

Epidural Steroid Injection

What is an epidural steroid injection?

An epidural steroid injection is a common procedure to treat spinal nerve irritation that is caused by tissues next to the nerve pressing against it. The beginning of the nerve (nerve root) is most often irritated by an inflamed intervertebral disc, or disc contents, directly touching the spinal nerve.

How is an epidural steroid injection performed?

The epidural steroid injection procedure is quick and simple. While it is common for people to be concerned prior to the procedure, it is actually frequent to hear from patients afterwards: "Is that all?"

The spinal cord rests in the spinal canal. The nerve roots branch out from the spinal cord at each level of a spinal vertebra (the bony building blocks of the spine). The cord is protected by cerebrospinal fluid (CSF), which serves as a shock absorber for the cord. The CSF is held in place by a membrane with several layers, one of which is called the dura, from the Greek for tough (think of "durable"). The Greek word "epi" means "outside of." So, the epidural space is outside of this tough membrane. During an epidural steroid injection, a needle and syringe are used to enter the epidural space and deposit small amounts of long-lasting steroids around the inflamed spinal nerve. A fluoroscope (a viewing instrument using X-rays) is used to visualize the local anatomy during the injection. The epidural steroid injection specifically targets the inflamed area and treats it with a maximal amount of steroids, thereby minimizing exposure of the rest of the body to the steroids.

When are epidural steroid injections used?

Epidural steroid injections are most commonly used in situations of radicular pain, which is a radiating pain that is transmitted away from the spine by an irritated spinal nerve. Irritation of a spinal nerve in the low back (lumbar radiculopathy) causes pain that goes down the leg. Epidural injections are also used to treat nerve compression in the neck (cervical spine), referred to as cervical radiculopathy.

How will I prepare for the procedure?

Your doctor may tell you to be NPO for a certain amount of time before the procedure. This means that you should not eat or drink anything for the amount of time before your procedure. This means no water, no coffee, no tea - not anything. You may receive special instructions to take your usual medications with a small amount of water. Check with your doctor if you are unsure what to do.

You should tell your doctor if you are taking any medications that thin your blood or interfere with blood clotting. The most common blood thinner is Coumadin. Other medications also slow down blood clotting. Aspirin, ibuprofen, and nearly all of the anti-inflammatory medications affect blood clotting. Medications used to prevent strokes, such as Plavix, Xarelto, or Eliquis can also affect blood clotting. These medications usually need to be stopped seven days prior to the injection. Be sure to let your doctor know if you are on any of these medications.