Osteomyelitis – Patient Information Leaflet

Title of document: Osteomyelitis – Patient Information Leaflet

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Search Engine Keywords: osteomyelitis, infection, orthopaedic, child

Related links:

Description: Patient information leaflet giving general information about the condition, for parents

Final Validation Committee: Children’s Services Review Group

Suitable for Audience on:
- SUHTranet (Trust Staff Only) Yes / No
- Extranet (NHS Community) Yes / No
- Internet (Public) Yes / No

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Date agreed: 1st Nov 2005
(can be manually added when document validated)

Accountable Officer: Judy Gilow
(Name & Position) Director of Nursing

Responsible Officer: Karen Swanson
(Name & Position) Policies & Guidelines Facilitator

Highlighted to:
Child Health
(Key staff, Departments, Directorates)

Date doc. implemented in SUHT: Nov-05

Date sent to Policy Administrator: Jan-06
(can be manually added when document validated)

Date doc. loaded on SUHTranet: Feb-06

Date of next review: November 2008

Date(s) Reviewed (if applicable):

Details of most recent review:
(Outline main changes made to document)

Signature of Chairman of Validation Committee: Gary Connett
Print Name: Gary Connett
Post Held: Consultant
WHAT IS OSTEOMYELITIS?
Osteomyelitis is an infection, which may involve any part of the bone. It is more common in boys and children aged 5-14 years.

HOW MAY OSTEOMYELITIS BE ACQUIRED?
Osteomyelitis can occur as a result of spread of bacteria from an existing infection, e.g. boils or nose/throat infections. It may also be acquired from an injury such as a penetrating wound.

WHAT ARE THE SIGNS AND SYMPTOMS?
- Onset is usually abrupt and there may be a history of trauma to the affected area.
- Your child might complain of pain in the affected area especially on movement.
- Your child may resist their limb being straightened due to pain.
- Your child may have a high temperature and be irritable.

WHAT TESTS AND INVESTIGATIONS MAY BE PERFORMED?

Blood Tests
A white cream or a cold spray is used to numb the skin to reduce discomfort. The blood tests will help to show if there is any infection that needs to be treated.

X-ray
An x-ray is performed to ensure that your child does not have broken bones causing the pain. However, a bone scan may be required to determine an infection.

Bone scan
This investigation is routine in helping to diagnose osteomyelitis.

Dye is injected into a vein in your child’s arm after which special imaging pictures are taken. These will show whether there is an infection within the bone.

WHAT IS THE TREATMENT OF OSTEOMYELITIS?

Antibiotics
These will be given in the early stages into a vein through a cannula. The antibiotics may sting when being given and can sometimes cause redness. Occasionally the cannula may need to be replaced. The decision on how long your child needs to have antibiotics by this method depends on the site of the infection and how well your child responds to treatment. Blood tests will need to be repeated to check that the antibiotics are working. Up to two weeks of intravenous antibiotics may be needed.

When your child’s temperature is back to normal and their blood results show that the antibiotics are working, the doctor may decide they can have their antibiotics in syrup or tablet form.

As long as their symptoms do not return they can be discharged 24 hours after starting oral antibiotics.

The antibiotics may need to be continued for to six weeks.

Plaster
A plaster of paris may be applied to the affected area so that it can be rested.

Bed Rest
Your child may need to be on bed rest but play staff can provide toys and games to reduce boredom.
Skin Traction
This may be applied to rest the affected area, e.g. hip; it helps reduce pain and stiffness.

Pain Killers
These will be given regularly as they are required.

Observations
Your child’s temperature and pulse will be monitored regularly; medicine will be given to help reduce your child’s temperature.

Surgery
This is sometimes required. A small cut is made over the affected area and the infection drained away.

WHEN YOUR CHILD IS READY TO GO HOME

- An outpatient appointment will be booked for 2 weeks when a repeat x-ray is taken. A blood test may be required the day before the appointment to check that the levels have returned to normal.
- You will be given some oral antibiotics to take home. Your GP will provide further supplies as required as they may need to be taken for up to six weeks.
- Your Health Visitor or Community Nurse will be told of your child’s admission.
- You must contact your GP or the nurse practitioner immediately if your child has a raised temperature and/or increased pain in the affected area.
- You will be taught how to look after your child’s plaster if they have one.
- Your child should not go to school until after the first clinic appointment.

If you have any concerns or questions, please contact:
Paediatric Orthopaedic Nurse Practitioner on Tel: 023 8079 4991 or Switchboard on 023 8077 7222 and ask for bleep no. 2641 or Ward G3 on 023 8079 6486

This leaflet is intended for general information only, for individual advice please contact your doctor.