

About Your Nonprogrammable VP Shunt for Pediatric Patients

This information will help you learn about your nonprogrammable ventriculoperitoneal (VP) shunt. In this resource, the words “you” and “your” refer to you or your child.

A VP shunt is used to drain extra cerebrospinal fluid (CSF) from your brain. CSF is a liquid that’s made in the ventricles (hollow spaces) in your brain. Your CSF protects your brain and spinal cord by acting like a cushion. It also brings nutrients throughout your brain and carries waste away. You’re making new CSF all the time.

Normally, CSF flows from your ventricles, around your brain and spinal cord, and into your bloodstream. Hydrocephalus (HY-droh-SEH-fuh-lus) happens when CSF builds up in your ventricles. This makes your ventricles bigger and puts pressure on your brain (see Figure 1).

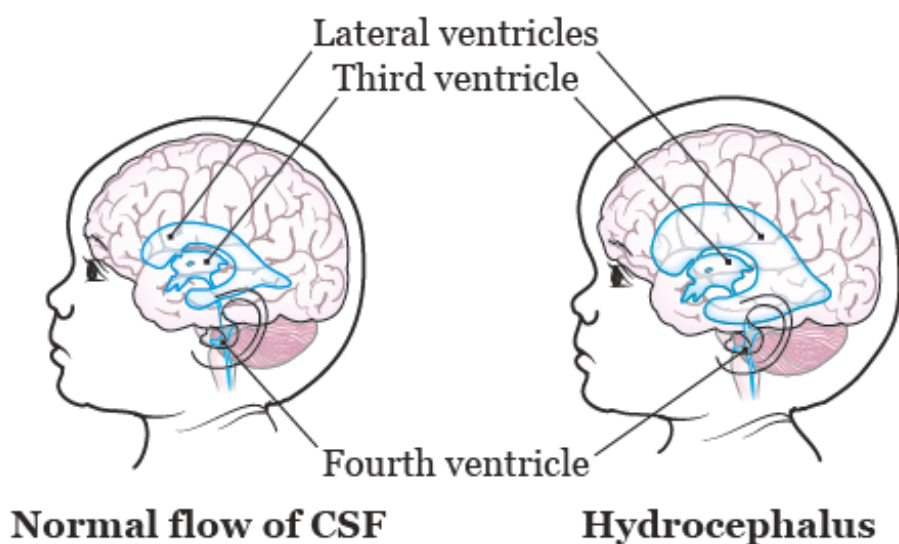


Figure 1. Brain with and without hydrocephalus

Hydrocephalus can happen if the flow of CSF is blocked or if not enough CSF is absorbed into your bloodstream.

About Your VP Shunt

A VP shunt is a device that's placed in your body during a surgery. The shunt takes the CSF out of your brain and moves it into your abdomen (belly), where it's absorbed by your body. This lowers the pressure and swelling in your brain.

A VP shunt has 3 parts (see Figure 2):

- A one-way valve and reservoir that controls the flow of CSF.
- A short catheter (thin, flexible tube) that drains the CSF from your brain. It's attached to the valve and can be placed in the front, back, or side of your head.
- A long catheter that moves the CSF into your abdomen. It's attached to the valve and tunneled under your skin, behind your ear, down your neck, and into your abdomen.

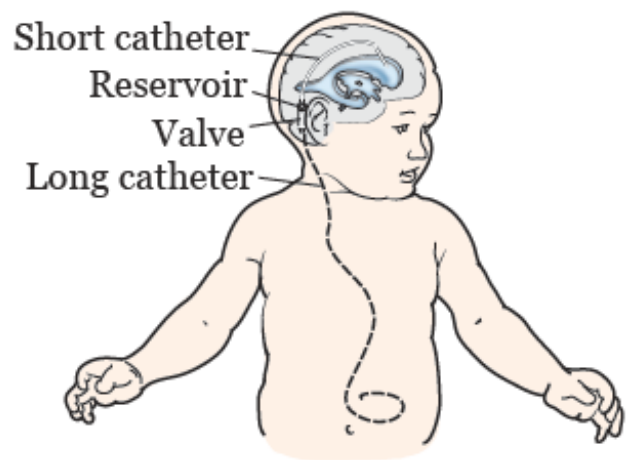


Figure 2. VP shunt

For more information about the surgery to place your VP shunt, read the resource *About Your Ventriculoperitoneal (VP) Shunt Surgery for Pediatric Patients* (www.mskcc.org/pe/vp_shunt_surgery_peds).

As the VP shunt drains extra CSF and lowers the pressure in your brain, it may relieve your symptoms. Some symptoms will go away right after your surgery. Others will go away more slowly, sometimes over a few weeks.

About your nonprogrammable VP shunt settings

The amount of CSF your VP shunt drains depends on its pressure setting. With a nonprogrammable VP shunt, your neurosurgeon will choose the pressure setting before the shunt is placed. The setting can't be changed after the nonprogrammable VP shunt is in place.

Check the box next to your nonprogrammable VP shunt's pressure setting.

- ☐ Low
- ☐ Medium
- ☐ High

Your nurse will give you a wallet card that states you have hydrocephalus and a nonprogrammable VP shunt. Carry the card with you at all times. If you need emergency medical care, show it to the medical workers.

Precautions While You Have a Nonprogrammable VP Shunt

MedicAlert® jewellery

You should always wear a MedicAlert bracelet or necklace that says you have hydrocephalus and a nonprogrammable VP shunt. If you're ever seriously ill or hurt and need medical help, it will tell emergency services workers about your VP shunt.

You can buy a MedicAlert bracelet or necklace at most drug stores. For more information, visit the MedicAlert website at www.medicalert.org.

Imaging scans

You don't need to take any precautions if you have an imaging scan (such as a magnetic resonance imaging (MRI), computed tomography (CT), or x-ray scan).

Abdominal surgery

If you ever need to have abdominal surgery, tell the doctor doing the surgery and your neurosurgeon so precautions can be taken.

Tell your neurosurgeon if you have peritonitis or diverticulitis requiring emergency surgery or antibiotic treatment.

Physical activities

Don't participate in any contact sports (such as football, boxing, and wrestling). You can participate in noncontact sports (such as swimming and running).

Wear a helmet to lower your risk of head injury, if needed. Ask your neurosurgeon for specific guidelines on wearing a helmet.

When to Call Your Healthcare Provider

Call your healthcare provider if:

- You have warning signs that your nonprogrammable VP shunt isn't working properly. These signs include:
 - Increased head size and bulging soft spot in infants
 - A headache that doesn't get better after resting or taking medication
 - Vomiting (throwing up) with little or no nausea (feeling like you're going to throw up)
 - Fatigue (feeling unusually tired or weak)
 - Irritability (becoming easily frustrated or annoyed)
 - Personality changes (not acting like your normal self)

- Problems with thinking and memory (such as confusion)
- Trouble with balance or walking
- Trouble waking up or staying awake
- Weak bladder control
- Seizures
- High pitched cry in infants
- Trouble eating
- Problems seeing, such as:
 - Blurred vision
 - Double vision
 - Vision loss
 - Eyes that turn downward (also called sunsetting)
- You have warning signs of a VP shunt infection. These signs include:
 - A fever of 100.4 °F (38 °C) or higher
 - Swelling, redness, or both along the shunt path
 - Pain around the shunt or around the shunt tubing from the head to the abdomen

These warning signs can appear quickly. **If your child has any of these signs or symptoms, call their healthcare provider right away.**

If you can't wake your child, call 911 or go to the nearest emergency room right away.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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