Foraminal Epidural Steroid Injection (page 1 of 3)

What is a Foraminal Epidural Steroid Injection?

This procedure involves the injection of a combination of local anaesthetic and steroid into the back. The injection is performed under X-ray guidance by a consultant radiologist (X-ray doctor).

The aim of the injection is to help relieve leg pain caused by irritation or compression of one or more spinal nerves. Although the injection may help with some symptoms in the back, the main reason for performing the procedure is to help with leg symptoms.

Are there any side effects or risks?

- you may experience temporary numbness in the leg for up to 24 hours. In a small number of people this numbness causes temporary unsteadiness following the procedure. If you are already unsteady on your feet before the procedure this is likely to worsen temporarily
- approximately 1/100 people have a fainting episode.
- the risk of infection is very small.
- there is risk of allergic reaction to the injection which is very rare.
- the radiation dose is about the same as the average person receives from background radiation over 4-5 weeks. Special precautions are taken to keep the radiation dose to a minimum.

What if I am pregnant?

This examination should not be performed in women who are pregnant, unless there are exceptional circumstances. Please advise the department if you think you are, or might be, pregnant.

Is there any special preparation?

You may wish to have a shower or bath prior to attending for the procedure to ensure the area to be injected, the lower back, is clean.

Please wear loose clothing.

You will need someone with you that is able to drive you home. This should be an able-bodied adult who is able to support you if you become unsteady on your feet following the procedure.
Clinical Radiology
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What do I do when I arrive in the department?

Please report to the receptionist in the X-ray department first, then take a seat in the main reception waiting area. From here you will be collected by a member of the team, who will check your details. You will be shown to a cubicle where you will be asked to partly undress and put on a hospital gown. The gown should be done up with the ties at the back. We usually need you to take your clothes off top and bottom, but you can leave your underwear on. The doctor just needs to have access to your lower back region. If you attend wearing loose clothing then often changing into a gown is not necessary.

You should place your clothes and personal items in one of the bags provided, which you keep with you.

Please inform staff if you are carrying items of particular value so that we can take care of them appropriately.

You will be called into the X-ray room for the examination as soon as possible.

Who will I see?

In the X-ray room will be the radiologist who will be performing the examination, a radiographer and usually a radiographer assistant.

What happens during the foraminal epidural injection?

A radiographer or radiographer assistant will go through a check list with you. The consultant radiologist will then explain in detail what is involved with the injection.

For the injection to be performed you will need to find a comfortable position lying flat on your front. You may be asked to turn slightly from being flat on you front or even to lie completely on your side during the procedure to accurately locate the appropriate injection site.

The radiologist will use the X-ray camera to identify the exact spot for injecting. The area will then be cleaned with a very cold solution. Local anaesthetic is used first to numb the area. This may sting initially before it goes numb. During the injection you may be asked to slowly roll onto one side. During the procedure you may experience some discomfort at the site of the injection and you may feel some discomfort or pain in the area of your leg symptoms. Once the injection is completed the radiologist will cover the injection site with a small sticky plaster.

The whole procedure will normally take less than 15 minutes, and the injection itself usually takes up to 5 minutes.

What happens after the examination?

You will be allowed to leave the hospital shortly after the procedure. Some patients feel weakness or numbness in their leg, in the region of the distribution of the nerve that has been injected. Therefore, you must have an able-bodied relative or friend to drive you away from the hospital and to accompany you home.

After the procedure a report on the examination will be sent to the consultant or physiotherapist who referred you. It is necessary to allow some time in order to give the injection a chance to
work. For this reason the person who referred you will arrange a follow-up appointment which will be several weeks after the injection.

**Can I eat and drink afterwards?**

Yes. Please eat and drink normally.

**Can I drive home?**

NO. You must have a relative or friend to drive you home. You should be accompanied by an able-bodied adult who is able to support you if you become unsteady on your feet after the injection.

**Can I use public transport?**

You should not arrange to go home by bus.

If you arrange to be picked up by taxi then you must be accompanied by another able bodied adult who can support you if you become unsteady on your feet.

**Can I take pain killers after the injection?**

As the anaesthetic part of the injection wears off, which usually happens several hours after the injection, you may experience a worsening of your symptoms. This usually starts to subside after 2-3 days. Occasionally it can take 7-10 days before symptoms start to subside.

During this time you can take any medication you usually take, including painkillers.

**Keeping a symptom diary**

Between the injection and your follow-up appointment it is very helpful to keep a diary of your symptoms. This allows the person who referred you to more easily assess how you have responded.

Please note how the injection has changed your symptoms, if at all, over the first few hours, the next 48 hours and in the few weeks following the injection.

It is important that you keep an accurate record of your symptoms because this can help determine your future treatment.

**What if my symptoms do not go away?**

There may be several reasons for this, but if there is no improvement this should be reported back to the person who referred you. There may be options for other treatments available which you can discuss at your follow-up appointment.