PATIENT FACTSHEET



Epidural Injection

An epidural injection is where a mixture of a local anaesthetic and a steroid, such as cortisone, is injected into the space surrounding the spinal cord (epidural space).

Why an epidural injection?

Epidural injections are useful to settle down pain that is associated with inflammation within the lumbar spinal canal. The epidural space is the fat containing area between the outside lining of the spinal cord (dura) and the spinal canal.

Pain relief can sometimes be obtained with this technique for acute lumbar disc herniations and occasionally with acute discogenic pain. For reasons that are not entirely understood it may also provide relief for some sufferers of spinal stenosis. Epidurals can also be used to diminish neural tension and hence can be used for hamstring and calf dysfunction.



Procedure

The procedure is usually performed by a radiologist using a CT scan for guidance. The patient lies face down on the CT table and the back area is cleaned with an antiseptic solution. The area is injected with a small amount of local anaesthetic to numb the area followed by placement of the needle into the epidural space, using the CT scan to check

the position. The position is also confirmed by injection of a small quantity of contrast - such as air or x-ray dye. A mixture of local anaesthetic and cortisone is injected. This may be uncomfortable for a very short period of time while the local anaesthetic takes effect.

The procedure takes about 30 minutes. Patients are transferred to the Day Recovery Unit following their procedure and stay with us for a short period of time; the amount of time you spend in our DPU depends on how you feel.

The cortisone usually takes effect after 2-3 days and lasts, on average for 3-6 months. It works in approximately 70% of patients.

Are there any risks or side effects?

There are risks associated with any procedure. In general the risk is low, but includes:

- o Soreness and bruising at the injection site
- Dural puncture resulting in a headache
- o Temporary leg numbness or weakness
- Bleeding
- Infection

Very Rarely:

- Nerve damage
- o Leg paraesthesia and loss of bladder control.

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Post Procedure

- o It is essential to have someone take you home
- There may be a slight soreness or bruising at the needle site. Paracetamol and or ice may provide some comfort if required.
- A headache is usually relieved with paracetamol and rest (lying flat) and usually resolves within 48 hours.
- The local anaesthetic may make the legs feel temporarily numb (or occasionally weak). This usually resolves after 4-6 hours depending on the local anaesthetic used.
- You should not participate in strenuous activity or exercise for up to one week depending on your treating doctor's instructions. They will also advise you on how best to resume pre-treatment activity levels.
- If you experience any fever, localised heat, swelling or increasing pain more than 48 hours after the injection you should consult your doctor without delay.

Things we need to know from you

Please inform the Radiology staff of any of the following:

- If you are allergic to any medications, anaesthetic agent or X-Ray contrast
- 2. If you on blood thinners such as Warfarin or Plavix
- 3. If you are not feeling well or wish to cancel please ring immediately (someone else can be offered your appointment time).

Female Patients: Please let us know if you are pregnant or suspect you may be or if you are breastfeeding.

Please bring to your appointment

Please bring your referral from your doctor along with the following:

- Medicare Card
- Pension/Concession Card
- o Previous films

Concerns

It is important you understand why and how we will be assisting you. Please feel free to contact our friendly staff at any time if you have any questions or concerns on 03 9420 1700.

Find Us

We are situated in the new AAMI Park. Free on-site parking available for our patients- enter via Entrance F and continue to Car Park F.



