

After HIPEC Surgery: In the Hospital

This factsheet explains important information about the hospital care you will have after Hyperthermic Intraperitoneal Chemotherapy (HIPEC) surgery.

After your surgery

When the surgery is over, your care team will take you to the intensive care unit on the fifth floor. When your care team decides you are ready, your family can join you.

- Monitors attached to your body will watch your heart rate, blood pressure, and oxygen levels.
- You may get oxygen through a face mask or a tube in your nose.
- You may have a tube going from your stomach and out your nose to drain stomach fluids.
- You will have a catheter draining your bladder.
- You will have a tube going into a vein in your arm (IV) to give you fluids, nutrition, and medicines.
- You will have a stretchy band around your belly to support your muscles.
- You may have a drainage tube to remove fluids from your abdomen.
- Your care team will wear gloves, gowns, and masks while they are with you. This is for safety after your chemotherapy.

Activity

Your nurses will get you out of bed as soon as possible. Activity such as moving and walking is the most important part of your recovery:

- It gets your blood flowing to prevent clots in the legs.
- It opens your lungs to help prevent pneumonia, a lung infection.
- It restarts your bowels so you can eat again.
- It will help you heal faster.

What can I eat?

In the first days after surgery, you will get fluids, nutrition, and medicine through your IV. Most people have a very dry mouth after surgery. Your care team will give you ice chips to help with this.

You will start a liquid diet 3–4 days after your surgery. If drinks with caffeine such as coffee, tea, and soda are part of your normal diet, you can drink them after you start a liquid diet.

After that, your care team will let you add solid foods until you are eating normally. Talk with your doctor or dietitian if you have questions about your diet.

How will you control my pain?

After surgery, some pain is normal. The goal is for you to feel comfortable enough to sleep and move around as needed. Your doctor may have you use one or more ways to control pain. Each has side effects and benefits. Be sure to talk with your doctor.

Epidural infusion: Pain medicine goes to your spinal cord and nerves through a soft tube in your back. The medicine lessens the pain you feel. Your anesthesiologist puts the tube in place before surgery. It can stay in place for a few days. Some patients may not be able to have an epidural infusion.

Patient-controlled analgesia (PCA): “Analgesia” means pain relief. With this treatment, an automatic pump puts pain medicine into your IV. When you are in pain, you can press a button and the pump will give you a set amount of medicine. Safety settings keep the pump from giving you too much medicine.

Oral medicines (pain pills): Many types of pain pills are available. Your doctor will talk about the options with you. You will start on pain pills before you go home from the hospital. Talk with your doctor or nurse about how to take these medicines and manage side effects.

How long will my recovery take?

Because HIPEC involves major surgery, you will stay in the hospital 7–10 days if there are no complications.

You will need 10–12 weeks more to recover at home. Recovery time is different for each person.

If you have questions

If you have questions during your hospital stay, please use the “Call Nurse” button in your room.

If you have questions after you leave the hospital, call your surgeon’s office: _____