



Serene Bold Health Clinic

Phone: 281-944-5692

www.Sereneboldhealthclinic.com

Seroma Aspiration

This leaflet explains more about seroma aspiration, including the benefits, risks and any alternatives and what you can expect.

What is a seroma?

A seroma is a collection of straw-colored fluid under the skin that can occur after an operation. It can occur when tissue is removed from the body during an operation leaving a space which sometimes fills with fluid. This space eventually gets filled with scar tissue but until this occurs the seroma can collect. The body will often re-absorb the fluid itself without any intervention, but this may take weeks to months to resolve. In some cases, if there is an excessive amount of fluid, the seroma is very painful or it is putting a strain on the stitch line from surgery, it may have to be drained and this is called a seroma aspiration. This involves inserting a needle under the skin and attaching it to a syringe to aspirate the fluid.

Why should I have a seroma aspiration?

In many cases the seroma will reabsorb. However, if the seroma is painful an aspiration can relieve the pain. If the swelling is putting strain on the stitch it may result in the wound opening up and leaking if it is not aspirated.

What are the risks?

- Infection - Although every precaution is taken to avoid infection, inserting a needle into skin provides an entry point for bacteria which can lead to an infection. If you notice signs of redness, increased pain and swelling you need to seek medical intervention immediately. You can contact your surgeon, schedule a virtual visit/ or in-person visit in our clinic (**Serene Bold Health Clinic | Phone: 281-944-5692**) or visit your nearest urgent care – whichever means you get seen on the day you notice these signs.
- Re-occurrence of the seroma. It is common for the seroma to re-occur as the space underneath the skin where fluid collects can take some time to fill with scar tissue.
- Bleeding - There is a risk of causing bleeding when carrying out the aspiration. This will be dealt with at the time.
- Pneumothorax - There is a very small risk of pneumothorax if the aspiration is in the chest or back area. This means air enters the plural cavity and results in shortness of breath. This would occur at the time of the aspiration and would be dealt with by the team.



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Are there any alternatives?

If there is no pain or strain on the stitch line most seromas will be left to re-absorb. If it is causing too much pressure on the skin that pain or wound leakage results, then it will be recommended. However, if you choose not to have an aspiration it will not be done. This may result in fluid leaking through the stitch line. In very few cases the seroma forms a capsule and becomes permanent. This can only be treated with surgery to remove the capsule but is rare.

How can I prepare for a seroma aspiration?

The procedure can be done in clinic. You may be asked to get a support garment to put on after the aspiration. This will depend on the part of the body affected. The nurse in the clinic will discuss this with you.

What happens during a seroma aspiration?

A nurse or doctor trained in seroma aspiration will carry out the procedure.

- Your skin will be cleansed around the area of the seroma.
- A needle will be inserted (often through the existing stitch line) and attached to a syringe or drainage bottle. This is usually painless as the area is often still numb from surgery but should be no more than a “pin prick” sensation.
- The fluid will then be drawn out (aspirated) until the area is relatively flat or no more can be aspirated.
- A small dressing will be placed over the area.
- Depending on the part of the body, you may be advised to wear a compression garment if tolerated to apply pressure over the affected area to help prevent the seroma from re-occurring, e.g. if in the groin or chest.
- If the seroma is not resolving despite aspiration the team may arrange an ultrasound scan that estimates the size of the collection and in some cases uses this to guide a full aspiration. If there is a need for this it will be discussed with you by one of the team.

Will I feel any pain?

You may feel a “pin prick” sensation when the needle is inserted but it should not be painful.

What happens after a seroma aspiration?

You will be asked to monitor the area for any signs of redness that may indicate there is an infection. Depending on the part of the body you may be advised to purchase a support garment to reduce the chance of the seroma collecting again.



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What do I need to do after I go home?

There will be a plaster applied to where the needle was inserted. This can be removed at 24 hours. You need to monitor the area for the swelling re-occurring or signs of infection. The nurse will advise you about resting the area to try to reduce the seroma re-collecting.

Will I have a follow-up appointment?

Depending on the amount of fluid aspirated you may be given an appointment or advised to make a further appointment if the fluid re-collects.