Lumbar drain

A lumbar drain is a small, flexible tube placed in the lower back (lumbar) area. The tube drains the fluid that surrounds the brain and spinal cord; this relieves pressure. It may be used to drain and assess cerebrospinal fluid (CSF) for many different reasons. Talk to your child’s healthcare provider to find out why your child has the drain.

How does a lumbar drain work?

Doctors will place your child’s lumbar drain during surgery. Your child will receive medicines to help them sleep during the surgery. The doctor makes a small opening in the skin of the lower back. Then the doctor places the tube in the subarachnoid space of the lumbar area (see figure 1). This allows extra fluid to drain, which relieves pressure on the brain. Finally, the doctor stitches the tube in place.

The lumbar drain is hung on a pole close to your child’s bed. It is attached to a system that collects the extra CSF so your child’s healthcare providers can monitor and measure it.

It’s important that only a healthcare provider change the settings and height of the lumbar drain system. This keeps your child safe. While the drain is in place, your child may need to stay in bed to heal and allow the lumbar drain to work well. Talk with the healthcare provider about activities your child can or can’t do.

Healthcare providers watch and record the amount of fluid that collects in the bag. They ensure the drain site has a secure dressing. The drain is very carefully leveled so the right amount of CSF will drain. It is important to call your healthcare provider when:

• Your child feels sick or vomits.
• Your child cries more or is fussier than usual.
• Your child tells you about a headache or has a headache that gets worse.
• Your child is overly sleepy or hard to wake up.
• Your child pulls the lumbar tube out.
• The drainage system comes apart in any way.

Are there any side effects?

After a lumbar drain is placed, your child may experience:

• New emotions. Your child may be angry, scared, or confused. They may also think the lumbar drain is ugly. Be honest with your child and explain the need for the lumbar drain. Try to be supportive and sensitive to your child’s fears and self-image. If your child continues to need support, contact the unit’s child life specialist. If you or your child have questions, talk to your healthcare providers.
• **A headache.** Usually headaches are relieved after the lumbar drain is placed. If they continue, acetaminophen usually helps. Sometimes nurses will give your child stronger pain medicines for severe headaches.

• **Vomiting.** Vomiting is common after surgery. If your child is vomiting, their diet will be changed to clear liquids. Your child can slowly progress to solids when foods do not make them vomit. If vomiting continues, contact your healthcare provider.

• **Activity.** Your child may be upset that they can’t do many activities while the drain is in place. Explain that this is temporary to protect the drain from accidentally being pulled out. Contact your unit's child life specialist for activities to do while your child’s activity level is limited.

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**How is the lumbar drain removed?**

When the doctor removes the lumbar drain, they will remove the stitches and then gently slip the tube out. The doctor uses a stitch or two to close the opening. The doctor will remove the stitch during your child’s follow-up visit.

Once the doctor takes the drain out, it is a good idea to keep your child flat for 1–2 hours to prevent a headache. Until the body has sealed the inside opening on its own, the CSF can leak and cause a headache when your child moves around. Lying quietly helps the body to seal the hole. Follow the healthcare provider’s instructions about going home after a drain removal.