary.org.uk

This leaflet is intended for patients receiving care in Brighton & Hove or Haywards Heath

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