



Epidural Steroid Injections

1. What is an epidural steroid injection?

An epidural steroid injection is an injection of local anesthetic and steroid deposited into the epidural space. The epidural space is a space located in the spine just outside of the sac containing spinal fluid. The goal of an epidural steroid injection is to provide pain relief by reducing the inflammation (swelling) of the nerve roots as they exit the spine. An epidural steroid injection will not correct the preexisting medical problem (i.e. spinal stenosis, herniated or bulging disc, arthritis, etc.) but may improve the level of pain. It is not unusual for someone to need more than one injection to get long term benefit. The injections are done in a series of three injections about a month apart if needed. If the pain is significantly improved no further injection is needed unless the pain begins to come back.

Note: The procedure can not be performed if you have an active infection, flu, cold, fever, very high blood pressure or if you are on blood thinners. Please make your doctor aware of any of these conditions. This is for your safety!

2. What are the risks of the procedure?

The main risk that occurs at a rate of approximately 1/100 is the risk of a dural puncture. (This rate is higher in patients who have had previous back surgery). A dural puncture occurs when the needle is unintentionally advanced one layer beyond the epidural space and punctures the membrane that surrounds spinal fluid. If this occurs there is a risk of developing a spinal headache, which may be severe and may last for days. There is a procedure (epidural blood patch) that can treat the headache if it occurs and does not improve sufficiently in 48 hours.

Other risks are remote but include bleeding, infection, nerve injury and allergic reaction to the medication.

Some short-term side effects may occur. If local anesthetic spreads to nearby nerves you may have weakness or numbness that can last for 1 - 2 hours. If this happens you will have to stay in the Pain Management Center until this resolves. You may have increased pain for a few days after the injection. Diabetics may have short-term elevation of blood sugars. People prone to fluid retention may have increased fluid retention for 1 -2 weeks.

3. Will the injection hurt a lot?

Most people say the stinging/burning of the numbing medicine is the most uncomfortable part of the procedure though every person's response to any procedure is individual.

4. Do I need to stop my blood thinner?

*****PLEASE SPEAK WITH DR. ROUFAIEL ABOUT STOPPING YOUR BLOOD THINNERS AS SOME MAY NEED TO BE STOPPED PRIOR TO PROCEDURE*****

5. **What happens during the actual procedure?**

After signing a consent form and checking your blood pressure the procedure will be done in the sitting position. For procedures in the neck an intravenous is started. The back or neck is then cleansed with an antiseptic soap. A sterile drape is placed. The skin is anesthetized (numbed) with a local anesthetic. This is felt as a stinging or burning sensation. The needle is then advanced into the epidural space. Pressure is the usual sensation felt - if pain is felt, more local anesthetic will be used. Once in the epidural space the medication is infused and the procedure is complete. Your skin will be cleansed and a bandage will be applied. (The bandage can be removed on the next morning). Your blood pressure will be checked and you will be discharged to leave with your ride after M.D. authorizes discharge.

6. **How will I feel after the injection?**

Most people don't feel any different immediately after the injection though the pain may be temporarily improved or worsened. The steroid takes two or three days to start to have an effect in most people and peaks in about two weeks. Therefore, it may be awhile before you feel a change in your pain.

Some local tenderness may be experienced for a couple of days after the injection. Using an ice pack three or four times a day will help this. You may take your usual pain medications as well after the injection.

7. **Will I have any restrictions on the day of the procedure?**

*****IF YOU RECEIVE SEDATION ONLY*****

You may not drive for the remainder of the day after your procedure. An adult must be present to drive you home or to go with you in a taxi or on public transportation. The procedure will be cancelled if you don't have a responsible adult with you!! This is for your safety.

No heat is to be used in the injected areas for the remainder of the day.

No tub bath or soaking in water (i.e. pool, jacuzzi, etc.) for the remainder of the day.

If the injections are in your neck you may take your medications as usual with a sip of water but do not eat or drink for six hours before the procedure. You may eat, drink and take your medications as usual on the day of the procedure (both before and after) if the injections are to be in your low back. Please follow the above instructions unless told differently by your doctor.

8. **For what reasons should I call Dr. Roufaiel after the injection?**

If you experience severe back pain, new numbness or weakness of your legs, loss of control of your bladder or bowels, or signs of infection in the area of the injection, you should call Dr. Roufaiel right away at 561-944-5534