

Epidural Steroid Injections

This handout answers some of the most common questions patients have about epidural steroid injections. If you have other questions, please do not hesitate to call the Norman Prince Spine Institute at **401-444-3777** (Providence) or **401-845-1190** (Newport).

What is an epidural steroid injection?

A epidural steroid injection places a steroid—a medication used to reduce inflammation (swelling—into the epidural space of the spine.

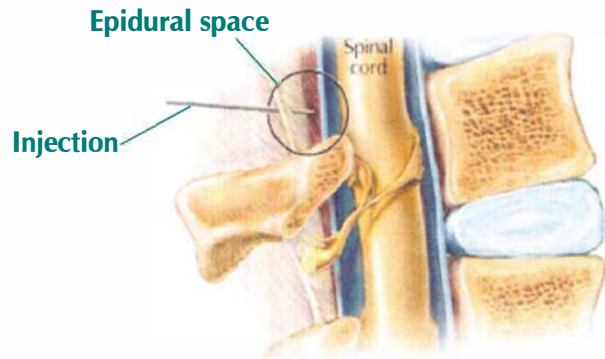
The epidural space is located just outside the covering of the spinal cord. Nerves travel through the epidural space to the neck, arms, back and legs. Different types of spine problems can cause inflammation in these nerves, often resulting in pain.

The steroid is injected into the epidural space at the neck or lower back to reduce inflammation in the nerves. By reducing inflammation, your pain may decrease and your underlying problem may heal.

Does the procedure hurt??

During the procedure, we will inject you with a medication called a local anesthetic. This will numb the area where you will receive the steroid injection. You may feel some stinging from the needle or the anesthetic.

You may also feel some pressure or a temporary increase in your normal level of pain while the steroid is being injected. This temporary increase in pain may last a few days after the procedure until the steroid starts to work.



Do I have to do anything to prepare for the procedure?

Once your procedure is scheduled, we will give you instructions on how to prepare. It is very important for your safety to tell us if any of the below apply to you:

- Take a blood thinner (for example, warfarin/ Coumadin, Lovenox, or Plavix),
- Take any aspirin products or nonsteroidal anti-inflammatory drugs, such as ibuprofen (for example, Advil or Motrin) or naproxen (for example, Aleve),
- Have a condition that prevents your blood from clotting normally
- Have any allergies to latex, local anesthetics, X-ray dye, or seafood.

Please plan to have someone drive you home after your procedure. **If you do not, your procedure will be canceled.**



What happens during the procedure?

The procedure generally involves these steps:

1. You will be taken to a patient waiting area. There we will check your patient identification band, measure your vital signs (such as your blood pressure and pulse), and ask you some basic questions about your health.
2. A medical assistant, who will be with you during the procedure, will bring you into the procedure room. The doctor will ask for your consent to do the procedure. You may ask questions at any time.
3. The doctor will numb the area with a local anesthetic. Then he or she will inject contrast (a substance that will help highlight the area on X-rays). If you are allergic to contrast, your doctor will discuss your options with you.
4. The doctor will numb the area with a local anesthetic. Then the doctor will inject contrast (a substance that will help highlight the area on X-rays). If you have an allergy to contrast, we will not use it.
5. The doctor will use a special X-ray to help place the steroid needle in the right spot. Then he or she will inject the steroid into the epidural space either from the side, (tranforaminal approach), straight on (interlamminar approach), or from the base of your spine (caudal approach). The best approach depends on the location and source of your pain.

The procedure usually takes about 10-15 minutes. Before you leave, we will give you instructions on how to care for yourself at home.

Are there any complications from the procedure?

Complications from this procedure are rare. The most common complication is a puncture to the dural sac (the covering around the spinal cord). This can cause a headache. Other complications, which are very rare, are bleeding, infection, and nerve or spinal cord injury.



How will I feel after the procedure?

- You may have a sore back for a few days after the procedure. Use an ice pack 3-4 times a day to make you feel more comfortable.
- You may continue to have your usual level of pain until the steroid starts to work. This can take anywhere from 2-10 days. Keep taking pain medication, as prescribed, if you need it.
- To help us plan your care, we ask that you call us 10 days after your injection. If you get some relief from the steroid, you may benefit from having another one the next month. You may have 3-4 steroid injections a year. If you get no relief from the steroid, we will continue to work with you to find the source of your pain and explore other treatment options.

For more information, please call the Norman Prince Spine Institute at [401-444-3777](tel:401-444-3777) (Providence) or [401-845-1190](tel:401-845-1190) (Newport).