Department of Neurosurgery

Discharge Advice for Adults Following Implantation of an Intrathecal Baclofen Pump

Information for patients
This leaflet contains answers to some of the questions patients most often ask when they go home. It is intended as a guide. If you have any specific queries that are not answered here, please discuss these with your nurse or doctor.

**Going home**

Going home can feel a little worrying. We hope that, during your stay with us, we have answered many of your questions. This leaflet gives support and guidance about your recovery at home.

We feel it is important that you do not feel alone and isolated at home. Please contact the ward staff or one of the Clinical Nurse Specialists if you need any advice. (Contact numbers are given at the end of the leaflet.) Alternatively your GP and Practice Nurse are there to help, as is Miss Bojanic’s secretary.

**How do I look after my wounds?**

Your stitches will need to be removed at your GP’s surgery by the nurse. We will give you the date for this and a letter for the nurse. If you have steristrips instead of stitches we will give you instructions on how and when to remove them.

As your wound is already healing it does not need any special attention. A shower is preferable to a bath. This prevents the wound from becoming sodden (soaking wet), which can increase the risk of infection and delay healing. The dressings can be removed and another need not be applied after 3 days.

Inspect your wounds daily with the aid of a mirror. If you notice any of the signs listed below, you must contact the hospital team.
or your GP urgently. They may indicate an infection that needs treatment with antibiotics:

- Any leakage from the wound. This could be brown, green, or clear.
- Any redness or swelling at the wound site or around it.
- Pain around the wound or very bad itching after initial improvement post-operatively.
- Any fever / high temperature.

### Getting back to normal

It is normal to feel very tired for the first 3-4 weeks after leaving hospital. When you get home you may feel less tired if you break your day into periods of rest and activity. This may mean having a sleep for a couple of hours in the afternoon or getting up later in the morning.

As soon as the initial tiredness passes you can look forward to becoming more active. For the first 4 weeks you should try to avoid too much bending, twisting, and overhead reaching. If you need assistance with getting from bed to chair for example, bear in mind that your limbs may be weaker in general. You may need more help with these activities than you did before. You may go on a holiday that includes flying, as soon as you feel well enough.

### What about work?

How quickly you return to work largely depends on what type of work you do. You may wish to discuss this with your Doctor before you go home. Generally you are the best person to decide how well you feel and your limitations. A period of 6-8 weeks off is not unusual. We can provide a sickness certificate.
Will my medication be changed?

While you are in hospital your oral spasm-relieving medication may be decreased. The dose your pump delivers will be set according to your successful test dose. This dose may need adjustment in the future in order to get the best relief for you. This will be done in Oxford.

Signs to look for

We are confident that you will continue to make a good recovery at home. However, it is important that you phone your GP, one of the Clinical Nurse Specialists, Miss Bojanic’s secretary or the out of hours service (telephone numbers are given at the end of the leaflet) if you experience any of the following symptoms:

- Drowsiness
- Nausea
- Reduced limb tone
- New incontinence
- Difficulty swallowing
- Cough
- Tiredness that lasts for more than 3 weeks
- Dizziness / Light headedness
- General weakness
- Fits
- Difficulty passing urine
- Difficulty breathing (very rare)
- Difficulty walking or moving
- Any new numbness/ pins & needles
A word about painkillers

We advise you to continue to take your regular medication for pain when you get home. This is because you may feel stiff and sore for a couple of weeks. This in turn may make you feel like you don’t want to move or walk about, which then leads to more stiffness. You are the best person to judge how well your pain is being controlled, so you may wish to see your GP if you feel the pain tablets are not effective.

When will I be able to resume sexual activity?

The simple answer is whenever you feel ready. If you are taking any tablets it is important you see your GP before becoming pregnant as certain medications may affect your growing baby. The oral contraceptive pill may be less effective if you are taking some other medication so we advise you to discuss this with your GP.

About the pump

You will have been given an information booklet that is written by the company Medtronic, who made your pump. Please read it and, if there is anything that is not clear, do not hesitate to contact one of the Pain and Spasticity Team.

If you need any surgery, x-rays, invasive procedures (a procedure that might cause bleeding), or dental treatment (which might also involve ultrasonic probes) in the future, please contact the Pain and Spasticity Team for advice.

When you are out, you must remember to watch out for signs asking people with cardiac pacemakers to see a member of staff. This is because your pump works in a very similar way to these and there may be special precautions you need to take.
You will also be given a temporary identification (ID) card that you must carry with you at all times. If you have not received either the information booklet or your temporary ID card before you leave the ward, then please ask your nurse to contact one of the Clinical Nurse Specialists.

It is important also to remember that you must avoid direct heat over your pump e.g. a hot water bottle. This could interfere with the working of the pump.

Your pump may alarm if the drug volume is low or when the pump is nearing the end of its battery life. If you hear either alarm please contact one of the Pain and Spasticity Team.

**Follow-up**

Miss Bojanic and the Clinical Nurse Specialists will see you in outpatients to make sure that your wounds have healed.

If at this stage you do not have a refill date, we will arrange one. If your alarm does start and you are unsure what to do next, please contact one of the Clinical Nurse Specialists or Miss Bojanic’s secretary.

If your spasms increase and your alarm is not sounding there may be a problem with your system. It may also mean that your symptoms are increasing due to your condition. If they persist, it is advisable to contact us and arrange an appointment to sort out the problem.

The battery inside the pump is estimated to last between 5-7 years, when the whole pump will need replacing. This will be a simple procedure, involving an incision in your abdomen and replacing the old pump with a new one.
Going home checklist

• Tablets and explanation documents
• ID card and Medtronic Information
• Transport.
• Your belongings
• Any valuables locked away
• Letter for your Practice Nurse.
• We will make a clinic appointment for you to return to the hospital. We will send this to you at home or give it to you before you go. If you have not received anything within the next 4 weeks please contact Miss Bojanic’s secretary.

Questions or concerns

If you have any questions that you would like to discuss before you come into hospital or after you have left hospital you can contact one of the Clinical Nurse Specialists on:

Direct line 01865 231874
Fax 01685 231870
E-mail karen.dawson@orh.nhs.uk
liz.moir@orh.nhs.uk

or

Miss Stana Bojanic – Consultant Neurosurgeon
Via Sharon Cole (Secretary) 01865 231883
sharon.cole@orh.nhs.uk

Out of hours and weekends or if no reply from staff above, please contact: On-call Neurosurgeon on 01865 741166 and ask for the registrar on-call for Neurosurgery.
If you need an interpreter or need a document in another language, large print, Braille or audio version, please call 01865 221473 or email PALSJR@orh.nhs.uk

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Version 2, June 2011
Review, June 2014
Oxford Radcliffe Hospitals NHS Trust
Oxford OX3 9DU
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OMI 3250