



CERVICAL/THORACIC INTERLAMINAR EPIDURAL STEROID INJECTION

*Understand your condition.
Know your next steps.*

Introduction

An epidural steroid injection involves the placement of steroid medication in the epidural space. This injection may help to decrease neck/upper extremity pain that is caused by the inflammation of one or more compressed or inflamed spinal nerves.

The epidural space

The epidural space is located inside the bony spinal canal but outside the thecal sac, which is the tube that holds the spinal fluid. This space extends from the base of the skull to the sacrum (at the base of the spine). When a steroid is put into the epidural space, it has the ability to reach the discs/nerves and reduce inflammation and help with pain.

How does the injection work?

Steroids are strong anti-inflammatory medicines that can reduce inflammation, therefore decreasing pain.

The steroid usually starts to work in 2 to 14 days after the injection. The pain relief varies for each individual, from no relief to long-term relief of pain. A patient can have up to 4 steroid injections per year, depending on his or her other health problems or steroid injections into different body parts.

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APPOINTMENTS (651) 968-5201

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How should I prepare?

- » While the procedure may take less than 15 minutes, you should allow for at least 1 hour at the procedure center.
- » You need to arrange for a driver to be present and take you to and from the medical facility. If you do not have a driver with you, your procedure may have to be rescheduled.
- » If you are taking prescription blood thinners such as Coumadin (warfarin), Ticlid (ticlopidine), or Plavix (clopidogrel bisulfate), please inform your doctor's patient care coordinator. These medications will need to be stopped before the procedure, *but only after you receive permission from the doctor who is prescribing these medications.*
- » If you develop a fever, night sweats, or an active infection, your procedure will need to be rescheduled. Please contact our office at (651) 968-5201 immediately to inform us of your change in condition.

The procedure

The patient is placed prone (lying face down) with two pillows under the chest and a small pillow under the forehead. The appropriate region of the skin is sterilely prepared. Using fluoroscopic (X-ray) guidance, the appropriate path for the needle is determined. The skin is anesthetized and a thin needle is advanced to the appropriate region. When nearing the epidural space, a loss of resistance syringe is used. Once loss of resistance is obtained, a small volume of contrast solution is injected to show that the medication will flow exactly where intended. Then a small volume of steroid is injected. The patient is cared for in the recovery area for 20 to 30 minutes.

Possible side effects of the steroid

Possible side effects include facial flushing, fluid retention, insomnia, low-grade fever, temporary changes with menstruation, and headache. These side effects usually are minimal and resolve 1 to 3 days after the procedure. If you have diabetes, your blood sugars may be temporarily elevated.

IF YOUR PROCEDURE INCLUDES SEDATION

- » You should have no solid foods for 6 hours before your procedure.
- » You may have clear liquids up to 2 hours before your procedure. Examples include: water, broth, clear fruit juices such as apple, cranberry, and grape juice. These juices should not include pulp. Tea, black coffee with *no cream*, and carbonated beverages are also allowed.
- » Nothing by mouth, including throat lozenges, mints, and all hard candy.
- » No gum for 2 hours before your procedure.
- » You must have a responsible adult arrive with you to our facility. If you use a taxi or volunteer ride service, you still must have a responsible adult with you in order to help take care of you after your sedation procedure.
- » Please take your regular medications the day of your procedure, especially any **heart or blood pressure medications**.
- » If you are on medication for **diabetes**, be sure to take it the day of the procedure.

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After the injection

Follow the specific instructions given to you by the nurses at the procedure center.

- » Plan to rest for the remainder of the day. You may resume activity as tolerated by the level of your comfort. Do not overexert yourself the first day.
- » Soreness may be present from the needle placement for 1 to 2 days. If a local anesthetic was injected, you may feel a numbing sensation in your legs for a few hours. You should be careful when walking until the numbing sensation is gone.
- » For discomfort, apply ice packs to the area for 15 minutes several times a day.
- » Do not soak in a tub for 24 hours after the procedure. You may take showers.
- » Report any signs of infection or other unusual symptoms, including redness and warmth at the injection site, increasing pain, swelling, drainage, chills, night sweats, or fever that reaches above 100° F.
- » If you develop a headache, stay quiet with your head and body flat, drink plenty of fluids, and take Tylenol (acetaminophen) or your prescribed pain medication. If your headache persists beyond 12 hours or is noticeably increased by standing upright, it may be an indication of a spinal leak and our office should be notified. This is very rare. Usually, in this event, the circumstances are self-limiting and resolve in time without additional treatment.
- » Keep a record of your pain and symptoms after the injection and report your results as instructed by your doctor's patient care coordinator.

Remember that your usual pain may go away for a few hours, but after the local anesthetic wears off, it is normal for your pain to return. You may also have some temporary discomfort at the puncture site. The full effects of the steroid may take 2 days to 2 weeks to work, and its lasting effects vary from person to person.

CAUTION

Driving while sedated is illegal and can result in serious accidents. Please be sure to use your driver to get you home safely! If using medical transportation or a taxi, another responsible party must accompany you.

Potential risks of interlaminar epidural steroid injection

The risks are quite minimal, but are similar to any procedure involving a needle placement. These include, but are not limited to:

- » Allergic reaction to the anesthetic, steroid, or contrast dye. *Be sure to inform us before the injection if you have any known allergies.*
- » Needle injury to a blood vessel, which may bleed.
- » Irritation of the injected structure, which could cause worsening pain.
- » Inability to complete the injection due to technically or anatomically not being able to place the needle at the desired target.
- » Infection.
- » Needle puncture of the spinal fluid tube causing a spinal fluid leak. This could cause a spinal headache, and if not resolved by bed rest, may require specific treatment.



