

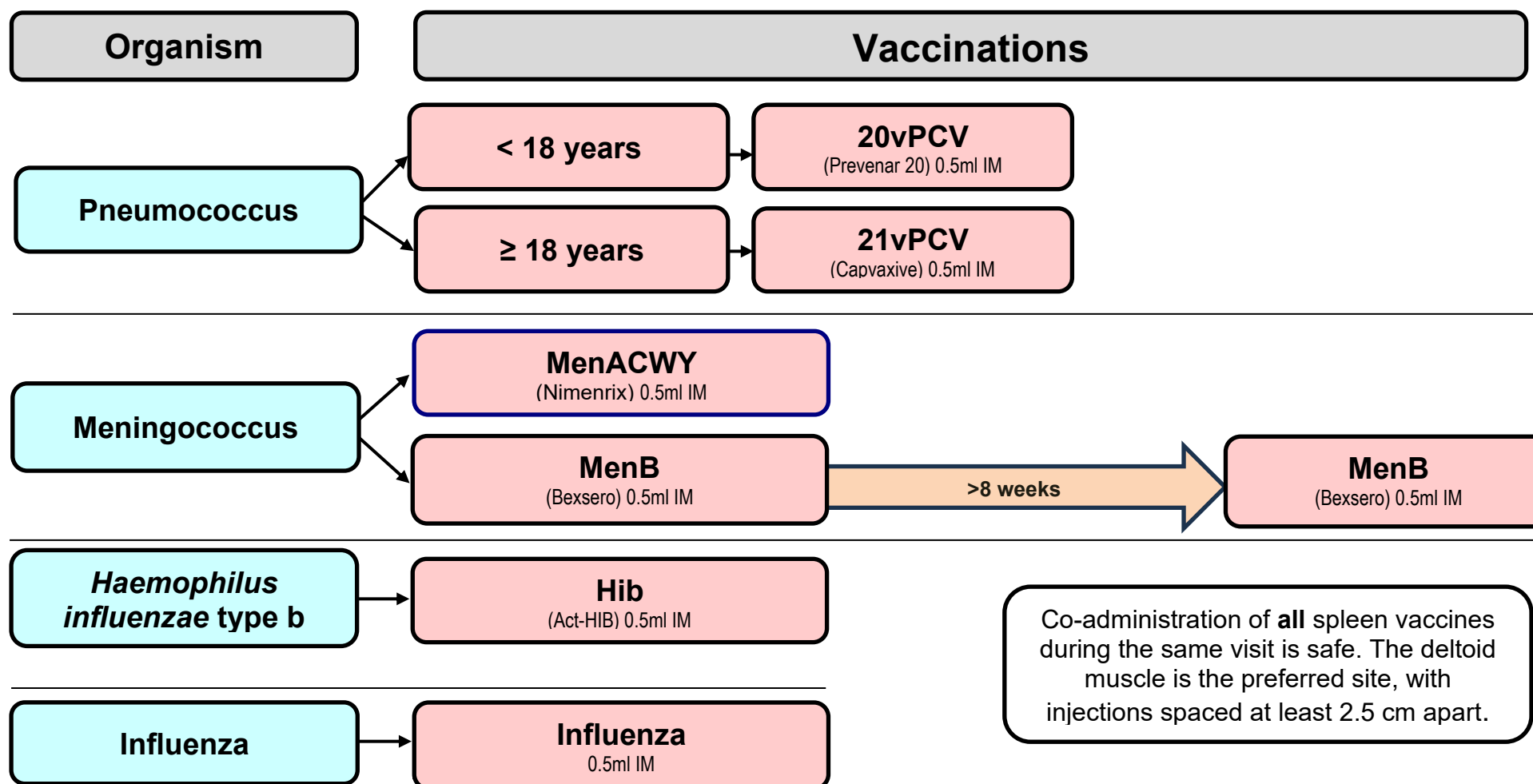
Spleen Australia

Guidelines for Splenic Artery Embolisation

Disclaimer: This guideline is intended for use by clinicians.

These guidelines have been produced to guide clinical decision making for healthcare practitioners. Clinical judgement should always be applied. These guidelines are based on expert medical opinion and are not included in the [Australian Immunisation Handbook](#)

Vaccinations can be given 2-5 days post-procedure or immediately prior to discharge



Additional information

Not all patients undergoing Splenic Artery Embolisation (SAE) will lose splenic function, therefore splenic function should be assessed following SAE. Patients are recommended to receive vaccines to ensure they are protected until results of splenic testing are available.

Vaccine administration	SAE patients are eligible to receive government funded vaccines as per the National Immunisation Program.
Other vaccines	• Influenza vaccines are recommended due to higher risk of influenza or severe outcomes from influenza (see Influenza recommendations) • COVID 19 vaccines are recommended (see COVID-19 recommendations)
Antibiotics	NO prophylaxis or emergency supply of antibiotics required
Follow up	Review by healthcare provider after Full Blood Examination (FBE) <u>with film</u> . Please email results to spleenaustralia@alfred.org.au
Blood tests	TEST 1: To assess for hyposplenic changes, including Howell-Jolly bodies (HJB), order a FBE with blood film. Assess for hyposplenic changes and/or the presence of HJB, acanthocytes, and target cells >2 weeks after SAE. • If HJB or hyposplenic changes are not detected, then patient is considered to have no evidence of hyposplenism • If HJB or hyposplenic changes are detected this indicates splenic dysfunction (hyposplenism): register patient with Spleen Australia. • The patient will need to follow medical recommendations for asplenia/hyposplenism, which is a different guideline. • Either email spleenaustralia@alfred.org.au or call 03 9076 3828 for further assistance TEST 2: If further clarification of spleen function is required then an IgM memory B cell test can be performed. This blood test is offered at The Alfred Hospital (Melbourne) and additional hospitals around Australia. Blood is collected in a <u>5ml EDTA tube</u> and should be performed more than <u>6 months</u> after SAE.
Laboratory information	These tests are usually performed on automated pathology platforms, which often fail to detect asplenia. To avoid patients needing repeat blood tests, highlight the tests in order to prompt manual review by the laboratory.
Patient education	• Explain the reasons for vaccinations and the importance of follow-up testing for hyposplenism. • Educate the patient on recognising signs and symptoms a bacterial infection (e.g. fever, shivers, chills, and/or vomiting/diarrhoea). • Until spleen function is confirmed, patients should seek prompt medical attention if signs/symptoms of bacterial infection occur.
How to register	If you have any questions, please contact Spleen Australia. Website: www.spleen.org.au Telephone: 03 9076 3828 Email: spleenaustralia@alfred.org.au Fax: 03 9076 7946