

Will an Epidural Steroid Injection help me?

It is difficult to predict if the injection will help or not. Patients who have “radicular symptoms” (like sciatica) respond better to injections than patients who have general back pain. Patients with a recent onset of pain may respond much better than the ones with long standing pain. Patients with back pain mainly due to bony abnormalities may not respond as adequately to the injections.

What are the risks involved and the possible side effects?

Generally this procedure is safe, however with any procedure there are risks, side effects or possible complications. The most common side effect is temporary pain. Other possible effects are headaches, infection or worsening of symptoms. A rare complication involved with the injection is the possibility of bleeding in the Epidural space with nerve damage.

Side effects of the steroid used include possible weight gain, water retentions, increased blood pressure (lasting 1-2 days) and increased blood sugar (lasting 1-2 days). Diabetic patients should monitor blood sugars closely.

Who should NOT have the injections?

If you are allergic to any of the medications involved in the procedure, if you are on a blood thinning medication, or if you have an active ongoing infection, you should not have the injection.

Appointment

Date: _____ Time: _____

Coumadin:

Date to stop: _____

INR is needed the day before injection appointment. If INR is too high appointment may be rescheduled.

Plavix:

Date to stop: _____

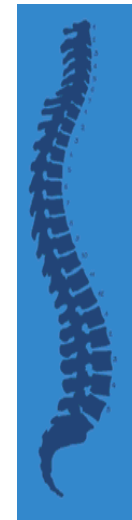
Note: Ask your GP if it is safe to be off a blood thinner or if you need to go onto another, such as Tinzaparin.



EPIDURAL INJECTIONS

PAIN CLINIC

PATIENT INFORMATION



<http://www.laesieworks.com/spinal/pict/SpinalColumn.gif>

www.viha.ca/pain_program

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FREQUENTLY ASKED QUESTIONS

What is an Epidural Steroid Injection?

An epidural steroid injection is a common procedure used to treat spinal nerve irritation that is caused by tissues next to the nerve pressing against it.

An epidural steroid injection involves bathing an inflamed nerve root in steroids (potent anti-inflammation medicine). This may reduce pain, tingling and numbness caused by nerve inflammation.

How long does the procedure take?

The injection may take only a few minutes. A total procedure under fluoroscopy (similar to an X-ray) may take up to 30 minutes.

What is actually injected?

The injection is a steroid medication (such as triamcinolone, Depo-medrol or Bethamethasone) as well as a local anesthetic (such as Lidocaine or Bupivacaine).

The steroid is "long-acting" and peaks in 7-10 days. It can sometimes take as long as 14 days to notice improvement.

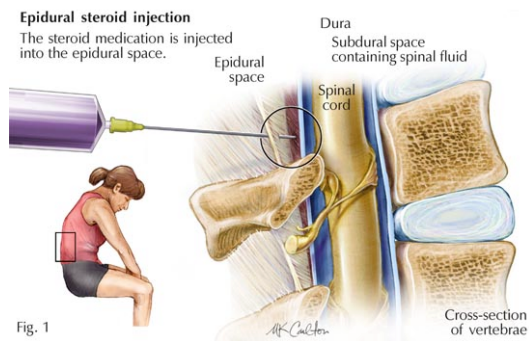
Will the injection hurt?

Some discomfort is involved because the procedure involves inserting a needle through the skin and deeper tissues. We numb the skin and deeper tissues using a very thin needle prior to inserting the Epidural needle. You will usually feel strong pressure and not much pain.

If we reproduce your pain during the procedure please tell us, as this is a good indication that the injection is in the correct area.

How is the injection performed?

You will either be sitting up or lying on your side during the procedure. Your vital signs such as, blood pressure, pulse and oxygen saturation will be recorded prior to the injection and after the injection. Steroids can increase blood pressure. You will be monitored until your vital signs are considered "normal" or stable.



http://www.hughston.com/hha/b_17_1_3a.jpg

What should I expect after the injection?

You may notice that your pain may be lessened or gone. Your legs may feel slightly heavy and may be numb. This is similar to freezing from dental procedures. This is due to the anesthetic injected and will only last a few hours. Your pain may return and you may have a sore back for a day or two.

What can I do after the procedure?

You should arrange for a ride home. We advise that you take it easy for a day or two after the procedure. Perform your daily activities as tolerated by you.

You can apply ice on the injection site on and off (approximately 15 minutes at a time). You can take something for pain before the local anesthetic wears off. Avoid taking a bath or soak in a hot tub until the following day.

How many injections do I need to have?

If the first injection does not relieve your symptoms in a week or two, you may be recommended to have more injections. We generally do not perform more than 4 injections per year. Injections can be 6-8 weeks apart between the first and second and then every 3 months thereafter.

Too much steroid causes weakening of the bone (such as osteoporosis). If you have osteoporosis the number of injections may be reduced.