

Understanding Your Lumbar Puncture (Spinal Tap)

We appreciate your participation in ALS research! Your dedication is vital to advancing our understanding of ALS and developing new treatments. A lumbar puncture (LP), often called a “spinal tap,” is an important procedure that helps us gather crucial information about your condition and the effectiveness of potential therapies.

Why is a lumbar puncture important for ALS research?

For patients with ALS, the lumbar puncture offers unique and invaluable insights that are difficult, if not impossible, to obtain through other methods:

Direct Information: CSF (spinal fluid) provides direct data on motor neurons, offering unique insights for research.

Tracking Disease: Helps identify markers for disease progression.

Drug Effectiveness: Verifies if study drugs reach motor neurons in clinical trials.

High Value Data: The information gained is invaluable for understanding and treating ALS.

What to expect during your lumbar puncture:

1. **Preparation:** Sit or lie on your side, arching your back to open vertebral spaces.
2. **Numbing:** Area cleaned, then local anesthetic injected to numb the site.
3. **Procedure:** A thin spinal needle is carefully inserted into the spinal canal (L3-L4 space), safely below the end of your spinal cord. No risk of paralysis.
4. **Fluid Collection:** 10-15 ml of fluid collected into sterile vials. Your body quickly replaces this.
5. **Duration and Recovery:** Procedure takes ~20-25 minutes. Lie flat for one hour afterward to minimize headache risk.

Side Effects and Risks

Common Side Effect: Post-LP headache (20-30% of patients). Worse when sitting/standing, better when lying down.

Mitigation: We use special “atraumatic” needles which greatly reduce this risk.

Management: Rest, hydration, over the counter pain relievers. Rare cases may require a “blood patch.”

Rare Risks: Bleeding and infection are very uncommon due to sterile techniques.

Please discuss risks with your doctor.

Post-LP Considerations:

Rest: Take it easy for the rest of the day.

Hydration: Drink plenty of fluids.

Soreness: Mild soreness at site is normal; Tylenol can help.

When to call us: Contact us immediately for a severe, persistent headache; new numbness/weakness in legs; fever; or signs of infection at the site.

Qalsody/Tofersen (a medication for a specific genetic type of ALS) is administered via an intrathecal injection, a procedure very similar to an LP. This shows how established and safe accessing the CSF space is for both diagnosis and treatment.

Watch our lumbar puncture video for more information.

