Spleen disorders

Care after the removal of the spleen (splenectomy) or if your spleen doesn’t work properly (functional hyposplenism)

What is the spleen?
Your spleen is an organ that usually sits underneath your ribs on the left side. It is purplish red in colour and is usually about 12x7 cm big. The spleen has several functions, which include:

• Filtering out germs that can cause serious infections
• Removing blood cells that are damaged or old
• Creating some of the white blood cells that fight infection
• Storing extra blood when it isn’t needed

What can happen if I don’t have a functional spleen (spleen has been removed or doesn’t work properly)?
Because your spleen is important for your body’s defence against germs, when your spleen is removed or doesn’t work properly you are at higher risk of infection, particularly from certain types of bacteria. This is very important as, although these infections do not happen very often, they can be life-threatening – so it’s important to take precautions to try to stop this from happening.

A way of thinking about this risk is that if 100 people without functioning spleens were followed for 10 years, between 1 and 5 of them would have a severe infection within that period of time. The risk is highest in children and in adults in the first few years after the spleen is removed. For people whose spleen is still present but doesn’t work properly the risk is high for the rest of your life.

Why do people have their spleen removed (splenectomy)?
People may have their spleen removed because of:

• Trauma (accidents)
• Cancer
• Blood diseases

What conditions can lead to my spleen not working properly (also called “functional hyposplenism”)?

• Conditions that affect the immune system (eg rheumatoid arthritis)
• Some diseases of the blood (eg sickle cell disease); and
• Some diseases where the normal tissue of the spleen is replaced by abnormal tissue (eg amyloidosis)

These can sometimes lead to the spleen not working properly. You can discuss whether this is a risk to you with your doctor.

Get vaccinated
It is important to get vaccinated against some of the bacteria that can cause severe disease for which we have vaccines available. Pneumococcal vaccination, meningooccal vaccination and Hib vaccination are all important. It’s important to discuss with your doctor how frequently you need these vaccinations – some will be a once-off, others will need booster doses.

An annual seasonal influenza vaccination is also recommended.

You may need additional vaccines when travelling overseas – speak to your GP or travel doctor and make sure they know you don’t have a functional spleen as the advice to you may be different to that of other members of your travelling party.
Know when to take antibiotic medication

Antibiotics are often prescribed to be taken daily for the first two years after you have had your spleen removed, some people may be advised to take them daily for life. This is a hard thing to do so make sure you discuss it with your doctor if you are thinking of stopping the antibiotics and always make sure you have an emergency supply of antibiotics to hand (see below). Very young children may need to take them daily until they are vaccinated against pneumococcal infection with appropriate vaccines.

People without a functional spleen are advised to keep a full course of antibiotics on their person at all times.

You should start taking the medication as soon as you get any sign of infection – such as:

- chills
- fever
- a sore throat
- severe headache
- new abdominal pain; or
- new cough.

Ask your prescribing doctor how much you should take. After taking the first dose IMMEDIATE health advice should be sought to determine whether further treatment or testing is necessary. Make sure the person who gives you that advice knows that you don’t have a functional spleen and understands that you are at high risk of severe bacterial infection.

Similarly you should seek urgent treatment for any animal bites that break the skin and take any antibiotics you are given to prevent infection until you have completed the course.

Being careful when travelling

Make sure you talk to your doctor or to a travel medicine centre before embarking on an overseas journey and make sure they consider the fact that you don’t have a functional spleen in their advice to you. Some diseases that are uncommon or not present in Australia (eg malaria, some types of meningococcal disease) can severely affect people without a spleen so extra medications, precautions or vaccinations may be required to help you travel more safely. You may be advised against travelling to areas where there is Falciparum malaria.

You should also make sure you carry your emergency antibiotics with you at all times.

If you are travelling to a country where English is not widely spoken think about asking someone who speaks/writes in that language to translate your patient advice card into the language of the country you are visiting.

Inform healthcare providers

Make sure that you tell your health care providers, especially doctors and dentists, that you don’t have a functional spleen. We’ve provided a card that you can print out and ask your usual treating doctor to check to help make sure people know that not having a spleen can put you at higher risk of severe infection. You should carry this card at all times.

Wear a Medic-Alert® (or similar) bracelet or necklace

Having a bracelet or necklace that has important information about your condition or a number to call for additional information may help healthcare professionals manage you if you forget your wallet card or if you are severely injured and are separated from your wallet. Talk to your GP about your options.

Remember:
Print and carry your spleen card!

You are susceptible to overwhelming infection which can progress very rapidly. Please show this card to the doctor or nurse if you feel ill or severely injured.

I have no functioning spleen

Note to health care providers: Patients who do not have a functioning spleen have a significantly increased risk of rapidly progressive overwhelming infection, despite vaccination or antibiotic prophylaxis. If undergoing surgical procedures they will require appropriate antibiotic prophylaxis. If travelling to a malaria-endemic area and febrile illness must be excluded and careful attention paid to the potential for rapid deterioration.

Contact details

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