

Intrathecal catheter

Pain Management Patient Information Leaflet

Introduction

Welcome to The Dudley Group Pain Management Service. This leaflet will provide you and your relatives with information about intrathecal catheters. It includes what they are, the benefits and risks of them and how the catheter is put in.

What is an intrathecal catheter?

It is a specially designed length of thin plastic tubing. The material has been produced specially for use inside the human body. The catheter is sensitive to body temperature and is very soft and pliable once inside the body.

Intrathecal means that the catheter is inserted into your back into the space which contains the fluid that surrounds the brain and the spinal cord.

The catheter allows us to give you various pain-relieving medications, to work out which medications reduce the intensity of your pain. You will only have the catheter in while you are hospital and we will take it out before you leave.

What are the benefits?

- It helps the pain team determine which drugs influence and affect your pain, and which do not work for you. This can be used to develop a treatment plan for you.
- It is sometimes used as a trial to determine if you are suitable to have an implantable form of pain management.
- It is sometimes used to determine the level of drugs needed when you have been accepted for an implantable form of pain management.

What are the risks?

As with any surgical procedure, the insertion of an intrathecal catheter has some risks. It is important that we make you aware of these.

Infection

Although every effort is made to prevent this, it does sometimes happen. Therefore, if you have any of the following symptoms, please tell the nurse or doctor at once:

- Flu-like symptoms such as muscle or body aches, headache or a high temperature (fever/chills).
- Bright lights hurt your eyes.
- Any redness around the stitch of the catheter.
- Pain when you inject your medication through the catheter.
- Difficulty in injecting your medication through the catheter.
- Increased back pain.

Sensitivity to the medication prescribed

If you have any of the following symptoms, please tell the nurse or doctor at once as it may be a reaction to the medication:

- Increased feeling of sleepiness.
- Difficulty in getting your breath.
- Numbness in any part of your body, especially your legs.
- Itching.

Other risks of the medication include:

- Sudden collapse due to a reaction to the medication given.
- You may find it hard to pass water, particularly men.
- Damage to the spinal cord.
- Paralysis.
- Nausea or being sick.
- Headache – this is usually helped by taking pain relief like paracetamol so please speak to your nurse.

Although every effort is made to minimise the risks of this procedure, we cannot guarantee that you will not have any of these side effects.

If you have been given sedation:

The sedation we give patients for the procedure makes you comfortable but it may affect your memory for up to 24 hours. You may not remember anything about the procedure afterwards.

It may also affect your reflexes and judgement.

What are the alternatives?

You do not have to have this procedure and your consultant will discuss alternative treatments with you appropriate to your condition. If you prefer, you can continue to take your current painkilling medication without having any other treatment.

What happens when the catheter is put in?

This procedure is carried out in an operating theatre. A nurse will offer you a sedative to make you feel more relaxed and sleepy. If you want this, the nurse will put a small needle in the back of your hand and use this to give you the sedative.

The doctor firstly injects local anaesthetic into your back to make the area numb. You will feel a sharp sensation and stinging when the local anaesthetic is injected. This will only last a few seconds before it becomes numb.

Once the local anaesthetic has taken effect, the doctor will insert a small needle into your back and into the intrathecal space. This is the space where the fluid that surrounds the brain and spinal cord is located. Once the needle is in the right place, the doctor will insert the catheter and remove the needle.

You will feel some pushing and perhaps pressure whilst the catheter is being inserted. However, if you feel any pain, please let a member of staff know.

Once the catheter is in place, we secure it up your back and onto your shoulder with adhesive tape and a dressing. A syringe and filter are left attached.

We will give you a test dose of a drug while you are in the operating theatre. The purpose of this is to ensure the catheter has been placed correctly.

What happens after the procedure?

Once we know that the catheter is in the correct place, we will take you back to the ward.

The day after you have had the catheter inserted, we will start you on a trial of different medications. This will consist of a daily injection into the catheter of drugs prescribed by your consultant. We will ask you to complete an assessment form to record the effects of the drug on your pain.

We will not at this stage tell you the name of the drugs as we have found that if people have past experience or knowledge of drugs, it may influence the reported effects.

The trial normally lasts for a maximum of seven days. After this, we remove the catheter and you can leave hospital.

Follow up

When you leave hospital, you will still only have your existing medication as your consultant will need to review your trial. However, we will give you an outpatient appointment to see your consultant a few days later. At this appointment, the consultant will discuss your trial with you and suggest a treatment plan.

What if I have problems?

You can contact the clinical nurse specialists in the pain management team (9am to 5pm, Monday to Friday) by:

- Calling **01384 244735** and leaving a message on the answerphone or
- Ringing the switchboard number 01384 456111 below and asking them to bleep the number 5064

Out of these hours, you will need to contact your GP or NHS 111.

Can I find out more?

The following website has more information about managing pain:

The British Pain Society

<https://www.britishpainsociety.org/british-pain-society-publications/patient-publications/>

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Clinical nurse specialists in pain management on 01384 244735 or ring the switchboard number and ask them to bleep the number 5064 (9am to 5pm, Monday to Friday)

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dgft.nhs.uk/services-and-wards/pain-management/patient-information-leaflets/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

ਇਹ ਪਰਚਾ ਵੱਡੇ ਅੱਖਰਾਂ, ਬੋਲ ਕੇ ਰੀਕਾਰਡ ਕੀਤਾ ਹੋਇਆ ਅਤੇ ਦੂਸਰੀਆਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਵੀ ਪ੍ਰਾਪਤ ਹੋ ਸਕਦਾ ਹੈ, 0800 073 0510 ਤੇ ਫੋਨ ਕਰੋ ਜੀ।

Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

یہ کتابچہ آپ کو بڑے حروف کی لکھائی، سمعی صورت اور دیگر زبانوں میں مہیا کیا جا سکتا ہے۔ برائے مہربانی فون نمبر 08000730510 پر رابطہ کریں۔