

# **Lumbar Puncture in Children**

This leaflet explains lumbar puncture in children, including the benefits, risks and any alternatives and what you can expect when you come to hospital. If you have any further questions, please speak to a doctor or nurse caring for your child.

## What is a lumbar puncture?

A lumbar puncture (LP) is a procedure commonly performed in paediatrics. It involves collecting a sample of fluid from near the base of the spine. This fluid is called cerebrospinal fluid (CSF). CSF is the fluid around the brain and the spinal cord and obtaining a sample of this fluid allows us to diagnose or rule out certain important medical conditions.

# Why does my child need a lumbar puncture?

A lumbar puncture (LP) is needed to test the fluid around the brain and spinal cord and check if a child has meningitis, certain neurological disorders, cancers of the brain and spinal cord. It is also used to measure intracranial pressure, administer medications or diagnostic agents. If the test suggests a diagnosis, children will need other tests and treatment in hospital.

Meningitis (a serious infection around the brain) may be suspected in some children who are unwell with a fever, especially in babies less than one month old. Early diagnosis of meningitis is very important for giving a child the best chance of a full recovery.

## What are the risks?

LPs are reasonably safe procedures. Sometimes doctors are not able to get fluid and they may have to try more than once. A small number of children may have a headache or backache for a day or two after the test. The risk of any serious complications, including bleeding, infection or damage to nerves, is extremely low. We take the sample in a sterile fashion to reduce the risk of infection. The place we take the test from is below where the spinal cord ends, so risk of contact with the spinal cord is minimal.

# Are there any alternatives?

Without an LP we may not be able to accurately diagnose a meningitis. If meningitis is not treated properly, it could lead to serious consequences such as serious disability and even death. Tests other than LP may be needed for other conditions.

# Can I be with my child in the room?

It is common for parents to wait outside the room as this is a sterile procedure and you will not be able to hold your baby or the equipment during the procedure. However, if you wish to be in the room, then you are welcome to be.

## Giving my consent (permission)

It is important that you feel involved in decisions about your baby's care. A doctor will have a discussion with you in person about the reason for the LP, the potential risks and benefits and to check that you agree for your child to have the procedure and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. Your child's nurse / doctor will be able to answer any further questions which you may have.

#### What happens during a lumbar puncture?

During an LP, a doctor uses a needle to get fluid (CSF) from the lower back. One member of our team will hold baby still, cuddled into a ball while lying on their side while a doctor inserts a small needle between the spinal bones. This needle does not go near the spinal cord.

#### Will my child feel any pain?

This procedure may be briefly uncomfortable. Babies are often provided with sucrose which acts as a painkiller in their age group.

#### What happens after an LP?

We will dress the insertion site with a sticking plaster which will eventually fall off. Your child will likely remain in hospital as we await results of certain tests or while on antibiotics.

### What do I need to do after I go home?

Your baby should be back to normal shortly after an LP. If you notice anything unusual, such as difficulty waking, abnormal movements or unresponsiveness, then alert a clinician immediately.

## Will I have a follow-up appointment?

Your child will likely be in hospital while we await the test results while your child is on treatment. Your paediatric team may organise follow-up appointments to continue if your child appears well enough to be at home.

#### **Contact us**

If you have any questions or concerns about your child, please contact the paediatric neuro clinical nurse specialists on 020 8725 2649 (Monday to Friday, 8am to 4pm). Out of hours, please contact Nicholls ward on 020 8725 2098.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit <u>www.stgeorges.nhs.uk</u>

#### Additional services

#### Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about

our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available: Monday, Tuesday and Thursday between 10am and 4pm Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays. Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

#### **NHS UK**

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. Web: www.nhs.uk

#### NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

#### AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



Reference: PAE\_LPC\_01 Published: January 2025 Review date: January 2027