Your child’s health team

To ensure that your child receives the best possible care, a team of health professionals, called a multidisciplinary team (MDT) will work together to create an individually tailored treatment plan and to ensure all aspects of their care plan are covered. The MDT consists of a variety of specialists. This fact sheet outlines the roles of some of the professionals who may be part of your child’s MDT.

In this fact sheet:

- The health professionals who would typically care for your child
- An outline of some additional health professionals who may care for your child following their diagnosis

General Practitioner (GP)

Although not technically part of the MDT, your child’s GP (family doctor) may be the first person you seek medical advice from when your child experiences symptoms of any kind. If the GP suspects your child may have a brain tumour, they will refer them for a brain scan (for further information, see our Scans for children fact sheet) and for a consultation with a more specialised health professional, such as a neurologist (please see below). Your GP may also refer your child on to a paediatrician, who is a doctor specialising in the health of children and adolescents. If your child is referred on to other health
professionals, their GP will receive updates from the hospital about their treatment.

If your GP does not think that your child has a brain tumour, but you are concerned that they might have, please raise this with them. You may find our HeadSmart symptoms card a useful resource in helping with this. You can find our HeadSmart card and detailed information on the signs and symptoms at www.headsmart.org.uk. You can get a free HeadSmart mobile symptoms card by texting SMART to 81400 or you can contact us and we will send you a card. Some parents have also found it helpful to film certain symptoms they are concerned about, as symptoms may not always be apparent in the GP surgery. You are also entitled to seek a second medical professional opinion from another doctor if you wish. Your child’s GP will be able to help you arrange this.

**Neurologist**

A neurologist specialises in problems relating to the brain, spinal cord and nerves in the body. Your child may be referred to a neurologist for their initial diagnosis. Neurologists may also be involved at other stages of treatment and follow-up after treatment is complete.

**Neurosurgeon**

Your child will be referred to a neurosurgeon if their tumour can be operated on. The neurosurgeon might carry out a biopsy (removal of a small piece of the tumour) so that the tumour can be analysed and diagnosed. The neurosurgeon may be able to fully or partially remove the tumour and the biopsy may be carried out at the same time as this operation (for further information, see our Neurosurgery in children fact sheet). Your child will see their neurosurgeon before and after surgery and for follow-ups in outpatient clinics.

**Neuropathologist**

A neuropathologist diagnoses diseases of the central nervous system (brain and spinal cord) by looking at a sample of brain tissue (‘biopsy’) under a microscope. From carrying out this examination, the neuropathologist will be able to give a diagnosis of the type and grade of your child’s brain tumour.
Neuro-oncologist

Neuro-oncologists specialise in the non-surgical management of patients with tumours of the brain and spinal cord. Your child’s neuro-oncologist will work closely with the neurosurgeon and will co-ordinate any further treatment your child may need, including radiotherapy and chemotherapy.

Clinical nurse specialist (CNS)

A clinical nurse specialist (sometimes called a neuro-oncology nurse) acts as a point of contact between you, your child and family and the rest of the MDT (as such they may be called a key worker, though this could be anyone in the health team).

Your child’s clinical nurse specialist (CNS) will be able to help with any questions or concerns you may have about treatment as they can liaise with all members of the MDT. They work to ensure good communication between the health professionals within the MDT, as well as between the team and you and your child. The CNS may also give guidance about some of the nonmedical support, such as benefits that may be available to you. Similarly, social workers, for example those provided by CLIC Sargent (a national charity for children affected by cancer), can provide emotional and practical support, including helping you with financial concerns if your child’s diagnosis is cancerous.

Radiotherapist

A radiotherapist is a specialist in using radiation to treat cancer. They will plan radiotherapy treatment specifically for your child’s brain tumour type and will monitor their progress throughout the treatment.

Radiographer

The radiographer is the person who actually administers the radiation treatment. Radiographers work with other professionals who help plan your child’s treatment, including radiotherapists and medical physicists. Whilst your child is receiving radiotherapy, they will see radiographers daily.

Clinical oncologist

In the UK, a clinical oncologist is a healthcare professional who specialises in both radiotherapy and chemotherapy. They work with other members of the MDT to plan your child’s treatment.
Additional staff who may work with your child

In addition to the ‘core’ staff who make up your child’s health team, they may receive care from the following professionals:

**Clinical psychiatrist**

A clinical psychiatrist is a medically qualified doctor who has chosen to specialise in psychiatry. They help with mental disorders and are able to prescribe medication and other treatments. A clinical psychiatrist may not be a professional you see immediately, but rather a professional you see at a later date if your child experiences long-term emotional or behavioural difficulties.

