Spleen Removal or Nonworking Spleen

Your spleen was severely injured, so it doesn’t work normally. The doctor may have removed your nonworking spleen in a surgery called a splenectomy. Or, the treatment team may have decided to leave it in place. This fact sheet explains how to take care of yourself as you recover and protect your health in the future.

What is the spleen?
The spleen is an organ in the upper left part of the abdomen. It helps to filter bacteria (germs) from your blood. Without a working spleen, you have more risk for serious infections. You will need to take extra steps to protect your health.

Activity do’s and don’ts

Until your doctor says it’s okay, DON’T do these activities:

• Don’t lift more than 10 pounds. In other words, don’t lift anything heavier than a gallon of milk.
• Don’t push or pull anything heavy. For example, don’t vacuum, mow, or shovel.
• Don’t do any type of contact sports or high-impact exercise. For example, avoid:
  – Football, basketball, or wrestling
  – Sports that require a helmet
  – Hiking, biking, or running
  – Horseback riding or ATV riding
  – Aerobics, crunches, or sit-ups

DO these activities:

• Walk, do low-impact exercise, and resume normal daily activities. (You may resume sexual activity when you feel ready.) Be careful not to overdo these activities.
• Take care of your surgical wound, if the doctor removed your spleen. See the details at right.
• Keep your follow-up appointment with your primary care provider or the Trauma Service.
• You can return to work when your primary healthcare provider says it’s okay.

Warning signs — when to get help

If you have any of these symptoms, call the Trauma Service or go to the nearest emergency department:

• Lightheadedness or dizziness, especially if it gets worse
• Increased pain in your abdomen
• Swelling in your abdomen, feeling overly full
• Fever of 102°F or higher
• Nausea or vomiting that doesn’t get better
• Constipation that doesn’t get better
• Redness that is hot or tender around a surgical wound
• Drainage that looks like pus (white, yellow, green or smelly) from a surgical wound

Taking care of your surgical wound

If you had surgery to remove your spleen, here’s how to take care of your surgical wound:

• If there are narrow strips of tape on your abdomen (Steri-strips), don’t remove them. Let them fall off on their own.
• Keep the strips of tape clean. After washing them, don’t rub them dry. Blot them dry, or dry them with a blow dryer on the COOL or LOW setting.
• Don’t bathe, swim, or use a sauna until the surgical wound is healed. (You may shower as you wish.)
Protecting your health

Because you don’t have a working spleen, you were given extra immunizations (shots) to protect you from infection:

- A yearly flu shot, plus haemophilus Influenzae B
- Meningococcus (MCV4) to protect against meningitis
- Pneumovax (PPSV23) to protect against pneumonia

You’ll also need “booster” shots that you can get through your regular doctor or your health department:

- Another meningococcus vaccine in 2 months, then every 5 years
- A pneumovax vaccine in 5 years, then at age 65

Take these steps to protect yourself from serious infections or other complications in the future:

- Consider wearing a medic alert bracelet that says your spleen was removed. (The medical term for this is “asplenic.”) Order these from major pharmacies online.
- Whenever you have signs or symptoms of infection, see a doctor right away. Signs include a fever, sore throat, or coughing up phlegm. Tell the doctor you have had your spleen removed.
- If you ever have an animal or tick bite (no matter how small), see your doctor.
- Before a trip to any other country, see your doctor or your local health department. Without a spleen, you have a higher risk of getting diseases such as malaria. Your doctor can make sure you have the right immunizations for the country you’re visiting. Your doctor might also prescribe antibiotics for you to take before or during your trip.

About pain medication

Pain medication won’t relieve 100% of your pain. But it will make the pain more tolerable so you can do daily activities. Your need for pain medication should decrease over time, until eventually you don’t need it at all.

Safety with opioid medication

Opioids are strong medications that change the way the brain processes pain. Examples include hydrocodone and oxycodone. Opioids can be dangerous if you don’t use them correctly. Follow these rules for safety:

- Don’t drink alcohol or use recreational drugs while taking this type of medication.
- Don’t take sleep aids, anti-anxiety medication, or other pain relievers without your doctor’s permission. Do not take more than 3,000 mg of acetaminophen (Tylenol) every 24 hours. Some pain medications already contain acetaminophen.
- Don’t drive a car, operate dangerous machinery, or care for others while taking the medication.
- Never share your medication. Don’t give a pill to a friend or family member, even if the person is in pain. Lock up your medication so others cannot take it.
- Take the smallest dose possible to help you, for the shortest time possible. When the pain gets better, stop taking the medication. To avoid side effects from stopping suddenly, you may want to reduce the dose a little at a time for a few days.

Watch for side effects.

- The most common effect is constipation. Drink extra water and take a laxative or stool softener if needed.
- The most serious side effect is decreased breathing, especially while you sleep. If family or friends notice this, they should get medical help right away.

When you’ve finished taking the medication, get rid of leftover pills by dropping them off at a drug collection site. For a list of sites, see useonlyasdirected.org/safe-disposal-drop-off-locator.

The Trauma Service and pain medication

The Trauma Service team can address only short-term pain. See the policies below:

- When you leave the hospital, you’ll be prescribed enough pain medication to last until your follow-up visit, if taken as directed. During the follow-up visit, you may be given one refill prescription, if needed.
- The Trauma Service does NOT refill pain medications over the phone. The Trauma Service will NOT replace a prescription that’s lost or stolen, or refill a prescription if you run out of medication early.

If your pain continues beyond 3 or 4 weeks, you’ll need to see your primary care provider about managing pain.