



GUIDELINES FOR SPINAL INJECTIONS

Non-operative therapeutic injections may be considered an adjunct to medication and physical therapy in an attempt to control your pain. Injection techniques may help control pain from degenerative disc disease, injury, osteoarthritis and nerve compression.

The following is a general guide to different types of diagnostic and therapeutic nerve blocks and cortisone injections used to treat pain and discomfort caused by spinal disorders:

○ **Epidural Steroid Injections:**

The epidural space is the space surrounding the membrane that covers the spinal cord and nerve roots. Disorders such as spinal stenosis and herniated disc can cause nerve irritation, inflammation and pain. An epidural injection places anti-inflammatory medication (eg: steroids) into the epidural space. Epidural injections are performed in the cervical, thoracic and lumbar spine. By administering the epidural injection in a specific location we believe the patients' response may be diagnostic as well as therapeutic. The benefit of an epidural injection usually occurs within 7-10 days of the injection. Up to 3 injections over a span of weeks to months may provide more profound relief. Dural puncture with associated headache is the most common complication of epidural steroid injections and occurs only 5% of the time. This can be treated easily with the administration of a blood patch.

○ **Sacroiliac Joint Injection:**

The sacroiliac joint is the large joint that connects your Ilium (pelvic bone) to the spine. It is located in the pelvis just above the tailbone. Inflammation and contracture of the sacroiliac joint can cause low back and buttock pain. An injection of an anesthetic and steroid into this joint may help relieve pain.

○ **Facet Joint Injections and Medial Branch Blocks:**

Joint inflammation between the moving joint of the vertebrae can cause back pain. The facet joint are the small paired joints in the back of the spinal column that connect one vertebra to the next. Standing or extension of your back can put loading stress on these joints leading to pain. A facet joint block is an injection of local anesthetic and steroid medication into the joint. A medial branch block uses similar medication injected outside the joint space near the nerve that feeds that particular facet joint.

○ **Selective Nerve Root Block:**

Pain and discomfort from cervical or lumbar radiculopathy may be relieved by a SNRB. A radiculopathy is irritation and inflammation of a particular spinal nerve that provides sensation and strength to a specific region of the arm or leg. This is a diagnostic injection to help your surgeon to localize where your pain arises within the spinal column.

○ **Radiofrequency Nerve Denervation (RFD):**

Facet joints are small paired joints that connect one vertebra to the next, and degeneration of one or more of these joints may give rise to neck or low back pain. Radiofrequency nerve ablation uses radio waves to produce heat directed at a specific facet joint nerve. The heat destroys the nerve and can relieve pain on a sustained basis.

What to Expect During the Procedure

- The procedure is performed in a sterile setting similar to an operating room.
- The injection site is sterilized and draped. Skin numbing medication is injected into and around the procedure site.
- Fluoroscopic guidance is used during the procedure to guide the needle into the proper position.
- After the needle is placed, an anesthetic and steroid are injected.

After the Procedure

- The patient is taken to the recovery area where the medical staff will continue to monitor you.
- You will be released to go home with verbal instructions.
- The beneficial effects of the steroids usually require 2-3 days to take hold, but may take as long 8-10 days. Keep track of how long relief lasts and report it to your physician on your follow up appointment.

Patient Preparation

It is important to follow all pre-test instructions. These instructions generally include:

- Stop blood thinning medication 5 days prior to the test.*
- Stop anti-inflammatory medication 2 days prior to the test.
- Some injection facilities may require that you arrange for someone to provide transportation home.

*If you are taking blood thinning medications such as aspirin, Coumadin, Warfarin, Lovenox, Plavix, Xarelto and Eliquis, you may be asked to stop taking these medications 3-5 days prior to your procedure. Contact your doctor first to make certain that you may safely stop these medications. If you cannot stop these medications, please notify our office.