**Clinical psychologist**

Clinical psychologists are concerned with reducing psychological distress and promoting psychological well-being. Psychologists may meet with your child or with the whole family to help work through difficult or stressful issues or to help with feelings, such as anxiety, fear and depression. They can also help your child to prepare mentally for treatment.

A clinical psychologist could be part of your child’s long-term health team to help them cope with different stages in life following treatment. They may administer tests as your child grows to help establish any long-term difficulties your child may experience and plan interventions to support them to work through these difficulties.

For children who have been given a terminal diagnosis, a clinical psychologist can work with your family to help you speak about this and help you express your thoughts and fears.

**Dietician**

A dietician specialises in food and nutrition and can help create dietary plans to suit your child’s individual nutritional needs, taking into consideration their medical records.

Chemotherapy can often cause appetite loss, whilst steroids may cause your child to put on a considerable amount of weight. A dietician may be able to work with you to plan a diet to help your child stay well during their treatment and to ensure they are getting an appropriate balance of nutrients.
Educational psychologist

Educational psychologists (or EdPsychs) help to maximise a child's capacity for learning. They use a range of tests and observations to help identify different types of support that may be of benefit. Your child may be referred to an educational psychologist if, for example, treatment has had an effect on their ability to learn new information (for further information see our Learning difficulties and brain tumours in children fact sheet).

Occupational therapist (OT)

An Occupational Therapist helps with day-to-day issues, such as with tasks and activities at home and at school, for example getting dressed, writing and moving. They may suggest certain aids or equipment around the home to make life easier for your child. These aids could be temporary to help with some of the immediate side-effects of treatment or could be long-term and updated as your child grows.

Physiotherapist

A physiotherapist helps with the recovery of your child's physical functioning through exercises and physical manipulation of the body. Children with brain tumours are often referred to a physiotherapist because of difficulties with balance or muscle weakness caused by the tumour or its treatment. The physiotherapist may put together a programme for your child that includes exercises at home, the gym or in a hydrotherapy pool.

Play therapist/play specialist

Play therapists/specialists can help your child in various ways, for example, explaining a particular treatment type or what a brain tumour is. They can use play to help your child understand and prepare for treatment, enable them to express their feelings and feel more in control of what is happening. They can also work with your child to help reduce their fear of the machines used for treatment, which can be large and intimidating.

An example of a play therapist’s work would be helping your child prepare for having a mask of their face made and preparing for radiotherapy with this mask. This may include letting your child play with the material used for making the mask or making a mask for their favourite toy. A play therapist may also help your child come to terms with having a cannula or central line fitted if they have a fear of needles and could help them speak about feelings that they may not want to talk about with mummy and daddy.
Play therapists usually work with children who are between the ages of 3 and 11.

**Speech and language therapist**

Your child will be referred to a speech and language therapist (SLT) if their tumour affects an area of the brain that is involved with language. They will work with your child to help them improve their speech or develop ways of communicating that does not involve speech. Speech and language therapists can also help with difficulties relating to swallowing, which can be caused by the brain tumour.
What if I have further questions?

If you require further information, any clarification of information, or wish to discuss any concerns, please contact our Support and Information Team, which includes a dedicated Children and Families Worker:

- Call 0808 800 0004 (free from landlines and most mobiles including 3, O2, Orange, T-mobile, EE, Virgin and Vodafone)
- Email support@thebraintumourcharity.org
- Join our closed Facebook group: bit.ly/supportonfacebook

About us

The Brain Tumour Charity makes every effort to ensure that we provide accurate, up-to-date and unbiased facts about brain tumours. We hope that these will add to the medical advice you have already been given.

The Brain Tumour Charity is at the forefront of the fight to defeat brain tumours and is the only national charity making a difference every day to the lives of people with a brain tumour and their families. We fund pioneering research to increase survival, raise awareness of the symptoms and effects of brain tumours and provide support for everyone affected to improve quality of life.

We rely 100% on charitable donations to fund our vital work. If you would like to make a donation, or want to find out about other ways to support us including fundraising, leaving a gift in your will or giving in memory, please visit us at thebraintumourcharity.org, call us on 01252 749043 or email fundraising@thebraintumourcharity.org

About this fact sheet

This fact sheet has been written and edited by The Brain Tumour Charity’s Support and Information Team and is supported by the Children’s Cancer and Leukaemia Group (CCLG).

The accuracy of medical information has been verified by leading health professionals specialising in neuro-oncology. Our fact sheets have been produced with the assistance of patient and carer representatives and up-to-date, reliable sources of evidence. If you would like a list of references for any of the fact sheets, or would like more information about how we produce them, please contact us.
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Your notes