

What are the risks and side effects associated with the procedure?

Common side effects

- Short term difficulty bearing weight on your legs. This should last about 30 minutes.
- Increased discomfort in the area associated with pain.
- Bruising to the injected area.
- Facial flushing for a few days.
- In women short term alteration to the menstrual cycle.
- A short term increase in your blood sugar levels if you suffer from diabetes, which may make your diabetes more difficult to manage for a few days.

Less common side effects

- Increased pain for several days.
- Headache; these can range from mild to severe and can sometimes require treatment.
- Permanently increased pain.
- Allergy to injected medication.
- Blood clots in the epidural space, the removal of which may require surgery.
- Seizures.
- Epidural infection.
- Permanent nerve damage, leading to weakness or paralysis; this is very rare.

Important information.



Please inform the admission office on 01803 656031 if you have

- Any form of infection that requires you to take antibiotics.
- If you are taking antibiotics, Aspirin, Warfarin, Clopidogrel, Rivaroxaban or Dabigatran **before attending**. Some of these may need to be stopped some days prior to your appointment.



**PATIENT
INFORMATION**

Steroid Epidural Injections: Cervical, Thoracic and Lumbar

What is an epidural injection?



“Epidural” refers to the space surrounding the outer protective covering of the spinal cord. An epidural injection is an injection into the epidural space. For some people, an injection into the epidural space can help leg or arm pain.

Does it work?

You may notice improvement in your leg or arm pain straight away or it may be a few days before this really starts to work. An epidural injection **may not** improve weakness or loss of feeling, or help with back or neck pain.

How long will it last?



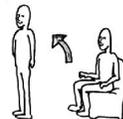
Pain relief from the steroid can last many weeks. If the pain returns after some time you could have another injection or try different medications.

What will happen on the day?

You may eat and drink as normal unless your hospital letter states otherwise. Take all your tablets at the normal times, apart from medication such as Warfarin, Clopidogrel, Rivaroxaban or Dabigatran as these may need to be stopped beforehand. You should be informed at your outpatient appointment if you need to stop these drugs. If your GP prescribes any of the above medication between your outpatient appointment and your injection please ring the office on 01803 656031 to inform the consultant. You will not need to get undressed but if you could wear loose fitting clothing such as tracksuit clothing so that the skin can be easily exposed

- You will be either lying on your left hand side, front or sitting up for procedure, which usually takes 10-20 minutes.
- An x-ray machine is often used to help with the placement of the needle (female patients may be asked if they could be pregnant prior to exposure to x-ray).
- You may notice an increasing ache in your leg(s), particularly if you have spinal stenosis. This is not normally very painful and usually does not last long.
- Occasionally, the needle can bump into a nerve, causing a shooting sensation in either leg

What happens after the procedure?



After the procedure, you will need to stay in the department for thirty minutes or so, until you are able to walk and are fit for discharge.



You must be collected from the unit you will not be allowed to travel home by bus or train.



You will be given a discharge letter explaining what injection you have been given and a pain diary to fill in. You will be told how to fill this in during your appointment; this will help the consultant decide what happens next.



Continue to take your pain medication until you notice some improvement.



After your injection take things easy for the rest of the day. Do not do any strenuous exercise or heavy work for the first few days.