Epidural Steroid Injection

An epidural steroid injection is given to relieve pain in the neck, back, or legs. This procedure involves injecting a steroid and a *local anesthetic* (drug that causes local numbness) into the epidural space. The epidural space is the space between the outer covering of the *spinal cord* (the cord of nerve tissue that extends from the brain) and the *vertebra* (bone of the spinal column). The epidural steroid injection helps in reducing the pain that is caused by the irritation/swelling of the nerve root. However, it does not cure the underlying problem. The injection may be given for the following conditions:

- Changes in the *disk* (a soft, gel-like cushion between two vertebrae) due to wear and tear.
- A reduction in the space within the spinal canal.
- Slipped or herniated disk.
- *Lumbar* (low back) sprain.
- Sciatica (shooting pain that radiates down the buttocks and the back of the leg due to compression of the nerve).
- Traumatic compression fracture of the vertebra.
- Pain that develops after a surgery of the spine.
- Pain that arises after an attack of *shingles* (viral infection affecting the nerves).

BEFORE THE PROCEDURE

The caregiver may ask about your symptoms, do a detailed exam, and advise some tests. These tests may include imaging studies. Your caregiver may review the results of your tests and discuss the procedure with you. You may be advised to stop taking blood-thinning medicines a few days before the procedure. You may also be given medicines to reduce your anxiety. Patients who have long term pain are less likely to benefit from epidural steroids than are patients whose pain comes on strong and suddenly.

LET YOUR CAREGIVER KNOW ABOUT:

- Any infection that you may have.
- Any other disease or condition.
- Allergies.
- Any problems you have had with anesthesia in the past.
- High blood pressure.
- Medicines that you are already taking, especially blood thinners.
- Bleeding or blood problems.
- Pregnancy, if applicable.

PROCEDURE

You will remain awake during the whole procedure. Although, you may receive medicine to make you sleepy. You will be asked to lie on your stomach. The site of the injection is cleansed. Then, the injection site is numbed using a small amount of local anesthetic. A hollow needle is directed through your skin into the epidural space with the help of a special x-ray. The x-ray helps to ensure that the steroid is delivered closest to the affected nerve. You may have some minimal discomfort at this time. Once the needle is in the right position, the local anesthetic and the steroid are injected into the epidural space. The needle is then removed. The skin is cleaned and a bandage is applied. The entire procedure takes only a few minutes, although repeated injections may be required (up to 3-4 injections over several weeks).

RISKS & COMPLICATIONS OF THE PROCEDURE

The complications due to the needle insertion are:

- Headache.
- Bleeding.
- Infection.
- Allergic reaction to the medications.
- Damage to the nerves.

The complications due to the steroid are:

- Weight gain.
- Hot flashes.
- Mood swings.
- Lack of sleep.
- Increase in blood sugar levels, especially if you are diabetic.
- Retention of water.

The response to this procedure depends on the underlying cause of the pain and its duration.

AFTER THE PROCEDURE

- You may be monitored for a short time before you go home.
- You may feel weakness or numbness in your arm/leg, which disappears within 1-2 hours.
- Someone must drive you home or accompany you home if you are taking a taxi.
- You may be allowed to eat, drink, and take your regular medicine.
- Your pain may improve or worsen immediately after the procedure.
- You may feel the beneficial effect of the steroid a few days later.
- You may have soreness at the site of the injection.
- If you have only partial relief of the pain, the injection may be repeated once or even twice within 4-8 weeks of the initial injection.

HOME CARE INSTRUCTIONS

- Avoid the use of heat on the injection site for a day.
- **Do not have a tub bath or soak in water for the rest of that day.**
- Remove the bandage on the next day.
- Resume your normal activities on the next day.
- Use ice packs or mild painkillers to reduce the soreness around the injection site.
- Follow up with your caregiver 7-10 days after the procedure.

SEEK MEDICAL CARE IF:

- You develop fever (more than 100.5°F (38.1°C)).
- You continue to have pain and soreness over the injection site even after taking medicines.
- You develop significant nausea or vomiting.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have severe back pain, which is not relieved by medications.
- You develop severe headache, stiff neck or sensitivity to light.
- You develop any new numbness or weakness of your legs.
- You lose control over your bladder/bowel movements.
- You develop fever more than 102°F (38.9 ° C).
- You develop difficulty breathing.

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