Calderdale and Huddersfield
NHS Foundation Trust

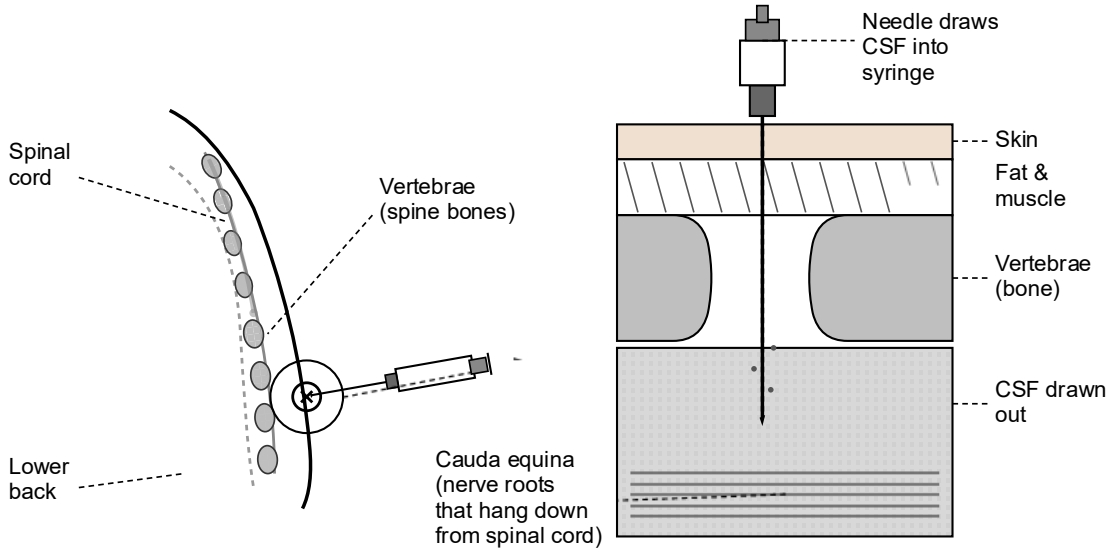
Patient Information Leaflet

Lumbar Puncture (LP) - Patient Information Leaflet – Same Day Emergency Care (SDEC)

Following your visit to the Same Day Emergency Centre, you are going to have a **lumbar puncture/LP** (a small needle procedure to sample fluid from around the spinal cord).

What is a lumbar puncture?

A lumbar puncture is a procedure where a thin needle is inserted into the lower back to take a small sample of the fluid that surrounds the brain and spinal cord. This fluid is called cerebrospinal fluid (CSF). The needle is placed below where the spinal cord ends, so the spinal cord itself is not touched. Local anaesthetic is used to numb the skin, and the procedure usually takes around 20 to 30 minutes.



Lumbar puncture

Why are we performing a lumbar puncture?

A lumbar puncture is most often performed to help us make a diagnosis and work out what is causing your symptoms. Occasionally it is also used as a treatment, to help relieve your symptoms.

Diagnostic reasons include:

- Checking for infection of the brain and spinal cord, such as meningitis or encephalitis.
- Looking for bleeding around the brain, such as a subarachnoid haemorrhage.

- Investigating conditions affecting the nervous system, such as multiple sclerosis or Guillain-Barré syndrome.
- Measuring the pressure of the fluid around the brain, which can be raised in certain conditions.
- Checking for certain cancers that can spread to the fluid around the brain.

Therapeutic reasons include:

- Relieving pressure in conditions where CSF pressure is too high, such as idiopathic intracranial hypertension.
- Giving medication directly into the fluid around the spinal cord, such as chemotherapy or certain anaesthetics.

What happens during the procedure?

- You will usually lie on your side with your knees pulled up towards your chest or sit leaning forwards over a pillow. This position helps to open up the spaces between the bones of your spine.
- The skin on your lower back will be cleaned and local anaesthetic will be injected to numb the area. This may sting briefly.
- A thin needle is then passed carefully between the bones of your spine into the fluid space. You may feel a pushing sensation but it should not be painful.
- A small amount of fluid is collected into sample bottles. In some cases, the pressure of the fluid is measured.
- The needle is removed and a small dressing is placed over the site.

What are the risks and complications to be aware of?

Post-lumbar puncture headache - This is the most common side effect, affecting around 1 in 10 people. It is usually worse when standing and better when lying down. Most headaches settle within a few days with rest, fluids and simple painkillers. Occasionally, a small procedure called a blood patch is needed if the headache does not settle.

Back pain or soreness - Mild discomfort at the site of the needle is common and usually settles within a few days.

Bleeding or bruising - A small amount of bruising at the site is common. Significant bleeding is rare.

Infection - Infection of the skin or, very rarely, the fluid around the brain is possible. Strict sterile technique is used to minimise this risk.

Nerve irritation - You may feel a brief tingling or electric-shock sensation down one leg during the procedure. This usually settles quickly. Longer-lasting nerve problems are very rare.

After the procedure

- You will usually be asked to rest for a short period after the procedure.
- Drink plenty of fluids for the rest of the day - this may help reduce the risk of headache.
- Avoid heavy lifting or strenuous exercise for 24 to 48 hours.
- Results of the tests may take anywhere from a few hours to a few days, depending on what is being looked for. Your team will explain how and when you will get your results.

What should I do if I have any concerns after the procedure?

Please seek immediate medical attention by attending A&E or calling 999 if you experience:

- A severe headache that does not improve with rest and painkillers
- A high fever, neck stiffness or sensitivity to light
- New weakness, numbness or loss of bladder or bowel control
- Severe pain, redness or pus at the puncture site.

Please contact our SDEC department if you:

- are unsure about your results or follow-up plan
- have ongoing mild headache that is not settling after a few days
- are confused about your diagnosis.

Please contact your GP if you:

- have any other symptoms that are concerning or seem unusual
- have ongoing mild soreness at the puncture site.

Contact information

If you have concerns after leaving SDEC, please contact:

SDEC / Hospital Advice Line: _____

GP: _____

Out of hours: NHS 111

In an emergency, call 999.