

## Raised Intracranial Pressure

- May be due to tumor, hemorrhage, edema or infection
- Increased cerebral spinal fluid may be due to increased production, obstruction of flow, or decreased absorption

### Signs and Symptoms of Raised Intracranial Pressure

- Headache, change in behaviour, nausea and vomiting, lethargy
- Change in pupil reaction, impaired upward gaze
- False localizing signs, e.g. 6th nerve palsy
- Seizures
- Decreased coordination, ataxia
- Papilledema

### Management

- Consultation with pediatric neurosurgeon
- Dexamethasone 2 mg/kg IV
- Mannitol 2 g/kg IV
- Hyperventilation
- Surgery
- Radiotherapy

### Inappropriate Antidiuretic Hormone SIADH

This may occur in pediatric lymphomas and may be precipitated by cyclophosphamide and vincristine.

### Signs:

- Fatigue
- Weight Increase
- Lethargy
- Confusion
- Seizures
- Coma

### Laboratory Abnormalities:

hyponatremia and hypo-osmolality

### Treatment:

- fluid restriction
- for severe cases, furosemide plus hypertonic saline

### Psychological Support

Ongoing psychological support is essential for the child and family and will be provided by all members of the team.

Parents expect:

1. A caring, encouraging and professional attitude
2. Reasonable knowledge of pediatrics and pediatric oncology and good knowledge of supportive care

3. Honesty. Try to answer all questions but do not be afraid to admit that you do not know and need to ask other members of your team. Parents of children with cancer are extremely knowledgeable about their child's disease and will not respect inaccurate or vague information
4. Respect. Remember that the child's parents will always know their child better than any of the staff, so listen to, and respect their observations.