



PATIENT INFORMATION FOR EPIDURAL INJECTION

Purpose of the Injection

The epidural space is an area that encircles the dural sac and is filled with fat and small blood vessels. The dural sac surrounds the spinal cord, nerve roots and cerebrospinal fluid (CSF). Steroids inhibit the inflammatory response caused by chemical and mechanical sources of pain. Inhibiting the immune response with an epidural cortisone injection can reduce the pain associated with inflammation. Immediately after your injection, you may feel that your pain has reduced or gone altogether. This is due to the local anesthetic injected into the epidural space and may last for several hours. The cortisone that is also injected may take several days to start working and its effect may last several days to months. It is difficult to predict whether the injection will help you or not as occasionally these injections may not provide any significant medium to long term relief.

How is it performed?

Epidural injections are a common procedure performed by a specialist radiologist. The procedure usually takes about 30 minutes (it may be longer). You will be required to lay very still on your stomach whilst we CT scan the affected area and prepare all the syringes required for the injection. The skin on your back around the affected area will be cleaned with an antiseptic solution and then injected with some local anesthetic. The local anesthetic injection may sting for about 10 seconds as the skin is numbed. Under the guidance of the CT scanner, the needle is positioned within the epidural space as requested by your referring doctor. Once the needle is in the correct position, a mixture of local anesthetic and cortisone will be injected and you may feel some momentary pain in the back and / or the legs. At the conclusion of the procedure, we will place a band aid over the injection site which you should leave in place for the next 24 hours.

Risks associated with the procedure

Generally, epidural injections are relatively safe procedures. However, as with any medical interventional procedure there are risks, side effects and the possibility of complications. The most common side effect is pain which is usually temporary. Other risks include but are not limited to; infection, bleeding, numbness or weakness in the legs, accidental damage to nearby structures (e.g. nerve, blood vessel or other organ), allergic reactions to the medications injected, headaches due to CSF leaks, ascending block (requiring assisted ventilation), arachnoiditis and post procedural bruising / soreness. Although extremely rare, injections around the spinal cord carry a very small risk of paralysis but this is very uncommon. It is strongly advised that you arrange for someone to accompany you home after the injection. Please **DO NOT DRIVE YOURSELF HOME**.

If you have any questions or concerns about this procedure, please direct any questions to the radiology staff who will attend to you prior to the commencement of the procedure.