

# ***Steroid Lumbar (low back) epidural & Caudal (tailbone) epidural*** (page 1 of 2)

## **Why have I been advised to have an epidural?**

Epidural injections can help reduce back and leg pain in some patients that have not responded to other treatments.

## **What are the alternatives?**

You carry on as you are or discuss alternative medication or therapies with your doctor.

## **Is there any preparation before the epidural?**

You may eat and drink normally and should take your usual medications.

But if you take any drugs to thin your blood (anticoagulants or platelet inhibitors), **it is very important to let the consultant know in advance.**

Failure to do so could result in your treatment being cancelled on the day. These types of drugs include warfarin, clopidogrel, rivaroxaban, apixaban and dabigatran. If you are unsure please speak to your consultant or contact the Day Surgery Unit on 01722 336262 ext 4094 before your appointment.

Please arrange for a responsible adult to drive you home afterwards or to accompany you if returning by bus or taxi.

## **How quickly will it work and how long will it last?**

This varies between patients, but if it is going to help with your pain you should notice an improvement in 3 to 7 days. Between 40% and 70% of patients get some degree of relief from an epidural. This can last from a few weeks to several months.

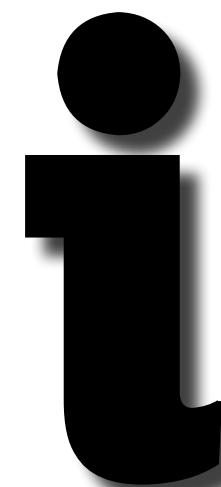
## **Do I need to rest after the epidural?**

You will be asked to rest for 20 or 30 minutes after the injection. After this there is no special reason to restrict normal activities. It is sensible to continue to treat your back with care over the next few days i.e. avoid any undue strain such as heavy lifting or strenuous exercise. It may be helpful to tell your workplace in advance that you will be having an epidural.

## **Are there any side effects?**

It is not uncommon to expect some increase in pain and soreness up to

**Pain Clinic**  
**01722 336262 ext 2050**



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: [customer care@salisbury.nhs.uk](mailto:customer care@salisbury.nhs.uk)

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: [www.salisbury.nhs.uk/FriendsFamily](http://www.salisbury.nhs.uk/FriendsFamily) or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

# Steroid Lumbar (low back) epidural & caudal (tailbone) epidural (2 of 2)



24-48 hours after the epidural. Please carry on taking your normal painkillers if necessary.

The steroid part of the epidural may cause some people to feel flushed and have a temporary reddening of the face. This should pass off within 48 hours. Some women experience a short-lived upset of their menstrual cycle (i.e. their next period may be delayed).

## Is there anything I should look out for afterwards?

Serious side effects are extremely rare but please be aware that the possibility of

- nerve damage
- bruising in the epidural space and
- infection can exist with any injection, however careful we are.

Steroids can also lead to short-lived rises in blood sugar levels in people with diabetes.

It is important that if you notice any of the following you should see your GP promptly, or attend your nearest 24hr Casualty/Accident & Emergency Department:

- The area around the injection site becomes more sore or inflamed in the following days.
- You have increasing pain after the initial 48 hour period.
- You feel generally unwell, feverish and develop a headache which you cannot link to another cause.
- You notice a change of sensation (numbness or tingling) in your perineal area. The perineal area lies between the top of your legs and includes front and back passage areas. It is sometimes called the "saddle area".
- You have difficulty passing urine, you lose the ability to know when your bladder is full, or you accidentally pass water.
- You experience any difficulty with passing motions or develop bowel incontinence (accidental soiling).
- You experience any other serious symptoms that worry you.

Name: \_\_\_\_\_ Drugs given: \_\_\_\_\_

Address: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Hospital No: \_\_\_\_\_

Please bring this sheet with you to the hospital.

Pain Clinic

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