A patient guide to a lumbar puncture

What is a lumbar puncture?

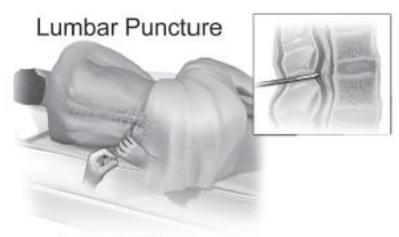
- A lumbar puncture (also called an LP) is a procedure used to obtain a body fluid called cerebrospinal fluid (CSF).
- CSF is the fluid that surrounds the brain and & spinal cord it helps to cushion and protect the area.

Why is a lumbar puncture performed?

The fluid obtained from the lumbar puncture is sent to the laboratory for examination. These results can help to provide information about a range of conditions affecting the brain and spinal cord (please ask your doctor if he/she has not explained the potential diagnosis to you).

How is the test performed?

The doctor performing this procedure will confirm your identity, explain in detail about this procedure, obtain your consent, and also ask if you have any allergies.



Lying Position

- You will be asked to lie on your side at the edge of a flat bed with your knees curled up towards your chest. Sometimes you may be required to adopt a sitting position with your hands supported on a table.
- The doctor will feel and sometimes mark a space (using a ball point pen or washable marker pen) in your lower back where the needle will be inserted.
- The skin around the lower back will be cleaned with antiseptic this will feel moist and sometimes cold.
- It is essential from this point on that you do not move unless the doctor asks you to.
- To make the area numb, a local anaesthetic is injected under the skin with a very fine needle this may sting/ burn for a few seconds.
- Once the area is numb another needle is used to reach the area where the CSF is found.
- It is normal to feel a pushing sensation or tingling, both of which may be uncomfortable.
 Sometimes the tingling sensation may travel down your leg. Please let your doctor know if this happens, but please try not to move.

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Information for Patients

- Once the fluid is reached, the doctor may measure the pressure of this fluid using a small plastic tube called a manometer. The doctor will then take several samples of fluid.
- After the lumbar puncture is completed, a simple blood test will be performed. This blood test
 will be used to compare the levels of some proteins, sugar and other compounds seen in your
 CSF with the levels in your blood.
- Following the lumbar puncture, we recommend that you lie flat for at least 30 minutes (or as specified by the doctor performing the procedure) and drink plenty of fluids. Fluids containing caffeine may play a role in reducing headaches.
- You will have a small dressing over your puncture site. Please take care not to get this wet for the next 24 hours. After 24 hours, you can remove the dressing and can have a shower or bath. If you notice any signs of potential infection, such as increased pain, redness, swelling, or discharge around the puncture site, please book an appointment with your GP so they can have a look at it.

What are the risks of the procedure?

As with any procedure there are always risks involved. For a lumbar puncture these include:

- Pain at the site of injection or backache.
- Persistent headache this can last between 2–5 days.
- Infection this is rare but precautions are taken to minimise this risk.
- Bleeding at the site of injection if you are taking any blood thinning medication or have a bleeding disorder please inform the doctor beforehand.
- Damage to nerves causing problems with sensation and power in the legs –this is rare but it is important to be aware of this risk.
- If you develop a fever or persistent tingling in the legs after getting home, please contact your GP.
- Should you have further questions, please direct them to the doctor who will be consenting or performing the lumbar puncture.

Frequently Asked Questions

Q. How long do the results of the lumbar puncture take to come back?

A. Some tests come back on the same day; other more specialised tests can take a few days or even weeks. Your doctor would tell you directly (especially if you are inpatient) or write back to your GP with the results.

Q. How long does the procedure take?

A. This can vary but usually takes between 20–40 minutes. Before the procedure the doctor will take time to explain the procedure, set up the equipment and ensure you are in the right position for the procedure.

Q. Should I bring someone with me (if done as an outpatient procedure)?

A. This is not essential, but we would recommend that a friend or relative brings you in, to avoid having to drive back or if you feel a mild backache or headache.

Q. Will the body produce any more CSF if you have drained some of it?

A. Yes. CSF is continuously produced and the small quantity that is taken will be replenished within a matter of hours.

Q. What should I do when I get home?

A. Drink plenty of fluids, and if there is any headache, take general over the counter pain relief. Remember to follow the instructions on the packet.

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Information for Patients

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