Lumbar Drain

What is a Lumbar Drain?

A lumbar drain is a small, flexible, soft plastic tube placed in the lower back (lumbar area) to remove (cerebral) spinal fluid (CSF). The tube is attached to a drainage bag. CSF is a clear fluid that surrounds and cushions the brain and spinal cord. A lumbar drain is often needed to collect CSF leaking from the brain or spine after surgery or to reduce pressure in the spinal cord or brain due to too much CSF on the brain. Too much pressure in the spinal cord can slow blood flow to the area and can lead to confusion and trouble thinking, pain, weakness, and even paralysis.

How is a lumbar drain placed?

Your doctor will place the lumbar drain during surgery in the operating room or while you are lying in bed in your hospital room. You will be given medicine to keep you comfortable. You will either lie on your side in bed with your chin tucked to your chest or sit at the edge of the bed leaning over a bedside table. The doctor will prepare the area where the drain will be placed. He or she will remove any hair, clean the area to remove any germs and drape a cloth to keep the area sterile. The doctor will then numb the area and insert a needle between two lower back vertebrae. When the needle is in the right spot, the soft tube will be left in place while the needle is removed. The doctor will place a dressing over the insertion site, tape the tube in place and attach the tube to the drainage system. The drainage system will be attached to an IV pole at your bedside. Or, it will be hung on a hook on your bed.

What can I expect after lumbar drain placement?

After placement of the drain, the nurse will watch you closely. The nurse will check your drain and the dressing often. She or he will drain off any extra CSF as ordered by the doctor, and adjust the position of the drain. The draining fluid may be clear or colored. The nurse will also perform a neurological exam by asking you a series of questions and having you follow commands such as moving your arms and legs or sticking out your tongue. This exam may need to done as often as every hour.

In order to prevent infection and the drain coming out by accident, do not touch the lumbar drain while it is in place.
If you would like to change position or get out of bed, always ask your nurse for help. The drain must be clamped before moving, and its level may need readjusting after you have moved. Family and friends should never move you or the bed or touch your drain.

**How is the lumbar drain removed?**

Your doctor will decide when your lumbar drain can safely be removed. At this time, the dressing will be taken off. The tube will be removed. A stitch may be placed at the drain site. When the drain is taken out, it should not cause any discomfort. A dressing will be placed over the site. Your nurse will check it for drainage and infection.

**What are the risks of a lumbar drain?**

Infection, nerve irritation, paralysis, bleeding, leakage of CSF, and air entering the brain space are all risks associated with lumbar drain placement.

**When should I call the nurse?**

Any time you have questions or concerns, please do not hesitate to contact your nurse.

You should also inform your nurse if you are drowsy or tired, confused, irritable, have a stiff neck, an increased headache or leg pain, are sensitive to light, nauseated or vomiting, have numbness or tingling, difficulty going to the bathroom, or if you notice any leaking of fluid from the drain site.

**Resources**


