**Spinal Injections**

**Pre-Operative Advice -** You can eat food up to six hours before the injection and drink water up to two hours before the injection. Please bring a list of your normal medication with you on admission. Take your regular medication and pain relief on the morning of the injection. If you are on blood thinners you may need to stop taking them several days before the procedure. If you are diabetic please seek advice from your GP or contact The London Spine Clinic for advice on when to stop taking your medication before the injection. If you are taking or have recently taken antibiotics for an infection or have a serious medical condition please let us know in advance. Wear loose fitting comfortable clothes and shoes and please remove any make up or nail polish. If you develop a fever, cough or feel unwell before the injection contact The London Spine Clinic to reschedule your procedure.

**Spinal Injections** deliver medicine in your spine, normally around the source of your pain. The two medicines used are:

* **Local anaesthetic** which is used to numb/block pain from the injected area. It will help to keep you pain free after the injection for a few hours.
* **Steroid** is to reduce swelling and inflammation. The steroid normally does not start to work until 3-10 days afterwards.

The aim of a spinal injection is to reduce the inflammation causing pain in your back, legs or arms. Injections can be repeated periodically if they work and will allow you to progress with other treatments such as physiotherapy. Injections can also help diagnose the cause of pain as pain relief confirms the joint/nerve as the source of the pain. If successful, injections may often avoid the need for surgery.

**Epidural injections** involve the injection of steroid solution that bathes the irritated nerve roots. The injection may ease your back/neck and/or leg/arm pain and help reduce inflammation. The epidural injection should help to shrink the swelling in the bulging or herniated disc that may be pressing on a spinal nerve. These can be done through the very base of the spine (caudal) or through the holes at the sides (trans-foraminal).

**Dorsal Root Ganglion Block** (**DRGB)** targets individual nerves in your spine and can help ease the symptoms of ‘nerve pain’. The steroid injection will partially numb the nerve and reduce the inflammation and pain.

**Facet or Sacroiliac Joint Injections** involve the injection of steroid into the joints helping to reduce inflammation and pain.

**Radiofrequency Ablation (RFA)** A radiofrequency needle is used to heat a small area of nerve tissue, thereby decreasing pain signals from that specific area. It is most commonly used for treating pain from the small (facet) joints in the spine.

**Trigger Points** are focal areas of muscle spasm and inflammation. The procedure involves the injection of medication directly into the trigger point.

*The type of spinal injection you have will be based on your specific symptoms.*

**How is it performed?**

Injections are performed under sedation, using x-ray guidance to ensure safety and accuracy. The anaesthetist will inject the sedative into a vein in the back of your hand. The procedure will take place in theatre and will last approximately 30 minutes. You will lie on the x-ray table and the skin over the area to be treated is cleaned. Local anaesthetic will be injected into your skin to numb the area and then the needle will be inserted into your back using x-ray guidance. Local anaesthetic and steroid will be injected slowly. After the injection you will spend a short period in recovery before being transferred back to your room. The nurses will check your clinical observations, wound site and ensure your safety. You can drink and eat after the injection. Please seek assistance the first time you get out of bed in case you are still feeling the effect of the sedation. You may feel sleepy, dizzy, sore and/or slightly nauseous which is normal after intravenous sedation or epidural injections. When you have passed urine and walked around your room/corridor safely you can be discharged. We generally recommend staying in hospital a minimum of two hours after the procedure. Spinal Injections are normally performed as a day case at London Clinic.

The procedure is safe and serious side effects and complications are rare, however possible risks include infection, bruising, bleeding, headache, increased pain, nerve injury and muscle spasm.

Epidural Steroids may cause side effects such as a headache, hot flushes, feeling sick, fluid retention, a fall in blood pressure and diabetic patients may notice a temporary rise in blood sugar which should settle within a few days.

**Post-Operative Advice**

* Your pain may take several days to improve
* Some types of pain, especially if of long standing may take 2-3 weeks to improve
* It is advisable not to use public transport (bus/tube) to go home and that somebody should collect you.
* You should not drive or operate machinery until the following day.
* Avoid making important decisions for 24 hours as the sedation can cloud your logic.
* Rest for the remainder of the day and return to normal activities the following day. Try to avoid lifting, twisting, bending, running and gymnasium but gentle exercise such as walking and swimming (not breast stroke) are fine until you start Physiotherapy.
* Remove the plasters from the injection site the day after the injection and you can then shower as normal.
* Please take pain relief such as paracetamol, ibuprofen (with food) and use a cold pack (20 minutes max at a time) to help ease any pain/stiffness/tenderness after the injections. Your pain may return after the local anaesthetic has worn off and there may be some additional soreness as a result of the injection.
* Injections can sometimes cause a flare up of symptoms or increased pain for a few days. Do not be alarmed and your symptoms will gradually improve in the days following the spinal injection.

A **follow up appointment** will be arranged by the Consultant’s secretary.

Please start **Physiotherapy** approximately 7-10 days after your injection. Physiotherapy at The London Spine Clinic can be arranged if you do not have your own Physiotherapist.

Please contact The London Spine Clinic (9-5pm Mon-Fri) or out of hours your GP or Accident & Emergency if you experience any of the following:

* Increasing redness, swelling or oozing around the injection site
* Fever
* Excruciating pain unlike your normal symptoms
* Sudden weakness or numbness which is not resolving
* Sudden loss of bowel or bladder function.
* Severe headache which is not improved with painkillers.

This sheet is intended as a guideline only.

If you have any questions please contact

The London Spine Clinic on: 020 7616 7720

Patrick O’Connell (Spinal Practice Nurse)

Tel: 07860756267 or p.o’connell@thelondonclinic.co.uk

The London Clinic on: 02079354444