What are Epidural Steroid Injections?

- If you have pain caused by inflammation in your spine, your doctor might recommend a shot (injection) of a steroid medicine into your spinal canal called an Epidural Spinal Injection (ESI).
- Steroid medicines reduce inflammation and swelling. This can relieve pressure on the nerves.
- The goal is to decrease your pain allowing more time for natural healing and help from other ongoing treatment.
ESIs are recommended when:

- Your pain is bad enough to get in the way of your day to day life or other treatments.
- Your pain has not responded to other treatments such as medications, physical therapy or manual medicine.
- The pain is likely related to nerve inflammation which results in leg or arm symptoms.

How well do they work?

- For some people, the shots provide relief from pain, especially pain caused by disc herniation or narrowing of the spinal canal called spinal stenosis.
- If you don’t have pain that spreads from your back down your leg or arm, it is much less likely that ESIs will help.
- The shots may allow you to postpone or avoid surgery if you respond to the injection.
- It isn’t always possible to know for sure how long pain relief will last. Because pain relief may be partial or temporary it is important to continue with other conservative treatments recommended by your doctor.
Are there risks or side effects of ESIs?

The most common side effect from an ESI is a short period of increased pain at the injection site or a brief increase in discomfort. Mild headaches after treatment are common. Let your doctor know if you get a severe headache because this may mean you are leaking spinal fluid which is a rare complication. Other risks such as infection, nerve injury or allergic reactions are extremely rare.

Other side effects include:

- Feeling jittery or being flushed.
- Patients with diabetes often have elevated blood sugars for a short period after an injection.
- Patients should not receive steroids if they have glaucoma or have had reactions to steroids in the past.
- Loss of bone density has been reported but appears to be rare and unlikely unless multiple injections are performed.
- Bleeding after an ESI is extremely rare. However, if you notice any increased weakness, numbness, or pain, please alert our office immediately.

What is usually involved with getting an ESI?

- Your doctor will review your medications to see if you need to temporarily stop taking any before the procedure — any blood thinning medications should be reviewed by your doctor.
- You will be asked if you are allergic to any of the drugs given during the injection.
- Please let us know if you are particularly afraid of having the injection or if you regularly get light headed or pass out when having medical procedures.

During the procedure:

- Your doctor uses an x-ray machine to guide the injection.
- You lie on your stomach while a small needle is inserted in to the epidural space in your back. This is an air/vacuum space above the spinal cord and spinal nerves.
- The procedure takes 10-15 minutes.
- Most people have mild burning from the anesthetic and feel a deep pressure rather than severe pain.
- The medicine may be given as 1 shot or a series of up to 3 shots 2-4 weeks apart. More than 3 shots in the same spot within 6 months is not recommended.
When will I know if the treatment worked?

• Some people feel relief immediately after the injection.
• It can take up to 1 week to get the full benefit of the injection.
• Even if you feel great, it’s important to take it easy for 24 hours after the injection and only increase activity slowly or after discussion with your doctor.

What if I decide not to get the treatment?

After the thorough evaluation of your spine problem that generated your consideration of an ESI, you need to get recommendations from your caregivers about other treatment approaches that might help your problem. Pain relief is one goal, but we also want to guide you towards whatever treatments are possible to best resolve your spine condition. This might include a discussion about surgery.

What can I do to help healing?

• Limit or avoid activities that severely increase leg or arm pain. An increase in back or neck pain is less concerning.
• Remain as active as safely possible. This promotes improved blood flow to the spine which will help you heal.
• Change positions often in order to decrease stress on one part of the spine.
• Quitting smoking will also positively affect your ability to heal.
• Improved nutrition is thought to support healing. Losing excess body weight will decrease stress on your spine.
• Ongoing medical management — including the use of over-the-counter or prescription drugs — can be coordinated by your physician.