

Comment by Association for Spina Bifida & Hydrocephalus Neurology Services in District General Hospitals

Children and adults with hydrocephalus are usually “shunted”, ie a valve is implanted in the head to relieve cerebrospinal fluid pressure. If the shunt fails, which is not uncommon owing to infections or mechanical failure, it is important for the symptoms to be noticed and acted upon: normally shunt removal and revision. Failure to treat leads to brain damage and fatalities.

Knowledge of hydrocephalus at A & E Departments and on DGH children’s wards is often very limited, and consequently they do not treat the matter with any urgency.

- they are inclined not to listen to parents/patient;
- they do not know the signs and symptoms of shunt blockage;
- they have unacceptably long waits for diagnosis and treatment;
- there are difficulties in sending and receiving scans electronically;
- if transfer is agreed to a specialist centre, transport is not urgently arranged.

ASBAH’s advice is for all service users to have a direct link (telephone number and e-mail) to their tertiary neurosurgical unit, and to have an understanding that they will go directly there.

ASBAH provides “Shunt Alert” cards for service users to help with diagnosis if they become unconscious etc. Not all hospitals recognise the card.

For children or adults with a long history of dramatic shunt blockage, their neurosurgeon should be asked to provide a protocol letter to show to their local hospital in emergency.

Training for A & E and children’s ward staff could be provided with ASBAHs input.

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