

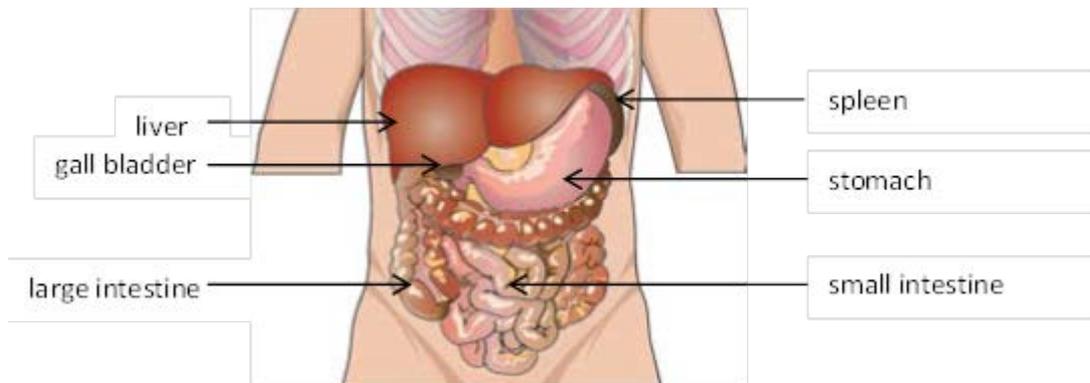
# Liver and Spleen Injuries

This information pamphlet should provide you and your child with an understanding of what liver and spleen injuries are and how they are caused. It should also provide you with information on what will occur while your child is in hospital and when they are able to go home. If you have any other questions please ask your child's nurse or doctor.

Liver and spleen lacerations are the most common severe abdominal injuries resulting from trauma that require children to be hospitalised. There are many ways for these injuries to occur, most commonly by landing on or being hit in the abdomen (tummy) from a handlebar on a bicycle, scooter or motorbike. These types of injuries can make the liver or spleen bleed and children need to be closely monitored for signs of complications.

## Why are these injuries common in children?

In children, the liver and spleen are organs that may be more exposed and vulnerable to injury compared to adults. This is because they take up a large proportion of the tummy and the tummy wall is thinner as they have less muscle and less fat than an adult. The diaphragm, which is the muscle that sits between the lungs and stomach, pushes these organs below the rib cage. The ribcage is more flexible in children and is more likely to cause injury to these organs.



## Diagnosis

- > It is likely that your child will have some pictures taken of inside their tummy. This is usually taken by a CT ("CAT") scan, an ultrasound or an x-ray.
- > Sometimes these investigations need to be repeated while in hospital or after discharge
- > It is also likely that blood and urine tests will be required

## Treatment

- > If a liver or spleen injury is diagnosed then your child will be admitted to hospital to be closely monitored and for bed rest. Their temperature, pulse, blood pressure, and

other vital signs will be regularly monitored

- > They will be seen by a doctor on the General Surgery team daily
- > One or more intravenous lines (drip) will be inserted. They may be used to administer fluids and medication and occasionally a blood transfusion
- > Management of these injuries is usually achieved without the need for an operation, and if this is the case with your child then it will be important that they rest to allow the injured organ to heal.
- > If your child does need surgery for their liver or spleen injury, more information will be provided by the treating team

## Women's & Children's Hospital

- > High grade 'severe' injury will need observation in the Paediatric Intensive Care Unit (PICU)

### Length of Hospital Stay

- > Your child will likely need to stay in hospital until they feel better, have pain that is tolerable with oral pain relief medications, and that they have had a satisfactory period of observation and rest for the severity of their injury

### Pain Relief

- > These injuries are often painful
- > Pain relief medicine may be given via a pump connected to your child's drip or they will be given pain relief medicine in syrup or in tablet form

### Eating and drinking

- > Your child may not be allowed to eat and drink initially as they may require surgery or there may be other injuries
- > It is also common for their intestines to slow down, which can make them feel nauseous. Your child's doctor will decide when it is safe for them to eat or drink
- > After this initial period your child will be allowed to slowly sip small amounts of fluid, and then eat normally
- > If your child is feeling nauseous or they are vomiting, please let the nurse know as there is medicine that can be given to help this

### Activity

- > It is very important that your child rests in bed initially to help prevent any risk of further bleeding
- > Your child may not be able to get out of bed to go to the toilet while they need to rest in bed. Your child's nurse will be able to help them with this
- > After a period of time they will be allowed to walk to the toilet and back, then around the ward and the hospital

### For more information

**Women's and Children's Hospital**  
72 King William Road  
North Adelaide 5006  
Telephone: (08) 8161 7000  
[www.wch.sa.gov.au](http://www.wch.sa.gov.au)



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### Discharge Care

- > Your child may still require some pain relief for a few days at home
- > Ibuprofen and Aspirin should not be given as they can interfere with the risk of bleeding and ability of blood to clot
- > Encourage quiet activities at home such as watching TV and movies, reading and crafts
- > Your child should not return to sport for a period of time and they usually will need at least 1- 2 weeks off of school
- > Your doctor will provide instructions for the recommended time off from activities. Please let your doctor know if your child participates in specific activities so that they can be aware of these when planning for your child to go home
- > Your child may need time and support to recover emotionally to recover from their injury

### Follow Up Appointments

- > Patients following discharge are usually followed up in the Outpatients Department. Your nurse will give you this appointment before you leave the hospital. This will be approximately 1 -2 months after you are discharged
- > Your doctor may ask you to return to the hospital for another ultrasound before or after their appointment

### Immediately report to the hospital or your doctor if your child develops

- > Increased pain, nausea or repeated vomiting
- > Blood in urine, their vomit or stools
- > Dizziness, fainting, fever, fatigue or have a pale appearance
- > If they have chest pain or breathing difficulties call an ambulance immediately

**If you have any concerns after your child's discharge please telephone your private consultant, the WCH on (08) 8161 7000 and ask to speak to your doctor or your local GP**

