



Epidural Steroid Injection

What is an Epidural Steroid Injection?

An Epidural Steroid Injection is an injection of intermediate lasting steroid (like "cortisone") in the Epidural space - the area that surrounds the spinal cord and the nerves within the spine.

What is the purpose of an Epidural?

The steroid injected reduces the inflammation and/or swelling of nerves and other tissues in the Epidural space. This may in turn reduce pain, tingling and numbness, and other symptoms caused by nerve inflammation/irritation or swelling or chemicals from the disc.

How long does the injection take?

The actual injection only takes a few minutes. Recovery varies from minutes to a few hours.

What is actually injected?

The injection consists of a mixture of local anesthetic (like lidocaine or bupivacaine) and the steroid medication (triamcinolone - "Kenalog", betamethasone - "Celestone", or methylprednisolone - "Depomedrol").

Will the injection hurt?

The procedure involves inserting a needle through the skin and deeper tissues (like a "tetanus shot") so there is some mild discomfort involved. However, we numb the skin and deeper tissues with a local anesthetic using a very thin needle prior to

Inserting the Epidural needle. Also, the deeper tissues have less nerve supply, so usually you feel strong pressure and not much pain. Many patients request intravenous sedation and analgesia, which makes the procedure easier to tolerate.

Will I be “put out” for this procedure?

No. This procedure is done under local anesthesia, even when receiving supplementary intravenous sedation and analgesia, which makes the procedure easy to tolerate. The amount of sedation given generally depends upon the patient’s other health problems and risk for sedation.

How is the injection performed?

Lying on your stomach is the most common position. The patients are monitored with EKG, blood pressure cuff, and blood oxygen-monitoring device. The skin in the back is cleaned with antiseptic solution and then the injection is carried out. After the injection, you are placed on your back or on your side.

What should I expect after the injection?

Immediately after the injection, you may feel your legs slightly heavy and may be numb. Also, you may notice that your pain may be gone or quite less. This is due to the local anesthetic injection. This will last only for a few hours. Your pain will return and you may have a “sore back” for a day or two. This is due to the mechanical process of needle insertion as well as initial irritation from the steroid itself. You should start noticing pain relief starting the 3rd day and frequently sooner.

What should I do after the procedure?

You must have a ride home. We advise patients to take it easy for a day or so after the procedure, but you may return to work the next day unless advised otherwise. Perform the activities as tolerated by you, but be cautious of temporary weakness in your extremities immediately afterwards.

Can I go back to work the next day?

You should be able to unless the procedure was complicated. Usually you will feel some back pain or have a “sore back” only.

How long will the effect of the medication last?

The immediate effect is usually from the local anesthetic injected. It wears off in a few hours. The steroid starts working in about 1 to 2 days, and its effect can last up to a few months.

How many injections do I need to have?

If the first injection does not relieve your symptoms in about a week to two weeks you may be recommended to have an additional injection. Similarly, if the second injection does not relieve your symptoms in about a week to two weeks, you may be recommended to have a third. This is variable based on your particular diagnosis and response to the injections.

Can I have more than 3 injections?

Patients frequently will receive intermittent injections beyond the acute phase of treatment. The interval varies from 2 months to 6 months depending on your response and pain pattern. The determining factor is your response and an understanding and acceptance of the risks and benefits of the administered steroids over time.

Will the Epidural Steroid Injection help me?

It is very difficult to predict if the injection will indeed help you or not but your physician recommends it for your particular diagnosis. Generally speaking, the patients who have "radicular symptoms" (like sciatica) respond better to the injections than the patients who only have back pain. Similarly, the patients with a recent onset of pain may respond much better than the ones with a long-standing pain.

What are the risks and side effects?

Generally speaking, this procedure is safe. However, with any procedure there are risks, side effects and possibility of complications. The most common side effect is mild pain from the needling or spasm, which is temporary. Other less common risks involve spinal puncture with spinal headaches, infection, bleeding inside the Epidural space with nerve damage, worsening symptoms, and rarely spinal cord trauma/damage. The other risks are related to the side effects of steroid. These

Include weight gain, temporary increased blood sugar (mainly in diabetics), water retention and swelling, temporary suppression of the body's own natural production of steroid, hair and skin changes, or large joint problems. Steroid doses are minimal compared to patients taking daily oral therapy for other conditions.

Who should not have this injection?

If you are allergic to any of the medications to be injected or if you have an active infection going on then you should not have the injection. If you are on a blood thinning medication (e.g. Comadin, Plavix, medicines for a few days before your injection).