Transforaminal epidural injections

Pain Management

Patient Information Leaflet
Introduction

Welcome to The Dudley Group NHS Foundation Trust. This leaflet will provide you and your relatives with information about transforaminal epidural injections (root blocks).

What is a transforaminal epidural injection?

A transforaminal epidural is an injection of local anaesthetic and steroid into a specific opening (foramen) at the side of spine where the nerve root comes out. This injection can also be given to a specific nerve root and in this case it is known as a root block or root sleeve injection. The injection can be given in the neck, mid spine or lower back.

What does it do?

The local anaesthetic numbs the nerves in the short term. The steroid can provide long term pain relief for a few weeks or months and any recurring pain may not be as severe as before, but everyone experiences the effects in a different way. Some people have increased pain for the first few days following injection before the pain gets better.

Steroids have been used for decades for their beneficial effects. Although steroids are not licensed for this specific procedure their use is endorsed by the British Pain Society. The steroids we use act locally and so minimise any side effects.

What are the risks and complications?

Overall epidural steroid injections are very safe and serious side effects or complications are rare. However like all injection procedures there are some risks:
Common risks
- Weakness, tingling or numbness in limbs.
- Bruise or tenderness at the site of injection.
- A temporary increase in pain for few days.

Rare risks
- No improvement in pain.
- Blood in the epidural space (the space around the spinal cord).
- Infection.
- Damage to surrounding blood vessels.
- Nerve injury which can be either temporary or permanent.
- Spinal cord injury and paralysis.
- Convulsions.
- Allergic reaction.
- Stroke.

If you experience any of these rare risks please contact the Pain Management Helpline on 01384 244735, your GP or in an emergency dial 999.

Steroid-related risks
Compared to regular steroid use the steroid injection used for pain procedures is associated with very few side effects, however:

- Diabetic patients – may experience a slight rise in blood sugar for up to two weeks so you should monitor your blood sugar very carefully. (Contact your GP or diabetic nurse if you have any problems).
- Heart failure patients – may experience increased shortness of breath due to salt and water retention. (Contact your GP or nurse if you have any problems).
X-ray precautions:
- The procedure uses X-rays and these use a small amount of radiation which may add slightly to the normal risk of cancer.

Female patients – you must tell us if you are or might be pregnant. If you are not sure a pregnancy test will be offered.

What alternatives are there to transforaminal epidural injections?

You do not have to have this injection and your consultant will discuss alternative treatments with you appropriate to your condition. If you prefer, you can continue to take painkilling medication without having any other treatment.

How do I need to prepare for the procedure?
- You should not eat for six hours before the procedure but you can drink clear fluids up until two hours before procedure. Clear fluids means water or diluted squash and not drinks such as fruit juices, tea, coffee or milk. **The exception to this information is if you are diabetic. If so please eat and drink as normal and take your diabetic medication/insulin.**

- Your treatment will be at Russells Hall or Corbett Hospital as an outpatient in the Day Surgery Unit (either a morning or an afternoon appointment). This will be confirmed at your clinic appointment.

- You will be at hospital for between two to four hours.

- You will need to arrange for someone to drive you home afterwards.
• Please arrange to have someone with you overnight.

• Please note that if you have sedation during the procedure you should not drive or operate machinery for 24 hours afterwards.

**What do I do about medication?**

• You should take all your regular medications **except blood thinning medication** i.e. Clopidogrel, warfarin, dipyridamole, Rivaroxiban. You will be given instructions about what to do about these drugs when you are given your appointment for the injection.

• **Please bring a repeat prescription document with you if you are taking any regular medications.**

**What does the procedure involve?**

**Before the procedure**

• A doctor will discuss the procedure with you and ask you to sign a consent form.

**During the procedure (duration 10 to 15 minutes)**

• This is carried out in theatre while you are awake.

• You may be offered sedation (through an injection into the back of your hand) to help you to relax.

• You will lie on your stomach and the area for injection will be cleaned with an antiseptic solution which may feel cold. Sterile sheets will then be placed around this site and a local anaesthetic will be injected into your back or neck to numb the area.
• An X-ray will be used to ensure proper positioning and we may also use an ultrasound for guidance.

• The site will be injected with local anaesthetic and steroid. You may feel some pressure and pushing whilst this procedure is being carried out but you should have no pain. If you do feel any discomfort then please tell a member of the theatre team.

• Once completed a plaster will be placed over the injection site. You will then be taken to the recovery area.

**After the procedure**

• In the recovery area you will be observed for 30 minutes as you might feel a little drowsy and sleepy.

• You will also be offered light refreshments and after this you can go home.

**What do I need to do when I go home?**

When you get home please continue to take any regular medication. It may be necessary for you to take painkillers for a day or two. You might need someone at home to help you but you do not have to stay in bed. The plaster can be removed the next day.

You should gradually increase your level of activity. However **do not** take up new exercises until your muscles have had time to adapt. Build up your exercise levels by increasing your physical activity (e.g. walking, swimming, housework) gradually every few days. The eventual aim is to get back to a level of activity that is normal for you.
What happens after having the injection?

Some patients will experience immediate pain relief, however it usually takes 24 to 72 hours for the effects of the steroid medication to take effect and it may be up to one week before the maximum benefits are felt. Some patients will experience mild pain from the procedure that will ease up in a very short amount of time.

How you respond to the injection will be monitored by you on a pain monitoring chart which we will give you to take home. Your further treatment plans will be based on this.

If you have any questions or if there is anything you do not understand about this leaflet please contact:

Clinical nurse specialists on the Pain Management Helpline:
01384 244735 (9am to 5pm, Monday to Friday)
This leaflet can be made available in large print, audio version and in other languages, please call 0800 0730510

यदि आपने यह दस्तावेज अपनी भाषा में चाहिए तो पेशेवर इनफरमेशन को-ऑर्डिनेटर को टैलीफोन संख्या 0800 0730510 पर फोन करें।

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Information Co-ordinator

0800 0730510