

Why are they used?

Epidural steroid injections can be beneficial for conditions caused by spinal disc lesions including sciatica and spine-related hamstring pain. The purpose of the injection is to carry the anti-inflammatory medication to the inner part of the back where the more serious types of strain, affecting the discs, cause pressure or chemical irritation of the nerves. There, the solution which contains a mixture of saline and corticosteroid can bathe the structures to reduce swelling and irritation. An epidural given by the caudal route is administered just above the tail-bone. Caudal epidural injections can be performed safely and effectively as an outpatient procedure without the need for overnight stay, general anaesthetic or x-ray guidance.

However, before you consider having a steroid injection you must inform your practitioner if you have an:

- Allergy to steroid or local anaesthetic
- Infection close to the site of the proposed injection or a significant infection elsewhere
- Broken skin or rash at the site of the proposed injection
- A tendency to bleed more readily as a result of illness or medication

What does the procedure involve?

The doctor will identify the base of the sacrum before administering the injection. First, some local anaesthetic will be used to numb the skin. The steroid/saline solution is then injected slowly. The needle enters the spinal canal through the base of the sacrum, and the saline mixed with steroid penetrates up the canal to reach the level of the third lumbar vertebra.

In the majority of cases this is not a painful procedure, although you may experience some feeling of pressure as the volume of fluid is injected, or reproduction of your sciatic pain temporarily. After the procedure, you will be expected to rest for a while (20 minutes or longer) before going home.

Please report any known allergies (drugs, elastoplast etc) to the doctor prior to the procedure.

How long will it take before I obtain benefit from the injection?

The benefit usually starts after 36 hours but may build up gradually over a week or 10 days.

A minority of patients will fail to respond to caudal epidural injection, and some further patients may obtain only short-lived but significant relief of symptoms. If the latter scenario happens, the epidural injection may be repeated to give a longer-lasting effect.

Please note that your pain may be the same, or worse in some cases than before the procedure. This will usually last for 24 - 48 hours and is part of the normal process.

Possible Side effects

With a 'caudal epidural injection' you may experience:

- ◆ Some temporary light headedness after the procedure.
- ◆ Due to the corticosteroid component, some people may develop a facial flush the next day which lasts 12-24 hours
- ◆ Less commonly, some women experience disruption of the menstrual cycle for one or two cycles.
- ◆ Corticosteroid injections can cause a rise in blood sugar for a few days in diabetic patients. The effect however is usually negligible and would not normally necessitate a change in treatment. In certain circumstances additional monitoring may be recommended.
- ◆ Thinning of the skin and soft tissues at the site of the injection may occur resulting in a dimple. Occasionally the formation of a small lump or loss of a small area of skin colour may also occur.
- ◆ Very rarely (this is estimated at less than 1 in 2500 cases), the epidural needle may penetrate the dural membrane. This is usually recognised immediately and if it occurs your doctor will discontinue the procedure and ask you to lie down for 24 hours to avoid a "spinal headache", The small hole in the dura normally seals itself very quickly without causing any further problems.
- ◆ Other possible complications are similar to those of any injection and very rare, namely infection or allergic reaction which can occur in approximately 1 in 7,000 cases and can be dealt with promptly.
- ◆ It is extremely unlikely that you will experience any other significant side effects and there is no satisfactory evidence of any long term complication from epidural steroids. However, in the rare event you do experience any untoward reaction in the following 24 hours, such as shortness of breath, dizziness or severe headache, please contact the clinic, immediately, or if it is out of hours, please contact your GP or go to Accident and Emergency

Following the procedure

After the procedure, you should remain in clinic for at least 20 minutes (or at least 30 minutes if you have received Entonox gas). You are then advised to go home and rest for the remainder of the day and preferably the next day too. Prolonged sitting and long car journeys should be avoided.

As far as driving is concerned, some doctors use local anaesthetic in the epidural space and because this can cause widespread numbness in the legs, this would absolutely prevent a person from driving afterwards. We do not use local anaesthetic in the epidural space so this is not a factor when considering your ability to drive afterwards. However, please remember that these procedures are often performed for very painful and debilitating conditions, and pain alone can have an impact on your ability to drive.